FORM D

SEC _{viail} Processing Section

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

FORM D

JUN Z 4 Z008

Washington, DC

101

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

, , –	<u>ノ 0 5</u>		′ / _				
OMB APPROVAL							
OMB Num	ber:	32	35-0076				
Expires:	June	30,	2008				
Estimated average burden							
nours per response 16.00							

1438599

SEC USE ONLY								
Prefix	Serial							
DATE RI	DATE RECEIVED							
1	1							

Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
Common Stock Offering	
Filing Under (Check box(es) that apply):	PROCESSED >
Type of times.	
A. BASIC IDENTIFICATION DATA	<u>'JUN 2 6 2008</u>
1. Enter the information requested about the issuer	THOMSON REUTERS
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	IIIOMOON KEOLEKO
Polymorphic DNA Technologies, Inc.	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
1125 Atlantic Avenue, Suite 101, Alameda, CA 94501	(510) 523-7659
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
DNA Analysis Services Company) degin aring dina bank dina naba kaka bina bank b
Type of Business Organization Corporation Imited partnership, already formed business trust Imited partnership, to be formed	lease specify 08051195
Month Year Actual or Estimated Date of Incorporation or Organization: 111 011 Actual Estim Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction)	

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.

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 ■ Beneficial Owner ✓ Director General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Saul, Robert Business or Residence Address (Number and Street, City, State, Zip Code) 1125 Atlantic Avenue, Suite 101, Alameda, CA 94501 Check Box(es) that Apply: Promoter ✓ Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Ames, Bruce N. Business or Residence Address (Number and Street, City, State, Zip Code) 1324 Spruce Street, Berkeley, CA 94709 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Hamilton, Nathan Business or Residence Address (Number and Street, City, State, Zip Code) PMB487, 774 Mays Boulevard, Suite 10, Incline Village, NV 89451 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) Beneficial Owner Check Box(es) that Apply: Promoter 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: Director Promoter Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

	ŝ												
		_			B, I	NFORMAT	ION ABOU	T OFFERI	NG				
1.	Has the	issuer sole	d, or does t	he issuer i	ntend to se	II, to non-a	ccredited i	nvestors ir	this offer	ing?		Yes K	No
				Ans	wer also ir	1 Appendix	, Column 2	l, if filing	under ULC	E.		40	000.00
2.	2. What is the minimum investment that will be accepted from any individual?									\$	00.00		
3.	3. Does the offering permit joint ownership of a single unit?								Yes	No ⊠			
4.	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	l Name (Last name	first, if ind	ividual)							·		
Bus	siness or	Residence	Address (N	lumber and	i Street, C	ity, State, 2	Cip Code)	.	<u> </u>				
Naı	me of As	sociated B	roker or De	aler					• "				
Sta	tes in Wi	ich Persor	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	s" 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	MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Ful	l Name (Last name	first, if ind	ividual)				···					
Bus	siness or	Residence	: Address (1	Number an	d Street, C	City, State,	Zip Code)						
Nar	me of As	sociated Bi	roker or De	aler					· · · · · ·				
Sta	tes in Wi	ich Person	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers					_	
	(Check	"All States	s" or check	individual	States)	•••••	***************************************		••••••		······································	☐ AI	States
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	MA ND WA	FL MI ÖH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Ful	l Name (Last name	first, if ind	ividual)			<u> </u>			-			,
Bus	siness or	Residence	: Address (?	Number an	d Street, C	City, State,	Zip Code)						
Nar	me of As	sociated Bi	roker or De	aler									
Sta	tes in Wh	ich Person	Listed Has	s Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	s" or check	individual	States)	•••••	***************************************	****************	••••••	********	***************************************	☐ Al.	States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ĪD

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

ME

NY

VT

MD

NC

VA

MA

ND

WA

MI

OH

WV

MN

OK

Wi

MS

OR

WY

MO

PA

PR

IL

MT

RI

[]A

NV

SD

IN

NE

SC

KS

NH

TN

KY

NJ

TX

LA

ΝM

UT

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 \(\sigma\) and indicate in the columns below the amounts of the securities offered for exchange and		
	already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	_ s
	Equity	\$ 995,150.00	\$ 995,150.00
	✓ Common		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests		
	Other (Specify)		
	Total		
	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."		
	purchases on the total lines. Effect of answer is notice of zero.		Aggregate
		Number	Dollar Amount
	Accredited Investors	Investors 5	of Purchases \$ 823,465.00
			\$ 171,685.00
	Non-accredited Investors		\$\frac{111,000.00}{\$} 995,150.00
	Total (for filings under Rule 504 only)	<u>•</u>	. \$ 995,150.00
_	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	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		\$
	Regulation A	<u>.</u>	\$
	Rule 504		\$
	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		s
	Legal Fees	[2	\$ <u>3,000.00</u>
	Accounting Fees] \$
	Engineering Fees] \$
	Sales Commissions (specify finders' fees separately)] \$
	Other Expenses (identify)] \$
	Total	_	\$ 3,000.00

	and total expenses furnished in response to Pa	ate offering price given in response to Part C — Quart C — Question 4.a. This difference is the "adjus	ted gross	\$
5.	each of the purposes shown. If the amoun	cross proceed to the issuer used or proposed to be it for any purpose is not known, furnish an estire total of the payments listed must equal the adjuste to Part C — Question 4.b above.	nate and	
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees			\$
	Purchase of real estate			🗆 \$
	Purchase, rental or leasing and installation and equipment	of machinery		\$
	Construction or leasing of plant buildings	and facilities		\$
		the assets or securities of another	_	
	Repayment of indebtedness			00 \$ 200,000.00
	Working capital		[] \$	\$195,150.00
				\$
				\$
	Column Totals		<u>8</u> \$ 600,000.0	00 g \$ 395,150.00
	Total Payments Listed (column totals adde	ed)		995,150.00
		D. FEDERAL SIGNATURE		
sig	e issuer has duly caused this notice to be signe nature constitutes an undertaking by the issue	d by the undersigned duly authorized person. If the to furnish to the U.S. Securities and Exchange non-accredited investor pursuant to paragraph (I	Commission, upon wri	itten request of its staff
Iss	uer (Print or Type)	Signature	Date	
Po	lymorphic DNA Technologies, Inc.	Robert Saul	6-1	3-08
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)		
Rot	pert L. Saul	President		

— ATTENTION —

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

		E. STATE SIGNATURE	Ε		
1.	Is any party described in 17 CFR provisions of such rule?	Yes	No		
		See Appendix, Column 5, for state	response.		
2.	The undersigned issuer hereby und D (17 CFR 239.500) at such time	dertakes to furnish to any state administrato s as required by state law.	r of any state in which this notice is	s filed a no	otice on Form
3.	The undersigned issuer hereby un issuer to offerees.	dertakes to furnish to the state administra	tors, upon written request, inform	nation furn	nished by the
4.	limited Offering Exemption (ULC	s that the issuer is familiar with the condit DE) of the state in which this notice is filed of establishing that these conditions have	and understands that the issuer cl		
	uer has read this notification and kno thorized person.	ws the contents to be true and has duly caus	ed this notice to be signed on its be	half by the	undersigned
Issucr (Print or Type)		Signature	Date		
Name (Print or Type)	Title (Print or Type)			

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.

				AP	PENDIX				
1	Intend to non-a investor	to sell ccredited s in State	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	investor and rchased in State C-Item 2)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ			<u>.</u>						
AR							<u> </u>		
CA									
СО									
СТ									
DE									
DC									
FL									
GA									
HI									
ID									
IL									
IN		The same of the sa							
IA									
KS									
KY									
LA									
ME									
MD									
MA							,	a 110 min 1/ min	
MI									
MN									
MS									

	APPENDIX										
1	Intend to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	investor and rchased in State C-Item 2)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)			
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
МО											
МТ											
NE											
NV						·					
NH											
NJ											
NM											
NY		<u> </u>									
NC											
ND											
ОН			,								
ОК											
OR											
PA											
RI											
SC											
SD											
TN											
TX											
UT											
VT											
VA											
WA											
wv											
WI											

	APPENDIX										
1		2	3		4 5 Disqualification			lification			
	to non-a investor	I to sell ccredited s in State -Item 1)	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)				under S' (if yes Type of investor and explar amount purchased in State waive			
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
WY											
PR											

