

# 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

142	175		1
OMB	APPRO	VAL	_
OMB Num			5-0076
Expires: Estimated	April	30.2	2008
Estimated '	averäge	e bure	den
hours per re	espons	e <u>.</u>	16.00

SEC USE ONLY						
Prefix	Serial					
DATE RECEIVED						
	1					

1. Enter the information requested about the issues	
1. Enter the information requested about the issuer	
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	07086229
Pacific West Vending, LLC	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
1875 S. Bascom Avenue, Suite 116 - 200, Campbell, CA 95008 (4	08)859-6489
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices)	PROCESSED
Brief Description of Business	
Vending machine placement and maintenance	DEC 3 1 2007
Type of Business Organization  corporation business trust limited partnership, already formed limited partnership, to be formed Limited liability	tse specify): THOMSON FINANCIAL

#### GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

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. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

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.

Filing Fee: There is no federal filing fee.

#### 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.

#### - 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 predictated on the filing of a federal notice.

#### A. BASIC IDENTIFICATION DATA 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 of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Executive Officer Director General and/or Check Box(es) that Apply: Promoter ■ Beneficial Owner Managing Partner Full Name (Last name first, if individual) Brothers, Phillip Jr. Business or Residence Address (Number and Street, City, State, Zip Code) 1875 S. Bascom Avenue, Suite 116-200, Campbell, CA 95008 Check Box(es) that Apply: Beneficial Owner Executive Officer General and/or Promoter Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Beneficial Owner Executive Officer General and/or Promoter Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Executive Officer General and/or Check Box(es) that Apply: Promoter ☐ Beneficial Owner Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Beneficial Owner Executive Officer General and/or Promoter Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Beneficial Owner Executive Officer Director General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Executive Officer Check Box(es) that Apply: ☐ Promoter Beneficial Owner 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)

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l.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?							Yes 🔀	No				
١.	Answer also in Appendix, Column 2, if filing under ULOE.							<u> </u>					
2.								\$_25,	00.00				
								Yes	No				
3.										Z			
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 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 set forth the information for that broker or dealer only.												
Ful	Full Name (Last name first, if individual)												
Bu	siness or	Residence	Address (N	umber and	l Street, Ci	ty, State, Z	ip Code)						
Nai	me of As	sociated Br	oker or Dea	aler							<u></u>		
Sta	tes in W	ich Person	Listed Has	Solicited	or Intends	to Solicit l	urchasers						
	(Check	"All States	" or check	individual	States)		•••••		•••••			☐ Al	l States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Ful	l Name (	Last name	first, if indi	vidual)		•			-				
Bu	siness or	Residence	Address (N	Number an	d Street, C	ity, State, 2	Zip Code)		-				
Na	me of As	sociated Br	oker or Dea	aler									
Sta	tes in Wi	nich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	or check	individual	States)	******	***************************************			*****************	•••••	All States	
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Ful	l Name (	Last name	first, if indi	ividual)									
Bu	siness or	Residence	Address (N	Number an	d Street, C	Sity, State, 2	Zip Code)			ı			
Na	me of As	sociated Br	oker or De	aler									
Sta	tes in WI	nich Person	Listed Has	Solicited	or Intends	to Solicit l	Purchasers						
(Check "All States" or check individual States)								1 States					
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR

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

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the 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.			
	Type of Security	Aggregate Offering Pri		Amount Already Sold
	Debt	<b>.</b>	_	\$
	Equity	900,000.0	0	\$
	✓ Common Preferred			
	Convertible Securities (including warrants)	\$		\$
	Partnership Interests	<u></u>		
	Other (Specify)			
	Total	900,000.0	0	\$ 0.00
	Answer also in Appendix, Column 3, if filing under ULOE.			<u></u>
2.	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 Investors		Dollar Amount of Purchases
	Accredited Investors			\$
	Non-accredited Investors			\$
	Total (for filings under Rule 504 only)			\$
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	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.			
	Type of Offering	Type of Security		Dollar Amount Sold
	Rule 505			\$
	Regulation A			\$
	Rule 504	Units		\$_0.00
	Total			\$_0.00
4	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 insurer. 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.			
	Transfer Agent's Fees			\$
	Printing and Engraving Costs			\$
	Legal Fees		Z	\$_3,000.00
	Accounting Fees	***************************************		\$
	Engineering Fees			\$
	Sales Commissions (specify finders' fees separately)			\$
	Other Expenses (identify)			<b>s</b>
	Total			\$_3,000.00

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS							
	b. Enter the difference between the aggregate offering and total expenses furnished in response to Part C — C proceeds to the issuer."			s89	7,000.00			
5.	Indicate below the amount of the adjusted gross pro- each of the purposes shown. If the amount for any check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	purpose is not known, furnish an estimate and the payments listed must equal the adjusted gross						
			Payments to Officers, Directors, & Affiliates		ayments to Others			
	Salaries and fees		] \$	<b>S_</b>				
	Purchase of real estate		]\$	□ \$_				
	Purchase, rental or leasing and installation of macl	ninery [	]\$	<b>Z</b> \$_	350,000.00			
	Construction or leasing of plant buildings and faci	lities	]\$	□ \$_				
	Acquisition of other businesses (including the valu offering that may be used in exchange for the asset issuer pursuant to a merger)	s or securities of another	٦\$	□\$				
	Repayment of indebtedness	—	_					
	Working capital							
	Other (specify):		] \$	□ <b>-</b>				
			_	_				
			]\$	<b>□</b> \$_				
	Column Totals	[	\$_300,000.00	□ <b>s</b> _	600,000.00			
	Total Payments Listed (column totals added)	\$ <u></u>						
		D. FEDERAL SIGNATURE						
sig	issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to furr information furnished by the issuer to any non-accre	ish to the U.S. Securities and Exchange Commiss	sion, upon writter	e 505, reque	the following st of its staff,			
İssi	er (Print or Type)	Signature 20	ate	••				
Pa	cific West Vending, LLC	Thilly brother	12-12-0	27				
Na	ne of Signer (Print or Type)	Title of Signer (Print or Type)						
Phi.	lip Brothers, Jr.	Manager						
Na	ne of Signer (Print or Type)	Title of Signer (Print or Type)	12-12-0	<u>97</u>				

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**END** 

- ATTENTION -

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