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OMB APPROVAL

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UNITED STATES SECURITIES AND EXCHANGE 🗞 Washington, D.C. 2054

FORM D

OMB Number: 3235-0076 Expires: Estimated average burden hours per response.....16.00

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

check if this is an amendment and name has changed, and indicate change.) Name of Offering Rule 505 Rule 506 Section 4(6) Filing Under (Check hox(es) that apply): | Rule 504 Type of Filing: A. BASIC IDENTIFICATION DATA Enter the information requested about the issuer (check if this is an amendment and name has changed, and indicate change.) Name of Issuer Blue Ink Press, Ltd. Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (440) 984-2080 1246 Park Avenue, Amherst, Ohio 44001 Telephone Number (Including Area Code) Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) Brief Description of Business Type of Business Organization other (please speci corporation limited partnership, already formed limited partnership, to be formed business trust Month Year

GENERAL INSTRUCTIONS

Actual or Estimated Date of Incorporation or Organization:

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).

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CN for Canada; FN for other foreign jurisdiction)

Actual Estimated

OH

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.

Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:

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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. General and/or Check Box(es) that Apply: Promoter Director Managing Partner Full Name (Last name first, if individual) Kane, Douglas E Business or Residence Address (Number and Street, City, State, Zip Code) 1246 Park AVenue, Amherst, Ohio 44001 General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Wood, Christy E. Business or Residence Address (Number and Street, City, State, Zip Code) 494 Creekside Drive, SE, Salem, Oregon 97306-9334 General and/or Check Box(es) that Apply: ☐ Beneficial Owner ☐ Executive Officer Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) General and/or Beneficial Owner Executive Officer Director 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) Director General and/or Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Executive Officer Director General and/or Check Box(es) that Apply: Beneficial Owner Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) General and/or Check Box(es) that Apply: Promoter Director 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)

	_				B. I	NFORMAT	ION ABOU	T OFFERI	NG				
i.	Has the	issuer sole	d, or does t	he issuer i	ntend to se	ll, to non-a	ccredited	investors i	n this offer	ing?		Yes	No X
				Ans	swer also in	n Appendix	, Column	2, if filing	under ULC	DE.		0.7	00.00
2.	What is	the minim	num investr	nent that v	vill be acce	pted from	any individ	lual?				Ψ	00.00
3.		_	-								***************************************	Yes	No ⊠
4.	commis If a pers or state:	ssion or sim son to be lis s, list the na	ilar remune sted is an as	ration for : sociated pe proker or d	solicitation erson or age ealer. If me	of purchas ent of a brol ore than fiv	ers in conn ker or deale e (5) person	ection with or registere ns to be list	sales of se d with the S ted are asso	curities in t SEC and/or	irectly, any he offering. with a state sons of such		
	l Name (t applica		first, if ind	ividual)									
			Address (N	Jumber an	d Street C	ity State 2	Zin Code)					.	
	applical		71041055 (1	· unio ci · uni	u 011 000 , 0	,	5.p coue,						
			roker or De	aler	_								
	t applica												
Stat			Listed Ha										
	(Check	"All States	s" or check	individual	I States)							☐ AI	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	ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	ID MO PA PR
Full	Name (Last name	first, if ind	ividual)									
Bus	iness or	Residence	Address (?	Number an	d Street, C	ity, State,	Zip Code)						
Nan	ne of Ass	sociated Br	oker or De	aler									<u></u>
Stat	es in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers			•			···
	(Check	"All States	or check	individual	States)	·····	*************		**********			☐ Ai	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	OK	HI MS OR WY	MO PA PR
Fuli	Name (1	Last name	first, if indi	vidual)									
Busi	iness or	Residence	Address (1	Number an	d Street, C	ity, State, 2	Zip Code)	·		_			
Nam	ne of Ass	ociated Br	oker or De	aler									
State	es in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit I	Purchasers						
	(Check	"All States	" or check	individual	States)						••••••••••••••••••••••••••••••	☐ All	States
	AL IL MT RI	AK IN NE SC	AZ TA 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	MN OK	MS OR WY	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		
	Type of Security	Aggregate Offering Price	Amount Already Sold
		_	
	Debt		
	Equity	<u></u>	\$
	Common Preferred		
	Convertible Securities (including warrants)	S	
	Partnership Interests		
	Other (Specify LLC Interests)		\$ 5,400.00
	Total	2,700.00	\$_5,400.00
	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."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors		\$
	Non-accredited Investors		
	Total (for filings under Rule 504 only)		\$_5,400.00
	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		\$
	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		\$ 0.00
	Legal Fees		\$_3,000.00
	Accounting Fees App:		\$ 1,000.00
	Engineering Fees		\$ 0.00
	Sales Commissions (specify finders' fees separately)		\$ 0.00
	Other Expenses (identify) Direct Business-Related Expenses	_	\$ 1,400.00
	Total		\$ 5,400.00

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE C	OF PROCEEDS	
	b. Enter the difference between the aggregate offering price given in response to Part C — Question and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted grander proceeds to the issuer."	oss	s2,700.00
5.	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used each of the purposes shown. If the amount for any purpose is not known, furnish an estimate check the box to the left of the estimate. The total of the payments listed must equal the adjusted gr proceeds to the issuer set forth in response to Part C — Question 4.b above.	and	
		Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees Provisional Fees	\$ 0.00	□\$ 4,000.00
	Purchase of real estate		□\$ 0.00
	Purchase, rental or leasing and installation of machinery and equipment		□\$ 0.00
	Construction or leasing of plant buildings and facilities		\$ 0.00
	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)		\$ <u></u> \$
	Repayment of indebtedness	\$ 0.00	\$ 0.00
	Working capital		\$ 1,400.00
	Other (specify):	[\$_0.00	<u> </u>
		<u>0.00</u>	ss
	Column Totals		S 5,400.00
	Total Payments Listed (column totals added)	_\$_5	400.00
	D. FEDERAL SIGNATURE		
sigi	e issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this no nature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Cominformation furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2)	mission, upon writte	
Issi	uer (Print or Type) Signature	Date	
Blu	ue Ink Press, Ltd.	APRIL 2	0,2008
Var	me of Signer (Print or Type) Thle of Signer (Print or Type)		
)ou	uglas E. Kane Member		

- ATTENTION -

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

		E. STATE SIGNATURE		
1.	Is any party described in 17 CFR 230.262 pres provisions of such rule?	ently subject to any of the disqualification	Yes	No ⊠
	See A	ppendix, Column 5, for state response.		
2.	The undersigned issuer hereby undertakes to fur D (17 CFR 239.500) at such times as required	nish to any state administrator of any state in which they state law.	his notice is filed a no	tice on Form
3.	The undersigned issuer hereby undertakes to fusion issuer to offerees.	rnish to the state administrators, upon written requ	est, information furn	ished by the
4.	The undersigned issuer represents that the issu limited Offering Exemption (ULOE) of the stat of this exemption has the burden of establishin	er is familiar with the conditions that must be satisfied in which this notice is filed and understands that the g that these conditions have been satisfied.	fied to be entitled to ne issuer claiming the	the Uniform availability
	uer has read this notification and knows the content thorized person.	s to be true and has daily caused this notice to be signe	ed on its behalf by the	undersigned
lssuer (Print or Type)	Signature Date		
Blue Inl	k Press, Ltd.	1/2/64-	PRRILZO, 2	80a
Name (Print or Type)	Title (Print or Type)		

Member

Instruction

Douglas E. Kane

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 investors	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		4 Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL	,								
AK									
AZ									
AR									
CA									
СО			. <u></u>						
СТ							-		
DE	<u> </u>								
DC									
FL									
GA									
HI				 					
ID								1	
IL								<u> </u>	
IN									
IA									
KS			·						
KY									
LA		ļ.							
ME	W. Allahokodaka alimakao, aketa								
MD									
MA			· · · · · · · · · · · · · · · · · · ·						<u> </u>
MI		<u></u>							
MN									
MS									

Intend to sell to non-accredited investors in State (Part B-Item 1) State Yes No	Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1) Yes No
State Yes No Accredited Investors Amount Investors Amount MO MT	Yes No
MT The state of th	
NE NE	
NV	
NH	
NJ NJ	
NM	
NY	
NC	
ND	
ОН	
OK	
OR	
PA PA	
RI .	
SC	
SD SD	
TN	
TX	
UT	
VT	
VA VA	
WA CONTRACTOR OF THE CONTRACTO	
WV W	
WI WI	

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				APP	ENDIX						
1	Intend to non-a investor	d to sell accredited as in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and explanamount purchased in State waive (Part C-Item 2)			Type of investor and				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
PR											

