FORM D

1321516

OMB Number

3235-0076

April 30, 2008 Expires: Estimated average burden hours per response 16.00

OWR ALLKOAMP

Washington, D.C. 20549 FORM D

UNITED STATES

SECURITIES AND EXCHANGE COMMISSION



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

SEC USE ONLY								
Prefix		Serial						
D/	TE RECEIV	ED						

ForgHouse, Inc.	ent and name has changed, and indicate change.	SEC
Filing Under (Check box(es) that apply): ☐ Ru Type of Filing: ☑ New Filing ☐ Amendment	ıle 504 □ Rule 505 ☑ Rule 506 □ Section 4 ent	(6) ☑ ULO Bail Processing Section
	A. BASIC IDENTIFICATION DATA	FEB 22 ZUUB
1. Enter the information requested about the issu	er	
Name of Issuer (☐ check if this is an amendment ForgeHouse, Inc.	and name has changed, and indicate change.)	Washington, DC 101
Address of Executive Offices 1575 Northside Drive, Building 300, Suite 375	(Number and Street, City, State, Zip Code) , Atlanta, GA 30318	Telephone Number (Including Area Code) (770) 923-7765
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
Brief Description of Business: Software Compar	у	
•	partnership, already formed	specify): PROCESSED
Actual or Estimated Date of Incorporation or Org Jurisdiction of Incorporation or Organization:	Month Year anization: 1 1 0 4 (Enter two-letter U.S. Postal Service abbreviation CN for Canada; FN for other foreign jurisdiction of the content of the c	

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. 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

Name of Offering () shock if this is an amendment and name has shanged, and indicate change

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 predicated on the filing of a federal notice.

2. Enter the information requested for the following:
 Enter 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.
Check Box(es) that Apply: ☑ Promoter ☑ Beneficial Owner ☑ Executive Officer ☑ Director ☐ General and/or Managing Partner
Full Name (Last name first, if individual)
BRITCHFORD-STEEL, JOHN A.
Business or Residence Address (Number and Street, City, State, Zip Code) 1575 Northside Drive, Building 300, Suite 375, Atlanta, GA 30318
Check Box(es) that Apply: ☑ Promoter ☑ Beneficial Owner ☑ Executive Officer □ Director □ General and/or
Managing Partner
Full Name (Last name first, if individual) ALONSO, JOSE
Business or Residence Address (Number and Street, City, State, Zip Code)
1575 Northside Drive, Building 300, Suite 375, Atlanta, GA 30318
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director ☐ General and/or Managing Partner
Full Name (Last name first, if individual)
EBERT, KEITH
Business or Residence Address (Number and Street, City, State, Zip Code)
Oceanic Plaza, Suite 2680 – 1066 W. Hastings Street, Vancouver, BC, V6E 3X2, Canada
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner
Full Name (Last name first, if individual)
TWE INTERNATIONAL, LLC, a Georgia limited liability company
Business or Residence Address (Number and Street, City, State, Zip Code) 1575 Northside Drive, Building 300, Suite 375, Atlanta, GA 30318
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)
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)
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)

A. BASIC IDENTIFICATION DATA

Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?					В.	INFORM	ATION A	BOUT OF	FERING	_			
Answer also in Appendix, Column 2, if filing under ULOE 2. What is the minimum investment that will be accepted from any individual?	1 11-	.1				-11 .	1.			··· O	<u> </u>	_	
2. What is the minimum investment that will be accepted from any individual?	I. Has	the issuer s	sold, or doe								••••••	•••••	🖸 🗀
Yes No 3. Does the offering permit joint ownership of a single unit?	2. Wha	t is the mi	nimum inv						-				\$N/A
3. Does the offering permit joint ownership of a single unit?	200 17100					oupled no		, 144411					
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 en ame 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. Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) 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)													Yes No
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 dealer only. Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) 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)	3. Doe	s the offeri	ng permit	joint owner	ship of a s	ingle unit?							:☑ □
Business or Residence Address (Number and Street, City, State, Zip Code) 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)	remu perse than	uneration for on or agent five (5) pe	or solicitati of a broke	ion of purch er or dealer	nasers in co registered	onnection v with the SI	vith sales o EC and/or v	f securities with a state	in the offe or states, I	ring. If a pist the nam	person to be e of the bro	e listed is oker or de	an associated aler. If more
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)	Full Nar	ne (Last na	ıme first, it	f individual)								
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)	Rusines	s or Reside	nce Addre	ss (Number	and Stree	t City Sta	te Zin Cod	le)			·		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	Dusines	o i iconde	nec Addie	35 (144111001	and Stree	i, City, Sta	ic, zip coc	ic)					
Check "All States" or check individual States	Name o	f Associate	d Broker o	or Dealer		,							
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IL] [IN] [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] [VT] [VA] [WA] [WV] [WI] [WY] [PR] Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer						nds to Soli	icit Purchas	sers				·	F1
[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] [VT] [VA] [WA] [WV] [WI] [WY] [PA] Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) 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)					-	ເດດາ		fDF1	[DC]	[FL.1	[GA]	fHD	
[RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR] Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) 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)													
Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) 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)	- •							- "			_		-
Business or Residence Address (Number and Street, City, State, Zip Code) 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)						[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
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)	Full Nai	me (Last na	ime first, if	f individual)								
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	Busines	s or Reside	nce Addre	ss (Number	r and Stree	t, City, Sta	te, Zip Cod	le)					
(Check "All States" or check individual States)	Name o	f Associate	d Broker o	or Dealer									
[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] [PA] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR] Full Name (Last name first, if individual)													
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[MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR] Full Name (Last name first, if individual)													
[RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR] Full Name (Last name first, if individual)								-					
Business or Residence Address (Number and Street, City, State, Zip Code)	Full Nar	me (Last na	me first, it	f individual)								
	Busines	s or Reside	nce Addre	ss (Number	and Stree	t, City, Sta	te, Zip Cod	le)					
Name of Associated Broker or Dealer	Name o	f Associate	d Broker o	or Dealer									
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or sheek individual States)												_	□ All States
(Check "All States" or check individual States)													
[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]													

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

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND US	EO	F 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.				
	Type of Security	C	Aggregate Offering Price	Ä	Amount Already Sold
	Debt	\$_	0	\$_	(
	Equity(The securities were offered as part of an exchange, whereby the members of an LLC exchanged their interests for shares of the Issuer and the LLC became a wholly owned subsidiary of the Issuer. The securities were exchanged; therefore, there were no cash proceeds from the offering. However, the Issuer has used their estimated value herein.) Common Preferred	<u>\$</u>	399,000.00	\$_	399,000.00
	Convertible Securities (including warrants)	\$_	0	\$_	(
	Partnership Interests	\$_	0	\$_	(
	Other (Specify:)	\$_	0	\$_	
	Total	\$_	399,000.00	\$_	399,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.				
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."				
			Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors	_	0	\$_	(
	Non-accredited Investors	_	3	<u>\$</u>	399,000.00
	Total (for filings under Rule 504 only)			\$_	

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.

Rule 504.....

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

Transfer Agent's Fees □ \$ 0.00 Printing and Engraving Costs □ \$ 0.00 Legal Fees □ \$ 0.00 Accounting Fees □ \$ 0.00 Engineering Fees □ \$ 0.00 Sales Commissions (specify finders' fees separately) □ \$ 0.00 Other Expenses (identify): □ \$ 0.00 Total □ \$ 0.00	Tell of the Command.		
Legal Fees □ \$ 0.00 Accounting Fees □ \$ 0.00 Engineering Fees □ \$ 0.00 Sales Commissions (specify finders' fees separately) □ \$ 0.00 Other Expenses (identify): □ \$ 0.00	Transfer Agent's Fees	\$	0.00
Legal Fees □ \$ 0.00 Accounting Fees □ \$ 0.00 Engineering Fees □ \$ 0.00 Sales Commissions (specify finders' fees separately) □ \$ 0.00 Other Expenses (identify): □ \$ 0.00	Printing and Engraving Costs	\$	0.00
Engineering Fees		\$	0.00
Sales Commissions (specify finders' fees separately) \$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Accounting Fees:	\$	0.00
Sales Commissions (specify finders' fees separately) \$ 0.00 Other Expenses (identify): \$ 0.00	Engineering Fees	\$	0.00
	Sales Commissions (specify finders' fees separately)	\$	0.00
Total \$0.00	Other Expenses (identify):	\$	0.00
	Total	\$	0.00

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 proceeds to the issuer."

\$ 399,000.00

		Offi Direct	ents to cers, ors, & liates	•	ents to hers
Salaries and fees		□ \$	0	□ \$	0
Purchase of real estate		□ \$ <u> </u>	0	□ \$	
Purchase, rental or leasing and installation of n	nachinery and equipment	□ \$	0_	□ \$	
Construction or leasing of plant buildings and	facilities	□ \$	0	□ \$	0
Acquisition of other businesses (including the offering that may be used in exchange for the a pursuant to a merger)(SeeSection)	assets or securities of another issuer Equity, above)	□ \$		□ \$	
Repayment of indebtedness		□ \$		□ \$	
Working capital (Available for Investment)		□ \$		□ \$	
Other (specify):		□ \$		□ \$	
		□ \$		□ \$	
Column Totals Total Payments Listed (column totals added)		£ \$		k s	0
is issuer has duly caused this notice to be signed flowing signature constitutes an undertaking by the its staff, the information furnished by the issuer to	he issuer to farnish to the U.S. Securi	ties and Exch	ange Commi	ssion, upon v	vritten red
couge (Print or Tyma)	Stanature	,	Da	nte:	
ssuci (Finit of Type)	1 KACAN.				
• • • • • • • • • • • • • • • • • • • •			~	2/20/08	
ForgeHouse, Inc.	Title of Signer (Print or	Type)	<u> </u>	2/20/08	
ssuer (Print or Type) ForgeHouse, Inc. Name of Signer (Print or Type) ohn A. Britchford-Steel				2/20/08	
ForgeHouse, Inc. Name of Signer (Print or Type)	Title of Signer (Print or			2/20/08	

Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for

5.

STA			

l.	Is any party described in 17 CFR 230.252(c), (d), (e) or (f) presently subject to any of the disqualification provisions	Yes	No
	of such rule?		☑

See Appendix, Column 5, for state response.

- 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)	Signature Date:
ForgeHouse, Inc.	2/20/08
Name (Print or Type)	Title (Print or Type)
John A. Britchford-Steel	Chief Executive Officer

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.

1		 ,			APPENDIX				
1	2 3				4				5
	Intend to non-accinvestors (Part B-l	credited in State	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				ification ate ULOE , attach ation of granted) -Item 1)
State	Yes	No	Common Stock	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA	X		\$59,850.00			1	\$59,850.00		X
СО									
СТ									
DE									
DC		<u></u>							
FL	X	ļ	6220 150 00			2	\$339,150.00		X
GA HI	^		\$339,150.00			2	\$339,130.00		^
ID		<u> </u>							
IL		 							
IN						-			ļ
IA									
KS							·-		
KY		 							
LA			<u> </u>						
ME	-								
MD									
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Ml									
MN									
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NE									
NV									
NH		ļ							
NJ		 							
NM			<u></u>						
NY NC									<u></u>
ND									
OH	-								
OK									-
OR									
PA									
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1	2		3	I	4				5
	Intend to non-actinvestors (Part B-1	credited in State	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)					ification ate ULOE , attach ation of granted) -Item 1)
State	Yes	No	Common Stock	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
RI									
SC									
SD		1			•				
TN									
TX									
UT									
VT		-						1	
VA				† † †					
WA						 			
wv									
WI		<u> </u>		 		†		1	
WY			<u> </u>				· · · - · · · · · · · · · · · · · · · ·		
PR									

