



(To be filed along with the fee required by 3 AAC 08.920 (a)(11))

(19) an offer to repay, under AS 45.56.120, the buyer of a security if the offeror first files with the administrator a notice specifying the terms of the offer at least 10 days before the offer is made.

1. Name, Address and Telephone number of person requesting the use of this exemption:		
Full Name of contact person	Address	Phone
		Fax
The person signing this form must show name & address above. If for some reasons that person is not available to sign, please request a waiver in writing and give reason.		
2. Name, Address, and Telephone number of Issuer: _____ ;		
Name of Issuer	Address	Phone
3. Please provide a brief description of the security which was sold without registration or exemption from registration (describe security, price, and interest, if any):		
4. Date rescission offer will commence: _____ (May not be sooner than 10 days after the filing date of this exemption notice or as determined by the administrator).		
5. Describe any special considerations you ask the administrator to consider, including any requests for waiver of any limitations of the exemption. Waiver requests must include full disclosure to the administrator of the facts and relevant material factors relating to the request.		

6. Describe where the money to repay purchasers will come from and whether it will be sufficient to meet the rescission and leave the entity able to carry on its business:

Additional information (Please refer to paragraph number being further explained):

ATTACH A COPY OF THE RESCISSION OFFER(AS 45.56.120(19) AND ALL DISCLOSURES PROVIDED UNDER 3 AAC 08.915.

INCLUDE A LIST OF THE NAME, ADDRESSES OF THE PERSONS BEING OFFERED RESCISSION AND DOLLAR AMOUNTS OF THE SECURITIES INVOLVED.

BE SURE TO FILE FORM 08-111A WHEN THE OFFER OF RESCISSION HAS BEEN COMPLETED

By filing this notice, I affirm that all statutory requirements of AS 45.56.120(19) and 3 AAC 08.915 have been met to date and will continue to be met during the offering period.

Signature of attorney or principal (please describe which) Title

Date

E-mail address :