STATE OF INDIANA
OFFICE OF THE SECRETARY OF STATE
SECURITIES DIVISION
302 West Washington Street, Room E-111
Indianapolis, IN 46204

REGISTRATION BY QUALIFICATION
FOR CALENDAR QUARTER ENDING:

QUARTERLY REPORT
Required by 710 IAC 1-11-2
To be filed within 45 days from end of quarter

This report must be filed within 45 days of the end of each calendar quarter as long as the registration is effective. Use a separate form for each registration of different types or classifications of securities (Form SD-75 must also be filed within 90 days of the end of the issuer’s fiscal year. Form SD-76 must be filed as soon as possible after the close of the offering).

ISSUER’S NAME: ________________________________

ISSUER’S ADDRESS: __________________________________________________________

Description and amount of securities registered: _________________________________

1. Dollar sales in Indiana during quarter------------------------------------------$ ___
2. Units sold in Indiana during quarter------------------------------------------$ ___
3. Number of Indiana purchasers-----------------------------------------------$ ___
4. Additional amount registered during quarter---------------------------------$ ___
5. Total dollar sales to the close of the quarter--------------------------------$ ___
6. Total units sold to the close of the quarter-------------------------------$ ___
7. Total number of purchasers of securities during the quarter----------------$ ___
List all registered broker-dealers participating or agents of the issuer registered since the last report:

____________________________________________________________________________________

____________________________________________________________________________________

Describe any material changes to the prospectus currently on file with the Division.

____________________________________________________________________________________

____________________________________________________________________________________

If the proceeds from the sales were required to be impounded, have any funds been released? ________________
If so, the dollar amount during the quarter? ________________________________________________________

____________________________________________________________________________________

I hereby verify that the statements made in this report are true.

DATE: __________________________

____________________________________________________________________________________

SIGNATURE OF OFFICER

____________________________________________________________________________________

PRINTED SIGNATURE

____________________________________________________________________________________

TITLE