

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

APPROVAL

OMB Number: Expires: 3235-0076 May 31, 2005

Estimated average burden hours per form

	SEC US	E ONLY
Prefix		Serial I
-	DATE R	FCEIVED

Name of Offering (check if this is an amendment and name has changed, and indicate change.) Ore Hill Concentrated Credit Fund Ltd. (the "Issuer")	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Type of Filing: New Filing Amendment	Section 4(6) ULOE
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	07079675
Ore Hill Concentrated Credit Fund Ltd.	
Address of Executive Offices (Number and Street, City, State, ZIP Code)	Telep ,
c/o Citi Hedge Fund Services (Cayman), Ltd., 27 Hospital Road, P.O. Box 1748, Cayman Corporate Centre, George Town, Grand Cayman KY1-1109, Cayman Islands	(345) 949-5884
Address of Principal Business Operations (Number and Street, City, State, ZIP Code) (if different from Executive Offices) same as above	Telephone Number (Including Area Code) same as above
Brief Description of Business To invest in a select number of companies that the investment mana- relative to the underlying value of their assets through investment in Ore Hill Concentrated Credit Hub	ger identifies as having mis-priced securities Fund Ltd., an offshore trading vehicle.
Type of Business Organization	cify): Cayman Islands Exempted Company
Month Year	Actual Estim RROCESSED OCT 1 5 2007
GENERAL INSTRUCTIONS	THOMSON
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4	
When to File. A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at the was mailed by United States registered or certified mail to that address.	is deemed filed with the U.S. Securities and Exchange at address after the date on which it is due, on the date
Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.	
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. A	Any copies not manually signed must be photocopies of

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Filing Fee: There is no federal filing fee.

A. BASIC IDENTIFICATION DATA	
2. Enter the information requested for the following:	
 Each promoter of the issuer, if the issuer has been organized within the past five years; 	
 Each beneficial owner having the power to vote or dispose, or direct the vote or dispose the issuer; 	ition of, 10% or more of a class of equity securities of
Each executive officer and director of corporate issuers and of corporate general and ma	naging partners of partnership issuers; and
Each general and managing partner of partnership issuers.	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	☐ Director ☐ General and/or Managing Partner
Full Name (Last name first, if individual) Ore Hill Partners LLC (the "Investment Manager")	
Business or Residence Address (Number and Street, City, State, Zip Code) 650 Fifth Avenue, 9th Floor, New York, New York 10019	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director General and/or Managing Partner
Full Name (Last name first, if individual) Nickoll, Benjamin E.	
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Ore Hill Partners LLC, 650 Fifth Avenue, 9th Floor, New York, New York 10019	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director General and/or Managing Partner
Full Name (Last name first, if individual) Wahl, Frederick	
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Ore Hill Partners LLC, 650 Fifth Avenue, 9th Floor, New York, New York 10019	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	☐ Director ☐ General and/or Managing Partner
Full Name (Last name first, if individual) Connors, William J.	
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Ore Hill Partners LLC, 650 Fifth Avenue, 9th Floor, New York, New York 10019	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director General and/or Managing Partner
Full Name (Last name first, if individual) DeRosa-Farag, Sam	
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Ore Hill Partners LLC, 650 Fifth Avenue, 9th Floor, New York, New York 10019	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Office	r Director General and/or Managing Partner
Full Name (Last name first, if individual) Irish, John	
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Ore Hill Partners LLC, 650 Fifth Avenue, 9th Floor, New York, New York 10019	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Office	r Director General and/or Managing Partner
Full Name (Last name first, if individual) Janson, Michael M.	
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Ore Hill Partners LLC, 650 Fifth Avenue, 9th Floor, New York, New York 10019	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

A. BASIC IDENTIFICATION DATA					
2. Enter the information requested for the following:					
 Each promoter of the issuer, if the issuer has been organized within the past five years; 					
 Each beneficial owner having the power to vote or dispose, or direct the vote or disposition the issuer; 	of, 10% or more of	a class of equity securities of			
Each executive officer and director of corporate issuers and of corporate general and managing	ng partners of partner	ship issuers; and			
Each general and managing partner of partnership issuers.					
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if individual) McGuiness, Michael					
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Ore Hill Partners LLC, 650 Fifth Avenue, 9th Floor, New York, New York 10019					
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if individual) Stearns, M. Edward					
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Ore Hill Partners LLC, 650 Fifth Avenue, 9th Floor, New York, New York 10019					
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if individual) Takacs, Thomas P.					
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Ore Hill Partners LLC, 650 Fifth Avenue, 9th Floor, New York, New York 10019					
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if individual) Bree, David					
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Citi Hedge Fund Services (Cayman), Ltd., 27 Hospital Road, P.O. Box 1748, Cayman Corpor 1109, Cayman Islands	rate Centre, George	Town, Grand Cayman KY1-			
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if individual) Seymour, Don					
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Citi Hedge Fund Services (Cayman), Ltd., 27 Hospital Road, P.O. Box 1748, Cayman Corpor 1109, Cayman Islands	rate Centre, George	Town, Grand Cayman KY1-			
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if individual) University of Wisconsin					
Business or Residence Address (Number and Street, City, State, Zip Code) 1848 University Avenue, P.O. Box 8860, Madison, Wisconsin 53708					
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if individual)					
Business or Residence Address (Number and Street, City, State, Zip Code)					

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

			-		В.	INFORM.	ATION AB	OUT OFF	ERING					
													YES	NO
I. Ha	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?							•••••		\boxtimes				
	Answer also in Appendix, Column 2, if filing under ULOE.													
2. Wh	2. What is the minimum investment that will be accepted from any individual?							\$5,000,000*						
									1	100 000			YES	NO
							ount, but i						\boxtimes	\Box
													_	_
or :	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be									son to be				
list	listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may									the name				
					ive (5) pers r or dealer (isted are ass	sociated per	sons or suc	m a broker	or dealer,	you may		
Full Name					or dealer									
	(2001		•, •• •••	,										
Not Applie														
Business o	r Resi	dence Ado	dress (Nur	nber and S	treet, City,	State, Zip	Code)							
														 -
Name of A	ssoci	ated Broke	er or Deale	er										
States in W	Vhich	Person Lis	sted Has S	olicited or	Intends to	Solicit Pur	chasers							
•													All States	
[Al.		[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
[IL]	•	[IN]	[IA]	[KS]	(KY)	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
[M]	_	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND] [WA]	(OH) [WV]	[OK] [WI]	[OR] [WY]	(PA) [PR]	
[RI]	<u> </u>	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[11 7]	[""]	[11 1]	[r.K]	
Full Name	(Last	name firs	t, if indivi	dual)										
Business o	r Res	idence Ade	dress (Nur	mber and S	Street, City.	State, Zip	Code)							
Dusiness o					,,	, ,	,							
													_	
Name of A	Associ	ated Broke	er or Deale	er										
States in W	Vhich	Person Lis	sted Has S	olicited or	Intends to	Solicit Pur	chasers							
					States)								All States	
[Al	_]	[AK]	[AZ]		[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
[IL]		[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
[M'	-	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR] [WY]	[PA] [PR]	
[RI]		[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WI]	[[[
Full Name	(Last	name firs	t, if indivi	idual)										
Business o	or Res	idence Ad	dress (Nu	mber and S	Street, City	, State, Zip	Code)							
						, , ,	•							
·· ···														-
Name of A	Associ	ated Broke	er or Deal	er										
States in V	Vhich	Person Li	sted Has S	Solicited or	r Intends to	Solicit Pur	chasers							
													All States	ŀ
(Al		[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
[11]		[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
[M		[NE]	[NV]	[NH]	[N1]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
[RI	IJ	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	

[TN] [TX] [UT] [VT] [VA] [WA] [WV] [V (Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Amount Already Aggregate Offering Price Sold Type of Security Debt \$0 \$0 Common Preferred Convertible Securities (including warrants) \$0 Partnership Interests (the "Interests") \$ Other (Specify Redeemable Participating Voting Shares ("Shares")(a)...... \$45,000,000 \$500,000,000(b) Total \$45,000,000 \$500,000,000(b) Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number **Dollar Amount** of Purchases Investors \$45,000,000 Accredited Investors Non-accredited investors 0 \$0 N/A SN/A Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. **Dollar Amount** Type of Sold Security Type of offering Rule 505 N/A \$N/A Regulation A..... N/A \$N/A Rule 504 N/A \$N/A Total N/A \$N/A a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Printing and Engraving Costs \$5,000

_____ S5,000

(b) Open-end fund; estimated maximum aggregate offering amount.

Other Expenses (identify) Filing Fees

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceed proceeds to the issuer."

\$400	250	$\alpha\alpha\alpha$

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C – Question 4.b above.

	Payments to Officers, Directors, & Affiliates	Payments to Others
Salaries and fees	s o	∑ 50
Purchase of real estate	\$0	№ 20
Purchase, rental or leasing and installation of machinery and equipment	so	⊠ \$0
Construction or leasing of plant buildings and facilities	\$0	⊠ \$ 0
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another		57
issuer pursuant to a merger)		⊠ \$0
Repayment of indebtedness	so	⊠ s o
Working capital) so	⊠ 5 0
Other (specify): Portfolio Investments	\$0	\$499,950,000
	so	⊠ so
Column Totals	·	\$499,950,000
Total Payments Listed (column totals added)	\$499,950,	000
D. FEDERAL SIGNATURE		
The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice if filed signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.		
Issuer (Print or Type) Signature	Date	
Ore Hill Concentrated Credit Fund Ltd.	October 9,	2007
Name of Signer (Print or Type) Title of Signer (Print or Type)		

Vice President of the Investment Manager

ATTENTION

Claude Baum

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).

