

# FORM LOE

Notice of  
Limited Offering Exemption

## Delaware Department of Justice Investor Protection Unit

820 N. French Street, 5<sup>th</sup> Floor  
Wilmington, DE 19801



### 1. Issuer's Contact Information

Issuer's Name:

Contact Person's Name:

Contact Person's Address:

Contact Person's Telephone Number:

Contact Person's E-Mail Address:

Address for Principal Place of Business (if different from above):

### 2. Type of Business

(Briefly described the type of business in which the issuer is engaged.)

### 3. Offering Amounts

Total amount to be offered (everywhere):

Total amount to be offered in Delaware:

Total amount raised so far (everywhere):

Total amount raised so far in Delaware:

#### **4. Control Person(s) Contact Information**

Enter contact information for all officers, directors, general or managing partners, and persons who own of record (or beneficially) 10 percent or more of the outstanding shares of any class of equity security of the issuer.

**Name:**

**Title:**

**Address:**

**Telephone Number:**

**E-Mail Address:**

**Name:**

**Title:**

**Address:**

**Telephone Number:**

**E-Mail Address:**

**Name:**

**Title:**

**Address:**

**Telephone Number:**

**E-Mail Address:**

**Name:**

**Title:**

**Address:**

**Telephone Number:**

**E-Mail Address:**

(Continue on a separate sheet if necessary)

## 5. Control Person(s) Background

Has any control person listed above ever been:

- (a) convicted of a felony? Yes  No
- (b) convicted of a misdemeanor involving any aspect of the securities business? Yes  No
- (c) adjudicated bankrupt? Yes  No
- (d) a principal of any company which was reorganized in bankruptcy? Yes  No
- (e) the assignor of a general assignment for the benefit of creditors? Yes  No
- (f) the subject of (or a principal of a company that has been the subject of) any administrative, civil or criminal proceeding instituted by a state or federal securities regulatory agency? Yes  No

If the response to any of the above questions is yes, explain in detail:

(Continue on a separate sheet if necessary)

## 6. Investor(s) Information

(Enter contact information for each person residing in Delaware who has purchased the security that is being offered.)

**Name:**

**Address:**

**Telephone Number:**

**E-Mail Address:**

**Amount Invested:**

**Name:**

**Address:**

**Telephone Number:**

**E-Mail Address:**

**Amount Invested:**

**Name:**

**Address:**

**Telephone Number:**

**E-Mail Address:**

**Amount Invested:**

**Name:**

**Address:**

**Telephone Number:**

**E-Mail Address:**

**Amount Invested:**

(continue on a separate sheet if necessary)

## **7. Purchaser Representative(s) Information**

(Enter contact information for any third-person representing a purchaser who resides in Delaware.)

**Name of Representative:**

**Representative's Address:**

**Representative's Telephone Number:**

**Representative's E-Mail Address:**

**Name of Purchaser Represented:**

**Purchaser's Address:**

**Purchaser's Telephone Number:**

**Purchaser's E-Mail Address:**

**Name of Representative:**

**Representative's Address:**

**Representative's Telephone Number:**

**Representative's E-Mail Address:**

**Name of Purchaser Represented:**

**Purchaser's Address:**

**Purchaser's Telephone Number:**

**Purchaser's E-Mail Address:**

**Name of Representative:**

**Representative's Address:**

**Representative's Telephone Number:**

**Representative's E-Mail Address:**

**Name of Purchaser Represented:**

**Purchaser's Address:**

**Purchaser's Telephone Number:**

**Purchaser's E-Mail Address:**

(Continue on a separate sheet if necessary)

