



# **UNITED STATES**

SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

# FORM D

1 0 7 0 0
OMB APPROVAL
OMB Number: 3235-0076
Expires: April 30, 2008
Estimated average burden

hours per response.. . 16.00

142M83

SEC USE ONLY					
Prefix		Serial			
DAT	E RECEI	VED			

08040345	FORM D	Γ	SEC	USE ON	ILY
Mail processing		Ī	Prefix		Serial
Property in the state of the st	NOTICE OF SALE OF SECURITIES	Ĺ			<u> </u>
Section FFR	PURSUANT TO REGULATION D,		DATE	RECEI	VED
FER	SECTION 4(6), AND/OR	, <u>L</u>			
10/9200	UNIFORM LIMITED OFFERING EXEMPTION	•			
FEB 19 2008					
Name of Offering Propeck if the	is is an amendment and name has changed, and indicate cl	hange.)			
9.5% Notes - DBSI 2008 Notes C	Corporation				
Filing Under (Check box(es) that apply):	[] <u>Rule 504</u> [] <u>Rule 505</u> [X] <u>Rule 506</u> [] Secti	on 4(6) [ ] ULC	ÞΕ		
	Type of Filing: [X] New Filing [] Amendment		<b>&gt;</b> F86		
	A. BASIC IDENTIFICATION DATA	PRO	_E3		
Enter the information requested	I about the issuer	FEB	<b>2</b> 6 200	8	
Name of Issuer ([ ] check if this i DBSI 2008 Notes Corporation	s an amendment and name has changed, and indicate change.	) <b>11</b> (5)	MANCIAL MANCIAL		
Address of Executive Offices 1550 S. Tech Lane		e Number (Includir 78-9110	ng Area Co	ode)	
Address of Principal Business Op (if different from Executive Offices		one Number (Inclu	ding Area	Code)	
Brief Description of Business To provide loans to affiliates of	issuer to acquire, rehabilitate, entitle, develop and finance	real estate prope	rties		
Type of Business Organization				_,	
[X] corporation	[ ] limited partnership, already formed [ ] other	(please specify):			
[ ] business trust	[ ] limited partnership, to be formed				
	Month Year				
Actual or Estimated Date of Incorp	poration or Organization: [ 01 ] [ 08 ] [ X ] A	ctual [ ] Estimate	ed		
	ganization: (Enter two-letter U.S. Postal Service abbreviation fo CN for Canada; FN for other foreign jurisdiction) [1][				
GENERAL INSTRUCTIONS				<del></del>	

## 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. 77d(6).

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 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 in 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 state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

# A. BASIC IDENTIFICATION DATA

# 2. Enter the information requested for the following:

1550 S. Tech Lane, Meridian, ID 83642

- 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.
- [ ] Director [ X ] Managing [X] Promoter [X] Beneficial [ ] Executive Check Box(es) that Member Officer Owner Apply: Full Name (Last name first, if individual) **DBSI** Housing, Inc. Business or Residence Address (Number and Street, City, State, Zip Code) 1550 S. Tech Lane, Meridian, ID 83642 [ ] Promoter [ X ] Beneficial [X] Executive [X] Director [] General and/or Check Box(es) that Owner Officer Managing Apply: Partner Full Name (Last name first, if individual) Swenson, Douglas L. Business or Residence Address (Number and Street, City, State, Zip Code) 1550 S. Tech Lane, Meridian, ID 83642 Check Box(es) that Apply: [ ] Promoter [ ] Beneficial Owner [ X ] Executive Officer [ X ] Director [ ] General and/or Managing Partner Full Name (Last name first, if individual) Hassard, Charles E. Business or Residence Address (Number and Street, City, State, Zip Code) 1550 S. Tech Lane, Meridian, ID 83642 Check Box(es) that Apply: [ ] Promoter [ ] Beneficial Owner [ X ] Executive Officer [ X ] Director [ ] General and/or Managing Partner Full Name (Last name first, if individual) Mayeron, John M. 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.)

		-			Е	. INFOR	MATION	ABOUT C	FFERING	3		-		
1. Has t	he issu	er sold, o	r does the	e issuer ir	itend to s	ell, to non	ı-accredite	ed investo	rs in this	offering?.		Yes [ ]	No [ X]	
			An	swer also	in Apper	ndix, Colu	ımn 2, if fi	ling under	ULOE.				1-3	
2. What	is the n	ninimum ay be acc	investme	nt that wil <b>the disc</b> e	l be accepretion of	pted from <b>the issu</b> e	any indiv er)	idual?.(A	smaller r	ninimum		<u>\$50,</u> (	000.00	
3. Does	the offe	ering perr	mit joint o	wnership	of a single	e unit?						Yes [X]	No [ ]	
indirectl securitie register (5) pers informa	y, any c es in the ed with ons to t tion for	commission of the SEC of listed a that broke	on or simi . If a persi and/or wi are assoc er or deal	lar remur on to be li th a state iated pers er only.	eration fo isted is ar or states	or solicitat n associat , list the n	een or wil ion of pur ted persor tame of th ter or dea	chasers in n or agent ne broker (	n connect t of a brok or dealer.	ion with s er or deal If more th	ales of ler			
		t name fi Group,	rst, if indiv LLC	vidual)										
			Address ( I, Calaba			t, City, St	ate, Zip C	ode)						
Name o	f Assoc	iated Bro	ker or De	aler										
					d or Inten		icit Purcha	asers		ı	] All Stat	es		
(AL)		(AZ) x	[AR] x	[CA] x	[CO] x	[CT] x	(DE)	[DC]	[FL] x	[GA] x	(HI) x		D] x	
[IL] x	[IN]	[IA] x	[KS]	[KY]	[LA]	[ME]	[MD] x	[MA] x	[MI]	[MN] x	[MS]	_	иO]	
[MT] x	[NE]	-	[NH] x	[NJ] x	[NM] x	[NY] x	[NC] x	[ND] x	[OH]	[OK]	[OR] x	_	PA] x	
[RI]	[SC]	[SD]	[TN] x	[TX] x	[UT] x	[VT]	[VA] x	[WA] x	[WV]	[Wi] x	[WY]	[F	PR] 	
Full Nai Askar (			rst, if indi	vidual)						· · · · · ·				
Busines 8011 34	s or Re	sidence . South, S	Address ( te 350, B	Number a	and Streeton, MN 5	t, City, St <b>5425</b>	ate, Zip C	ode)						
Name o	of Assoc	iated Bro	ker or De	aler		<u> </u>								
States i	 n Which	n Person	Listed Ha	s Solicite	d or Inten	ds to Sol	icit Purcha	asers						
(Check	"All Sta	tes" or ch	neck indiv	idual Stat	es)					•	] All Stat			
[AL] x	[AK] x					[CT]x	[DE] x	[DC]	[FL] x	[GA] x	[HI] x	[1]	=	
[IL] x [MT] x	[IN] x [NE] x	(IA] x [NV] x	(KS) x (NH) x		[LA] x [NM] x	[ME] x [NY] x	[MD] x [NC] x	[MA] x [ND] x	[MI] x [OH] x	[MN] x [OK] x	[MS] x [OR] x	-	/IO] x 'A] x	
[RI] x	[SC] x				[UT] x	[VT] x	[VA] x	[WA] x	[WV] x	[WI] x	[WY] x	_	·R]	
			rst, if indi		Inc.						<del></del>		<u>.                                    </u>	
							ate, Zip C	ode)		<del></del>		_ +		<u> </u>
					52302-06		_							
Name o	of Assoc	iated Bro	ker or De	aler							···			
					d or Intentes)		icit Purcha	asers		[ ]	] All Stat	es		
[AL] x		[AZ] x			(CO) x		[DE] x	[DC] x	[FL] x	[GA] x	[HI] x		D] x	
[IL] x	[IN] x	[IA] x	[KS] x			[ME] x	[MD] x	[MA] x	[MI] x	[MN] x	[MS] x		10] x	
[MT] x	[NE] x		• -		[NM] x	[NY] x	[NC] x	[ND] x IWA1 x	(OH) x	[OK] x IWII x	[OR] x	_	PA] x PR1	
IPCII Y	Later Y	: ISSLU Y	I I I VI I Y	IIAIX	10111	IVIIX	IVMIX	IVVALIX	IVVVIX	IVVIIA	144117	, 15	• N1	

Business or Residence Address (Number and Street, City, State, Zip Code) 725 Town & Country Road, Suite 530, Orange, CA 92868 Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers [ ] All States (Check "All States" or check individual States) ...... [ID] x [GA] x [CO] x [CT] x (FL) x [HI] x [DE] x [DC] x  $[AK] \times [AZ] \times [AR] \times [CA] \times$ [MN] x [MS] x [MO] x [KY] x [ME] x (MD) x [MA] x [Mi] x [LA] x [KS] x [IL] x [IN] x [IA] x [NC] x [ND] x [OH] x [OK] x [OR] x [PA] x [NJ] x [NM] x [NY] x [NH] x [MT] x  $[NE] \times [NV] \times$ [PR] [WV] x [WI] x [WY] x [VT] x [VA] x [WA] x [SC] x [SD] x [TN] x [TX]x[UT] x [RI] x Full Name (Last name first, if individual) Cullum & Burks Securities, Inc. Business or Residence Address (Number and Street, City, State, Zip Code) One Galleria Tower, Dallas, TX 75240 Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers [ ] All States (Check "All States" or check individual States) ..... [AR]  $\times$  [CA]  $\times$  [CO]  $\times$  [CT]  $\times$ [HI] [DE] [DC] [FL] x [GA] x [(D] x [AL] x [AK] [AZ] x [MS] x [MO] x [LA] x [ME] x [MD] x [MA] x [MI] x [MN] x [KY] x [IN] x [IA] x IKS1 x [IL] x (OR) x [PA] x [ND] x [OH] x IOKI x [NM] x (NY) x [NC] x [MT] x [NE] x [NV] x [NH] (NJ) x [WY] [PR] [VA] x [WA] x [WV] [WI] x [UT] x [VT]ISC1 x ISD1  $[TN] \times [TX] \times$ **IRI** Full Name (Last name first, if individual) **Direct Capital Securities** Business or Residence Address (Number and Street, City, State, Zip Code) 1333 2<sup>nd</sup> Street, Suite 600, Santa Monica, CA 90401 Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) ..... [ x ] All States [FL] (DC) [GA] [HI] [IDI] [AR] [CA] [CO] [DE] [AL] [AK] [AZ] [MS] [MO] [MI] [MN] [MD] [MA] [IN] [[A]] [KS] [KY] [LA] [ME] [IL](OK) [OR] [PA] (ND) [OH] [MM] [NY] [NC] IMT [NE] [NV] [NH] [UN] [WI] [WY] [PR] [MV][SD] [TN] ITXI [UT] [VT][VA] [WA] [RI] [SC] Full Name (Last name first, if individual) Finance 500 Business or Residence Address (Number and Street, City, State, Zip Code) 19762 Macarthur Blvd #200, Irvine, CA 92612 Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) ...... All States [GA] x [HI] x [ID] x [FL] x  $[AR] \times [CA] \times [CO] \times$ [DE] x [DC] x [AL] x [AK] [AZ] xβCΠ x

[ME] x

[NY] x

 $[V\Pi]$ 

[MD] x

[NC] x

[VA] x

[MA] x

[WA] x

[ND]

[MI] x

[OH] x

[WV] x

[MN] x

[OK] x

[WI] x

[MS] x

[OR] x

[WY] x

[MO] x

[PA] x

[PRI

Full Name (Last name first, if individual) First Montauk Securities Corp.

[IA] x

[NV] x

[IL] x

[RI] x

(IN) x

 $[MT] \times [NE] \times$ 

[KS] x

[NH]

 $[SC] \times [SD] \times [TN] \times [TX] \times$ 

[KY] x

[NJ] x

[LA] x

[NM] x

[UT] x

	of Associa	ited Brok	er or Dea	aler								
States	in Which I	Person L	isted Has	Solicited	or Inten	ds to Solid	cit Purcha	sers	· · · · · · · · · · · · · · · · · · ·			
(Check	"All State	s" or che	eck indivi	dual State	es)	,,,,,,,,				[ x ]	All States	S
[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]
[MT]	[NE]	[NV]	[NH]	[NJ]	[MM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
RI]	[SC]	[SD]	[TN]	[XT]	[UT] 	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
	me (Last ndent Fir											
Busine 7425 N	ss or Res lission V	idence A	ddress (I ad, Suite	Number a	nd Street n Diego,	, City, Sta	ate, Zip C	ode)		-		
Name (	of Associa	ated Brok	er or De	aler								· · · · · · · · · · · · · · · · · · ·
	in Which						cit Purcha	sers	···	<u> </u>		
(Check	"All State	es" or che								•	] All State	
[AL] x	[AK] x	[AZ] x		[CA] x		[CT] x	[DE]	[DC]	[FL] x	[GA] x	[HI] X	[ID] x
[IL] x	[IN] x	[IA] x	[KS] x	[KY] x	[LA] x	[ME] x	[MD] x	[MA] x	[MI] x	[MN] x	[MS] x	[MO] x
(MT) x	[NE] x	[NV] x	[NH]	[NJ] x	(NM) x	[NY] x [VT]	[NC] x [VA] x	[ND] x [WA] x	[OH] x [WV] x	[OK] [WI] x	[OR] x [WY] x	[PA] x [PR]
(RI) x Full Na	[SC] x me (Last	[SD] x name firs	(TN) x  st, if indiv		(UT) x	[4.1]	[•]^	[**/*] ^	[]^	[] ^	1.1.1	E - 4
	inancial											
	ss or Res ixth Ave.					, City, Sta	ate, Zip C	ode)				
	of Associa	ated Brok	er or De	aler								
Name	of Associa				d or Inten	ds to Soli	cit Purcha	asers	····	· · · · · · · · · · · · · · · · · · ·		
Name States		Person L	isted Ha	s Solicite			cit Purcha	asers		[	] All State	
Name States	in Which	Person L	isted Ha	s Solicite dual Stat		[CT] x	[DE] x	asers [DC] x	[FL] x	[ [GA] x	- [HI] x	[ID] x
Name States (Check [AL] x [IL] x	in Which "All State [AK] [IN] x	Person Les" or che [AZ] x [IA] x	isted Ha	s Solicite dual Stat [CA] x [KY] x	es) [CO] x [LA] x	[CT] x [ME] x	[DE] x [MD] x	[DC] x [MA] x	[MI] x	[MN] x	[HI] x [MS] x	[ID] x [MO] x
States (Check [AL] x [IL] x [MT] x	in Which "All State [AK] [IN] x [NE] x	Person Les" or che [AZ] x [IA] x [NV] x	isted Hareck indivi [AR] x [KS] x [NH]	s Solicite dual Stat [CA] x [KY] x [NJ] x	es) [CO] x [LA] x [NM] x	[CT] x [ME] x [NY] x	[DE] x [MD] x [NC] x	[DC] x [MA] x [ND]	[MI] x [OH] x	[MN] x [OK] x	[HI] x [MS] x [OR] x	[ID] x [MO] x [PA] x
Name States (Check [AL] x [IL] x	in Which "All State [AK] [IN] x	Person Les" or che [AZ] x [IA] x	isted Ha eck indivi [AR] x [KS] x	s Solicite dual Stat [CA] x [KY] x	es) [CO] x [LA] x	[CT] x [ME] x	[DE] x [MD] x	[DC] x [MA] x	[MI] x	[MN] x	[HI] x [MS] x	[ID] x [MO] x
Name States (Check [AL] x [IL] x [MT] x [RI] x	in Which "All State [AK] [IN] x [NE] x	Person Les" or che [AZ] x [IA] x [NV] x [SD] x	isted Ha eck indivi [AR] x [KS] x [NH] [TN] x	s Solicite dual Stat [CA] x [KY] x [NJ] x [TX] x	es) [CO] x [LA] x [NM] x	[CT] x [ME] x [NY] x	[DE] x [MD] x [NC] x	[DC] x [MA] x [ND]	[MI] x [OH] x	[MN] x [OK] x	[HI] x [MS] x [OR] x	[ID] x [MO] x [PA] x
Name States (Check [AL] x [IL] x [MT] x [RI] x Full Na MCL F Busine	in Which "All State [AK] [IN] x [NE] x [SC] x	Person Les" or che [AZ] x [IA] x [NV] x [SD] x name fire Group, le	isted Hareck indiving [AR] x [KS] x [NH] [TN] x st, if indivinc.	s Solicitedual State [CA] x [KY] x [NJ] x [TX] x ridual)	(CO) x (LA) x (NM) x (UT) x	[CT] x [ME] x [NY] x [VT]	[DE] x [MD] x [NC] x [VA] x	[DC] x [MA] x [ND] [WA] x	[MI] x [OH] x	[MN] x [OK] x	[HI] x [MS] x [OR] x	[ID] x [MO] x [PA] x
Name States (Check [AL] x [IL] x [MT] x [RI] x Full Na MCL F Busine 1869 V	in Which "All State [AK] [IN] x [NE] x [SC] x me (Last inancial of	Person Les" or che [AZ] x [IA] x [NV] x [SD] x name fire Group, lidence An Blvd.,	isted Hareck indiving [AR] x [KS] x [NH] [TN] x st, if indivinc.	s Solicite dual Stat [CA] x [KY] x [NJ] x [TX] x ridual)	(CO) x (LA) x (NM) x (UT) x	[CT] x [ME] x [NY] x [VT]	[DE] x [MD] x [NC] x [VA] x	[DC] x [MA] x [ND] [WA] x	[MI] x [OH] x	[MN] x [OK] x	[HI] x [MS] x [OR] x	[ID] x [MO] x [PA] x
Name States (Check [AL] x [IL] x [MT] x [RI] x Full Na MCL F Busine 1869 V	in Which "All State [AK] [IN] x [NE] x [SC] x Ime (Last inancial of Association o	Person Les" or che [AZ] x [IA] x [NV] x [SD] x name fire Group, led idence A in Blvd.,	isted Hareck indiving [AR] x [KS] x [NH] [TN] x st, if indivinc.	s Solicite dual Stat [CA] x [KY] x [NJ] x [TX] x ridual)	es)	[CT] x [ME] x [NY] x [VT]	[DE] x [MD] x [NC] x [VA] x	[DC] x [MA] x [ND] [WA] x	[MI] x [OH] x	[MN] x [OK] x	[HI] x [MS] x [OR] x	[ID] x [MO] x [PA] x
Name States (Check [AL] x [IL] x [MT] x [RI] x Full NamCL F Busine 1869 V Name States	in Which "All State [AK] [IN] x [NE] x [SC] x Ime (Last inancial (	Person Les" or che [AZ] x [IA] x [INV] x [SD] x name fire Group, lidence An Blvd., ated Brokenson Lesson Le	isted Hareck indiving [AR] x [KS] x [NH] [TN] x st, if indivinc.	s Solicitedual State [CA] x [KY] x [NJ] x [TX] x ridual)  Number a language control of the contr	es)	[CT] x [ME] x [NY] x [VT]	[DE] x [MD] x [NC] x [VA] x	[DC] x [MA] x [ND] [WA] x	[MI] x [OH] x	[MN] x [OK] x [WI] x	[HI] x (MS] x (OR] x [WY] x	[ID] x [MO] x [PA] x [PR]
Name States (Check [AL] x [IL] x [MT] x [RI] x  Full Name 1869 V Name States (Check	in Which "All State [AK] [IN] x [NE] x [SC] x ime (Last inancial ( ss or Res V. Littleto in Which	Person Les" or che [AZ] x [IA] x [INV] x [SD] x name fire Group, lidence An Blvd., ated Brokenson Lesson Le	isted Hareck indiving [AR] x [KS] x [NH] [TN] x st, if indivinc.  Address (Individual to the content of the con	s Solicitedual State [CA] x [KY] x [NJ] x [TX] x ridual)  Number a language control of the contr	(CO] x (LA] x (NM] x (UT] x	[CT] x [ME] x [NY] x [VT]	[DE] x [MD] x [NC] x [VA] x	[DC] x [MA] x [ND] [WA] x	[MI] x (OH) x [WV] x	[MN] x [OK] x [WI] x	[HI] x (MS] x [OR] x [WY] x	[ID] x [MO] x [PA] x [PR]
Name States (Check [AL] x [IL] x [MT] x [RI] x Full Name 1869 V Name States (Check	in Which "All State [AK] [IN] x [NE] x [SC] x me (Last inancial of Association Which to "All State	Person Les" or che [AZ] x [IA] x [INV] x [SD] x name fire Group, led idence A in Blvd., ated Brokes" or che	isted Hareck indiving [AR] x [KS] x [NH] [TN] x st, if indivinc.  Address (Individual to the content of the con	s Solicitedual State [CA] x [KY] x [NJ] x [TX] x didual)  Number a constitution of the	es)	[CT] x [ME] x [NY] x [VT]  t, City, Sta	[DE] x [MD] x [NC] x [VA] x  ate, Zip C  cit Purcha [DE] x [MD] x	[DC] x [MA] x [ND] [WA] x ode)	[MI] x [OH] x [WV] x	[MN] x [OK] x [WI] x	[HI] x (MS] x [OR] x [WY] x	[ID] x [MO] x [PA] x [PR] es [ID] x [MO] x
Name States (Check [AL] x [IL] x [MT] x [RI] x Full Name 1869 V Name States (Check [AL] x [IL] x [MT] x	in Which "All State [AK] [IN] x [NE] x [SC] x Ime (Last Inancial of Association Which to "All State [AK] [IN] x [NE] x	Person L es" or che [AZ] x [IA] x [INV] x [SD] x name fire Group, In idence A in Blvd., ated Brol Person L es" or che [AZ] x [IA] x [NV] x	isted Hareck indiving [AR] x [KS] x [NH] [TN] x [NH] x [KS] x [Address (Indiving [AR] x [KS] x [NH]	s Solicite dual Stat [CA] x [KY] x [NJ] x [TX] x ridual)  Number a n, CO 801 aler s Solicite dual Stat [CA] x [KY] x	es)	[CT] x [ME] x [NY] x [VT]  ds to Soli	[DE] x [MD] x [NC] x [VA] x  ate, Zip C  cit Purcha [DE] x [MD] x [NC] x	[DC] x [MA] x [ND] [WA] x ode)	[MI] x [OH] x [WV] x	[MN] x [OK] x [WI] x	[HI] x (MS] x (OR] x [WY] x	[ID] x [MO] x [PA] x [PR] (ID] x [MO] x [PA] x
Name States (Check [AL] x [IL] x [MT] x [RI] x Full NamCL F Busine 1869 V Name States (Check [AL] x [IL] x	in Which "All State [AK] [IN] x [NE] x [SC] x  Ime (Last Inancial of Association Which "All State [AK] [IN] x	Person Les" or che [AZ] x [IA] x [INV] x [SD] x name fire Group, In idence A in Blvd., ated Brokes" or che [AZ] x [IA] x [NV] x	isted Hareck indiving [AR] x [KS] x [NH] [TN] x st, if indivinc.  Individual	s Solicite dual Stat [CA] x [KY] x [NJ] x [TX] x ridual)  Number a n, CO 801 aler s Solicite dual Stat [CA] x [KY] x	es)	[CT] x [ME] x [NY] x [VT]  t, City, Sta	[DE] x [MD] x [NC] x [VA] x  ate, Zip C  cit Purcha [DE] x [MD] x	[DC] x [MA] x [ND] [WA] x ode)	[MI] x [OH] x [WV] x	[MN] x [OK] x [WI] x	[HI] x (MS] x [OR] x [WY] x	[ID] x [MO] x [PA] x [PR] es [ID] x [MO] x
Name States (Check [AL] x [IL] x [IL] x [RI] x Full Na MCL F Busine 1869 V Name States (Check [AL] x [IL] x [IL] x [RI] x	in Which "All State [AK] [IN] x [NE] x [SC] x Ime (Last Inancial of Association Which to "All State [AK] [IN] x [NE] x	Person Les" or che [AZ] x [IA] x [INV] x [SD] x name fire Group, le idence A in Blvd., ated Brole Person Les" or che [AZ] x [IA] x [NV] x [SD] x	isted Hareck indiving [AR] x [KS] x [NH] [TN] x st, if indivinc.  Iddress (Indivince or Deck indiving [AR] x [KS] x [NH] [TN] x	s Solicite dual Stat [CA] x [KY] x [NJ] x [TX] x ridual)  Number a 1, CO 801 aler s Solicite dual Stat [CA] x [KY] x [NJ] x [TX] x	es)	[CT] x [ME] x [NY] x [VT]  ds to Soli	[DE] x [MD] x [NC] x [VA] x  ate, Zip C  cit Purcha [DE] x [MD] x [NC] x	[DC] x [MA] x [ND] [WA] x ode)	[MI] x [OH] x [WV] x	[MN] x [OK] x [WI] x	[HI] x (MS] x (OR] x [WY] x	[ID] x [MO] x [PA] x [PR] (ID] x [MO] x [PA] x

[ND]

[WA] x

[NC] x

[VA] x

[OH] x

[WV] x

[OK] x

[WI] x

[OR] x

[WY] x

[PA] x

[PR]

Full Name (Last name first, if individual)
Private Consulting Group

[SC] x [SD] x [TN] x

[NH]

[NE] x [NV] x

[MT] x

[RI] x

Business or Residence Address (Number and Street, City, State, Zip Code 4650 S.W. Macadam Ste. 100, Portland, OR 97239

[NJ] x

[TX] x

[NM] x

[UT] x

Name of Associated Broker or Dealer

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers [ ] All States (Check "All States" or check individual States) ...... [AZ] x [AR] x [CA] x [CO] x [CT] x [DE] x (DC) x [FL] x IGA1 x (HI) x [ID] x [AL] x [AK] [ME] x [MA] x  $[MI] \times$ [MN] x [MS] x [MO] x [KY] x [LA] x[MD] x [KS] x (IL) x [IN] x [IA] x [NY] x [NC] x [ND] (OH) x [OK] x [OR] x [PA] x [NJ] x [NM] x [MT] x [NE] x [NV] x [NH] [WI] x [WY] x [PR] [WV] x [VA] x [WA] x [RI]x[SC] x [SD] x [TN] x [TX] x [UT] x  $[V\Pi]$ 

[NY] x

[VI]

Full Name (Last name first, if individual)

QA3 Financial Group

Business or Residence Address (Number and Street, City, State, Zip Code)

1 Valmont Plaza, 4<sup>th</sup> Floor, Omaha, NE 68154

Name of Associated Broker or Dealer

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers [ ] All States (Check "All States" or check individual States) ...... (FL) x [GA] x [HI] x [ID] x  $[AR] \times [CA] \times [CO] \times [CT] \times$ [DC] x (DE) x [AL] x [AK] [AZ] x [MA] x [MI] x [MN] x [MS] x [MO] x [IN] x [KS] x [KY] x [LA] x [ME] x (MD) x [IL] x [IA] x [OR] x [PA] x [NC] x [ND] [OH] x [OK] x x ITMì  $[NE] \times [NV] \times$ [NH] [NJ] x [NM] x  $[NY] \times$ [PR]  $[SC] \times [SD] \times [TN] \times [TX] \times [UT] \times$ [VA] x [WA] x [WV] x [WI] x [WY] x [VT][RI] x

Full Name (Last name first, if individual)
Regent Capital

Business or Residence Address (Number and Street, City, State, Zip Code) 28025 Dorothy Drive, Suite 102, Agoura Hills, CA 91301

Name of Associated Broker or Dealer

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers [ ] All States (Check "All States" or check individual States) ...... [DC] [FL] [GA] [HI] [ID] x [AR] [CA] x [CO] x CL (DE) [AL] [AK] [AZ] [MO] [MN] [MS] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [PA] [NC] [ND] [OH] [OK] [OR] [NV] x [NH] [NJ] [MM] [NY] [MT] [NE] [TN] LXI. [UT] x [VT][VA] (WA) x [WV] [WI] [WY] (PR) [RI] [SC] [SD]

Full Name (Last name first, if individual) Sammons Security Company, LLC

Business or Residence Address (Number and Street, City, State, Zip Code) 4261 Park Road, Ann Arbor, MI 48103

Name (	of Associ	ated Brol	ker or De	aler								
States	in Which	Person L	_isted Ha	s Solicite	d or Inten	ds to Solid	cit Purcha	isers				
					es)					[ x	] All States	S
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[[L]	[iN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
. , [МТ]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[XT]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[VV]	[PR]
		name fir irities LL	st, if indiv .C	/idual)		<u></u>						
				Number a		t, City, Sta	ite, Zip C	ode)	···			
Name	of Associ	iated Bro	ker or De	aler	<del>. •</del>		<u> </u>			, <u>-</u> ,	· . <del></del>	
						ds to Soli	cit Purcha	asers	. <del></del>		1.611.04-4-	_
•					es)	_	<b></b>	(D.C)	r=+ 1	l (CA)	] All State	
[AL]	[AK]	[AZ] x	[AR] x	[CA] x	[CO] x	·	[DE]	[DC]	• •	[GA]	[HI]	[ID] x
[IL] x	[IN]	[IA]	[KS]	[KY] x	[LA]	[ME]	[MD]	[MA]	·	[MN] x	[MS]	[MO] x
(MT) x	(NE)	[NV] x	[NH]	[NJ] x [TX]	[NM] [UT] x	[NY] x [VT]	[NC] [VA]	[ND] [WA] x	-	[OK] [WI]	[OR] x [WY] x	[PA] x [PR]
[RI]	[SC]	[SD]	[TN]	[י^]	[OI] X	[41]	[ A \_/]	[4.44] V	[444]	נייין	[]^	6.14
	me (Lasi Financia		rst, if indiv	vidual)								
			Address ( arbor, Mi		and Street	t, City, Sta	ate, Zip C	ode)				
Name	of Assoc	iated Bro	ker or De	aler							<u>,</u>	
						ds to Soli	cit Purcha	asers				
(Checi			eck indiv		es)						] All State	
[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]
[MT]	(NE)	[NV]	(NH)	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR] [WY]	[PA] [PR]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[AW]	[WV]	[vvi]	[1 4 4]	[FK]
			rst, if indi									
Busine	ss or Re	sidence /	Address (	(Number a	and Stree	t, City, Sta	ate, Zip C	ode)	·····························		<u></u>	
. —			e, MA 024						···			
			ker or De								<u>", ", "</u>	
						ids to Soli	cit Purcha	asers		r	] All State	e.
					tes)		וכרי	(DA)	(C13)		-	
[AL]	[AK] x	[AZ]	[AR]	[CA] x			[DE]	[DC] x		-		[ID]
[IL] x	[IN]	[IA] x	[KS]	[KY]	[LA]	[ME] x				_		[MO]
[MT]	[NE]	[NV] x	[NH]	[NJ] x	[NM]	[NY] x		[ND]	(OH) [VV]			(PA] x (PR)
[RI] x	[SC] x	[SD]	[TN] x	[TX]	[UT] x	[/T]	[VA] x	x [AW]	[٧٧٧]	[VVI]		[1-17]
L 3												
Full Na			rst, if indi	vidual)								
Full Na United	Securit	ies Allia	nce		1.50	t, City, Sta			<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>		·····	

Name of Associated Broker or Dealer

55555.0133.693264.1

		· <del></del>											
States	in Which	Person L	isted Ha	s Solicite	d or Inten	ids to Soli	icit Purcha	asers					
(Check	c"All Stat	es" or ch	eck indivi	dual Stat	es)					[	] All Stat	tes	
[AL] x	[AK]	[AZ] x	[AR] x	[CA] x	[CO] x	[CT] x	(DE) x	[DC] x	[FL] x	[GA] x	[HI] x	[ID] x	
[IL] x	[IN] x	[IA] x	[KS] x	[KY] x	[LA] x	[ME] x	[MD] x	[MA] x	[MI] x	[MN] x	[MS] x	: [MO] x	
[MT] x	[NE] x	[NV] x	[NH]	[NJ] x	[NM] x	[NY] x	[NC] x	[ND]	[OH] x	[OK] x	(OR) x	: [PA] x	
[RI] x	[SC] x	[SD] x	[TN] x	[TX] x	[UT] x	[VT]	[VA] x	[WA] x	[WV] x	[WI] x	(YW]	(PR)	
		name fir Services		vidual)	· · · · · ·								
Busine <b>8620 V</b>	ess or Re V. 110 <sup>th</sup> \$	sidence A Street, Su	ddress ( iite 200,	Number a Overland	and Stree d Park, K	t, City, St S 66210	ate, Zip C	ode)					
Name	of Assoc	iated Brol	er or De	aler									
States	in Which	Person l	isted Ha	s Solicite	d or Inter	nds to Sol	icit Purch	asers					
(Checl	k "All Stat	tes" or ch	eck indivi	idual Stat	tes)					[ x	] All Stat	tes	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[1D]	
[IL]	[IN]	[iA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[/T]	[VA]	[WA]	[WV]	[WI]	[WY]	(PR)	
amour excha	nt already nge offeri	sold. En	ter "0" if a this box	answer is and inc	"none" o	r "zero." I he colum	f the trans	ng and the saction is the amour	an				
Т	ype of Se	ecurity								Aggre Offering		Amount A	•
	• •	-								\$90,000,	000.00	\$0	
Е	quity									\$		\$0	
	-		[ ]	Common	[ ]	Preferred						_	
										\$		\$	-
		•								\$		\$	-
(										\$90,000.	000.00	\$0	-
	rotar						ınder ULC	E.		+ <u>= -1</u>			•
				- t									
securi offerin and th	ties in thi as under	s offering Rule 504 ate dollar	and the	aggregate the num	e dollar anber of pe	mounts o	f their pur o have pu	ave purch chases. F irchased s Enter "0" i	or securities	i			
										Number		Aggregate Dollar Amount	
										Number Investors	<b>;</b>	of Purchases	
Δ	ccrediter	i Investor	S	*********	,,,,,,,,,,,,,					0		\$0	
												\$	_
	Total (for	filings ur	nder Rule	504 only	/) Column 4	 Lif filina ı	 under ULC	DE.		·		\$ <u>0</u>	-

listed in Part C-Question 1.	he twelve s by type	
		ar Amount
Type of offering		1
Rule 505	\$	
Regulation A	\$	
Rule 504		<u></u>
Total	<u> </u>	<u>-</u>
4. a. Furnish a statement of all expenses in connection with the issuance and d 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 conti If the amount of an expenditure is not known, furnish an estimate and check the the left of the estimate.	n ingencies.	
Transfer Agent's Fees	•••	[] \$
Printing and Engraving Costs		[] \$
Legal Fees	•••	[] \$
Accounting Fees		[] \$
Engineering Fees		[]\$
Sales Commissions (specify finders' fees separately)		[] \$
Other Expenses (identify) Offering Expenses		[X] \$8,550,000.00 [X] \$8,550,000.00
Total	••••	[A] \$ <u>8,550,000.00</u>
5. Indicate below the amount of the adjusted gross proceeds to the issuer used used for each of the purposes shown. If the amount for any purpose is not known and about the boy to the left of the estimate. The total of the payment	wn, furnish an	
5. Indicate below the amount of the adjusted gross proceeds to the issuer used used for each of the purposes shown. If the amount for any purpose is not known estimate and check the box to the left of the estimate. The total of the payment the adjusted gross proceeds to the issuer set forth in response to Part C - Question.	wn, furnish an ts listed must equal stion 4.b above. Payments to Officers,	
used for each of the purposes shown. If the amount for any purpose is not known estimate and check the box to the left of the estimate. The total of the payment	wn, furnish an ts listed must equal stion 4.b above. Payments to Officers, Directors, &	Payments To
used for each of the purposes shown. If the amount for any purpose is not known estimate and check the box to the left of the estimate. The total of the payment the adjusted gross proceeds to the issuer set forth in response to Part C - Ques	wn, furnish an ts listed must equal stion 4.b above. Payments to Officers, Directors, & Affiliates	Payments To Others
used for each of the purposes shown. If the amount for any purpose is not known estimate and check the box to the left of the estimate. The total of the payment the adjusted gross proceeds to the issuer set forth in response to Part C - Questionary Salaries and fees	wn, furnish an ts listed must equal stion 4.b above.  Payments to Officers, Directors, & Affiliates []\$	Payments To Others []\$
used for each of the purposes shown. If the amount for any purpose is not known estimate and check the box to the left of the estimate. The total of the payment the adjusted gross proceeds to the issuer set forth in response to Part C - Questionary and fees	wn, furnish an ts listed must equal stion 4.b above.  Payments to Officers, Directors, & Affiliates []\$ []\$	Payments To Others []\$ []\$
used for each of the purposes shown. If the amount for any purpose is not known estimate and check the box to the left of the estimate. The total of the payment the adjusted gross proceeds to the issuer set forth in response to Part C - Questionary Salaries and fees	wn, furnish an ts listed must equal stion 4.b above.  Payments to Officers, Directors, & Affiliates []\$	Payments To Others [] \$ [] \$ [] \$
used for each of the purposes shown. If the amount for any purpose is not known estimate and check the box to the left of the estimate. The total of the payment the adjusted gross proceeds to the issuer set forth in response to Part C - Questional Salaries and fees  Purchase of real estate  Purchase, rental or leasing and installation of machinery and equipment  Construction or leasing of plant buildings and facilities	wn, furnish an ts listed must equal stion 4.b above.  Payments to Officers, Directors, & Affiliates []\$ []\$	Payments To Others [] \$ [] \$ [] \$
used for each of the purposes shown. If the amount for any purpose is not know estimate and check the box to the left of the estimate. The total of the payment the adjusted gross proceeds to the issuer set forth in response to Part C - Questional Salaries and fees  Purchase of real estate  Purchase, rental or leasing and installation of machinery and equipment  Construction or leasing of plant buildings and facilities  Acquisition of other businesses (including the value of securities involved in this offering that may be used in	wn, furnish an ts listed must equal stion 4.b above.  Payments to Officers, Directors, & Affiliates []\$ []\$	Payments To Others [] \$ [] \$ [] \$ [] \$
used for each of the purposes shown. If the amount for any purpose is not know estimate and check the box to the left of the estimate. The total of the payment the adjusted gross proceeds to the issuer set forth in response to Part C - Question and fees	wn, furnish an ts listed must equal stion 4.b above.  Payments to Officers, Directors, & Affiliates []\$ []\$ []\$ []\$	Payments To Others [] \$ [] \$ [] \$ [] \$
used for each of the purposes shown. If the amount for any purpose is not know estimate and check the box to the left of the estimate. The total of the payment the adjusted gross proceeds to the issuer set forth in response to Part C - Question of real estate	wn, furnish an ts listed must equal stion 4.b above.  Payments to Officers, Directors, & Affiliates []\$ []\$ []\$ []\$ []\$	Payments To Others [] \$ [] \$ [] \$ [] \$ [] \$
used for each of the purposes shown. If the amount for any purpose is not know estimate and check the box to the left of the estimate. The total of the payment the adjusted gross proceeds to the issuer set forth in response to Part C - Question of the payment of the adjusted gross proceeds to the issuer set forth in response to Part C - Question of real estate.  Purchase of real estate.  Purchase, rental or leasing and installation of machinery and equipment.  Construction or leasing of plant buildings and facilities.  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 issuer pursuant to a merger).  Repayment of indebtedness.	wn, furnish an ts listed must equal stion 4.b above.  Payments to Officers, Directors, & Affiliates []\$ []\$ []\$ []\$ []\$ []\$ []\$ []\$ []\$ []\$	Payments To Others []\$ []\$ []\$ []\$ []\$ []\$
used for each of the purposes shown. If the amount for any purpose is not know estimate and check the box to the left of the estimate. The total of the payment the adjusted gross proceeds to the issuer set forth in response to Part C - Question of the payment of the adjusted gross proceeds to the issuer set forth in response to Part C - Question of real estate.  Purchase of real estate.  Purchase, rental or leasing and installation of machinery and equipment.  Construction or leasing of plant buildings and facilities.  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 issuer pursuant to a merger).  Repayment of indebtedness.  Working capital	wn, furnish an ts listed must equal stion 4.b above.  Payments to Officers, Directors, & Affiliates []\$ []\$ []\$ []\$ []\$	Payments To Others []\$ []\$ []\$ []\$ []\$ []\$ []\$
used for each of the purposes shown. If the amount for any purpose is not know estimate and check the box to the left of the estimate. The total of the payment the adjusted gross proceeds to the issuer set forth in response to Part C - Question and fees	wn, furnish an ts listed must equal stion 4.b above.  Payments to Officers, Directors, & Affiliates []\$ []\$ []\$ []\$ []\$ []\$ []\$ []\$ []\$ []\$ []\$ []\$ []\$ []\$ []\$	Payments To Others []\$ []\$ []\$ []\$ []\$ []\$ []\$ []\$ []\$ []\$ []\$
salaries and fees  Purchase of real estate  Purchase, rental or leasing and installation of machinery and equipment  Construction or leasing of plant buildings and facilities.  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 issuer pursuant to a merger)  Repayment of indebtedness  Working capital  Other (specify):Loans to affiliates of issuer	wn, furnish an ts listed must equal stion 4.b above.  Payments to Officers, Directors, & Affiliates []\$	Payments To Others [] \$ [] \$ [] \$ [] \$ [] \$ [] \$ [] \$ [] \$ [] \$ [] \$ [] \$ [] \$ [] \$ [] \$ [] \$ [] \$ [] \$ [] \$
used for each of the purposes shown. If the amount for any purpose is not know estimate and check the box to the left of the estimate. The total of the payment the adjusted gross proceeds to the issuer set forth in response to Part C - Question and fees	wn, furnish an ts listed must equal stion 4.b above.  Payments to Officers, Directors, & Affiliates []\$ []\$ []\$ []\$ []\$ []\$ []\$ []\$ []\$ []\$ []\$ []\$ []\$ []\$ []\$	Payments To Others [] \$
salaries and fees  Purchase of real estate  Purchase, rental or leasing and installation of machinery and equipment  Construction or leasing of plant buildings and facilities.  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 issuer pursuant to a merger)  Repayment of indebtedness  Working capital  Other (specify):Loans to affiliates of issuer	wn, furnish an ts listed must equal stion 4.b above.  Payments to Officers, Directors, & Affiliates []\$	Payments To Others [] \$ [] \$ [] \$ [] \$ [] \$ [] \$ [] \$ [] \$ [] \$ [] \$ [] \$ [] \$ [] \$ [] \$ [] \$ [] \$ [] \$ [] \$
used for each of the purposes shown. If the amount for any purpose is not know estimate and check the box to the left of the estimate. The total of the payment the adjusted gross proceeds to the issuer set forth in response to Part C - Questing and growing and fees.  Purchase of real estate	wn, furnish an ts listed must equal stion 4.b above.  Payments to Officers, Directors, & Affiliates [] \$	Payments To Others [] \$
used for each of the purposes shown. If the amount for any purpose is not know estimate and check the box to the left of the estimate. The total of the payment the adjusted gross proceeds to the issuer set forth in response to Part C - Question and fees.  Purchase of real estate.  Purchase, rental or leasing and installation of machinery and equipment.  Construction or leasing of plant buildings and facilities  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 issuer pursuant to a merger).  Repayment of indebtedness.  Working capital.  Other (specify): Loans to affiliates of issuer  Column Totals	wn, furnish an ts listed must equal stion 4.b above.  Payments to Officers, Directors, & Affiliates [] \$ [X] \$81,450,450,450 [] \$ [X] \$81,450,450 [] \$	Payments To Others [] \$

Işsuer (Print or Type)  DBSI 2008 Notes Corporation, an Idaho Corporation	Signature Date  Lucy 2/11/08
The state of the s	
Name of Signer (Print or Type)	Title of Signer (Print or Type)
by DBSI Housing, Inc., its member	Adam Cleary, its Authorized Representative

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

E. STATE SIGNATURE		
Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?  See Appendix, Column 5, for state response.	Yes No [ ] [X]"	

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239,500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)  DBSI 2008 Notes Corporation, an Idaho Corporation	Signature Date 2/11/08
Name of Signer (Print or Type)	Title (Print or Type)
by DBSI Housing, Inc., its member	Adam Cleary, its Authorized Representative

# Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

