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FORM D

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

OMB Number: **Expires:**

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May 31,2005

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hours per responses......16.00

FORM D



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

Г	S	EC USE ONLY	7
Т	Prefix		Serial
	I	DATE RECEIVED	
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OMB APPROVAL

Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
Calhoun Vision, Inc. Series B	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)	ULOE A STATE AND A
Type of Filing: New Filing Amendment	
A. BASIC IDENTIFICATION DATA	A Course of Vall &
1. Enter the information requested about the issuer	2 2 2 0 0 0
Name of Issuer (check if this is an amendment and name has changed, and indicate change)	
Calhoun Vision, Inc.	181 20
Address of Executive Officers (Number and Street, City, State, Zip Code	Telephone Number (Including Area Code)
2555 E. Colorado Blvd., Suite 400, Pasadena, CA 91107	626-685-2000
Address of Principal Business Operations (Number and Street, City, State Zip Code	Telephone Number (Including Area Code)
(if different from Executive Officers)	
Same as above	·
Brief Description of Business: Research and development of ophthalmic surgical products	
Type of Business Organization	
🛮 corporation 🔲 limited partnership, already formed	other (please sp
business trust limited partnership, to be formed	1 NOOFORE
Month Year	4444 4 0 0000
Actual or Estimated Date of Incorporation or Organization 0 3 9 7 🛭 Actual 🔲 I	1 17 80 A. O S. O. O. O.
Jurisdiction of Incorporation or Organization (Enter two-letter U.S. Postal Service abbreviation for Stat	e:
CN for Canada, FN for other foreign	jurisdiction) [C][A] THOMSON
	FINANCIA

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.

ATT	ENT	ION
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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 predicated on the filing of a federal notice.

		A. BASIC IDENT	IFICATION DATA		
2. Enter the information reques	ted for the following:	a come and a come a com		n leggy and a second and a second and a	
Each beneficial ownerEach executive officer	having the power to vote	e issuers and of corporate g			equity securities of the issuer.
Check Box(es) that Apply:	Promoter	Beneficial Owner	☑ Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first, if in Sharma, D. Verne	dividual)				
Business or Residence Address 2555 E. Colorado Blvd., Suite 4	(Number and Street, C 00, Pasadena, CA 9110				
Check Box(es) that Apply:	Promoter	Beneficial Owner	☑ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if in Maynard, John	dividual)	-			
Business or Residence Address 2555 E. Colorado Blvd., Suite 4	(Number and Street, 000, Pasadena, CA 91107				
Check Box(es) that Apply:	Promoter	⊠ Beneficial Owner	☐ Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first, if in Schwartz, Daniel M.	dividual)				
Business or Residence Address 2555 E. Colorado Blvd., Suite 4	(Number and Street, 0 00, Pasadena, CA 9110				
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, if in Grubbs, Robert H.	dividual)				
Business or Residence Address	(Number and Street, C	City, State, Zip Code)			
2555 E. Colorado Blvd., Suite 4 Check Box(es) that Apply:	00, Pasadena, CA 91101	Beneficial Owner	☐ Executive Officer	□ Director	General and/or
Check Box(es) that Apply.	Fromotes	M Belleticiai Owliei	Executive Officer	⊠ bliectol	Managing Partner
Full Name (Last name first, if in	dividual)				
Kavanaugh, Jack Business or Residence Address	(Number and Street, (City, State, Zip Code)			
2555 E. Colorado Blvd. , Suite 4	00 Pasadena CA 9110	7			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, if in	dividual)				
Baxter, John D. Business or Residence Address	(Number and Street,	City, State, Zip Code)			
2555 E. Colorado Blvd., Suite 4	100 Pasadena CA 9110	7			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, if in	dividual)	,			
Maloney, Robert K.					
Business or Residence Address	(Number and Street,	City, State, Zip Code)			
2555 E. Colorado Blvd., Suite			···		
	(Use blank	sheet, or copy and use add	itional copies of this sheet, a	s necessary.)	

1.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?	YES	NO
2.	What is the minimum investment that will be accepted from any individual?	\$ <u>100,0</u>	00.00
3.	Does the offering permit joint ownership of a single unit?	YES	NO ⊠
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.		
Full N	Name (Last name first, if individual)		
Busin	ness or Residence Address (Number and Street, City, State, Zip Code)		
Name	e of Associated Broker or Dealer		
States	s in Which Person Listed Has Solicited or Intends to Solicit Purchasers		
(Chec	ck "All States" or check individual States)		All States
AL IL MT RI	AK AZ AR CA CO CT DE DC FL GA IN IA KS KY LA ME MD MA MI MN NE NV NH NJ NM NY NC ND OH OK SC SD TN TX UT VT VA WA WV WI	HI MS OR WY	ID MO PA PR
Full 1	Name (Last name first, if individual)		
Busin	ness or Residence Address (Number and Street, City, State, Zip Code)	-	
Name	e of Associated Broker or Dealer	<u> </u>	
State	es in Which Person Listed Has Solicited or Intends to Solicit Purchasers		
(Che	ck "All States" or check individual States)		All States
AL IL MT RI	AK AZ AR CA CO CT DE DC FL GA IN IA KS KY LA ME MD MA MI MN NE NV NH NJ NM NY NC ND OH OK SC SD TN TX UT VT VA WA WV WI	HI MS OR WY	ID MO PA PR
Full 1	Name (Last name first, if individual)		·
Busin	ness or Residence Address (Number and Street, City, State, Zip Code)	· · · · · · · · · · · · · · · · · · ·	
Nam	ne of Associated Broker or Dealer		
State	es in Which Person Listed Has Solicited or Intends to Solicit Purchasers		
(Che	eck "All States" or check individual States)		All States
AL IL MT RI	AK AZ AR CA CO CT DE DC FL GA IN IA KS KY LA ME MD MA MI MN NE NV NH NJ NM NY NC ND OH OK SC SD TN TX UT VT VA WA WV WI	HI MS OR WY	ID MO PA PR

19.00 20.00	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROC	EEDS	
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 \(\square\$ 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	\$0	\$ <u>0</u>
	Equity	\$9,000,000	\$ <u>6,450,000</u>
	Convertible Securities (including warrants)	\$ <u>0</u>	\$ <u>0</u>
	Partnership Interests	\$ <u>0</u> .	\$0
	Other (Specify)	\$ <u>0</u>	\$0
	Total	\$9,000,000	\$6,450,000
	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."		
	ui zeio.	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	10	\$6,450,000
	Non-accredited Investors	0	\$0
	Total (for filings under Rule 504 only)		\$
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 Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$
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 issuer. 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		\$
	Legal Fees	\boxtimes	\$210,000

\$210,000

Accounting Fees

Engineering Fees

Sales Commissions (specify finders' fees separately).....

Other Expenses (identify)

Total

	b. Enter the difference between the aggregate offering price given in response to Part C — Quest and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proce the issuer."		\$ <u>6,24</u>	<u>10,000</u>	
	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in respo Part C — Ouest 4.b above.				
	Part C — Quest 4.0 above.		Payments to Officer, Directors, & Affiliates	P	ayments to Others
	Salaries and fees	🗆	\$		\$
	Purchase of real estate	🗆	\$		\$
	Purchase, rental or leasing and installation of machinery and equipment	🗆	\$		\$
	Construction or leasing of plant buildings and facilities	🗆	\$		\$
	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)	🗆	\$		\$
	Repayment of indebtedness	🗆	\$		\$
	Working capital	🛛	\$ <u>6,240,000</u>		\$
	Other (specify):				
		🗆	\$		\$
	Column Totals	🗆	\$		\$
	Total Payments Listed (column totals added)	••	\boxtimes	\$ <u>6,2</u>	40,000
-	D. FEDERAL SIGNATURE				
-					
uπ	ssuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed und idertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff accredited investor pursuant to paragraph (b)(2) and Rule 502.	er Rule S , the info	05, the following formation furnished	g signated by the	ure consti le issuer to
	r (Print or Type) bun Vision, Inc. Signature May	, 2003			
	e of Signer (Print or Type) Title of Signer (Print or Type) President and OEO				

- ATTENTION -

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

		E. STATE SIGNAT	(URE			# 3 · · · ·					
1.	Is any party described in 17 CFR 230.262 prese	ntly subject to any of the disqualifica	ition provisions of suc	th rule?	YES	NO ⊠					
	See Appendix, Column 5, for state response.										
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.										
3.	The undersigned issuer hereby undertakes to fur	mish to the state administrators, upor	n writer request, inform	mation furnished by the issuer to off	erees.						
4.	The undersigned represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limiting Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.										
The i	ssuer has read this notification and knows the con.	ontents to be true and has duly cause	ed this notice to be si	igned on its behalf by the undersign	ned duly a	uthorized					
Issue	r (Print or Type)	Signature		Date C							
Calho	oun Vision, Inc.	Lo. 1. Tharma		May 9, 2003							
	e of Signer (Print or Type)	Title of Signer (Print or Type)									
D. Ve	erne Sharma	President and CEO		. Verne Sharma President and CEO							

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.

APPENDIX

1	Intend to sell to non- accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1)		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									
AR									
CA		х	Series B Preferred Stock \$9,000,000	10	\$6,450,000	0	0		Х
СО									
СТ									
DE									
DC									
FL									
GA									
ні									
ID									
IL									
IN									
IA									
KS									
KY									
LA	·								
ME									
MD						tr.			
MA									
MI									
MN									
MS							10.		

APPENDIX

1	Intend to sell to non- accredited investors in State (Part B-Item 1)		3 Type of security and aggregate offering price offered in state (Part C-Item 1)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)				
State	Yes	No		Number of Accredited Investors	Amount	rinvestor and archased in State C-Item 2) Number of Non-Accredited Investors	Amount	Yes	No
МО									
МТ									
NE									
NV									
NH									
NJ									
NM									
NY									
NC									
ND									
ОН									
ОК									
OR									
PA									
RI .									
SC									
SD					_				
TN									
TX									
UT									
VT									
VA					6				
WA		<u> </u>							
wv									
wı									
WY		<u> </u>							

APPENDÎX

1	accredited inv	sell to non- vestors 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)				State ULA attach exp waiver	5 cation under OE (if yes, clanation of granted) (-Item 1)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount .	Yes	No

Form D: Basic Identification Data (Continued)

Director Wolfen, Werner F. 2555 E. Colorado Blvd., Suite 400, Pasadena, CA 91107

Beneficial Owner Cosmetic Laser Eye and Refractive Centers of America c/o Jack Kavanaugh 2555 E. Colorado Blvd., Suite 400, Pasadena, CA 91107

Beneficial Owner CLEAR Innovations, LLC c/o Jack Kavanaugh 2555 E. Colorado Blvd., Suite 400, Pasadena, CA 91107

Beneficial Owner
The Herb and Lani Alpert Revocable Trust
c/o Werner Wolfen
Irell and Manella LLP
1800 Avenue of the Stars, Suite 900
Los Angeles, CA 90067

Beneficial Owner
The Moss Trust Dated 12/16/1999
c/o Werner Wolfen
Irell and Manella LLP
1800 Avenue of the Stars, Suite 900
Los Angeles, CA 90067