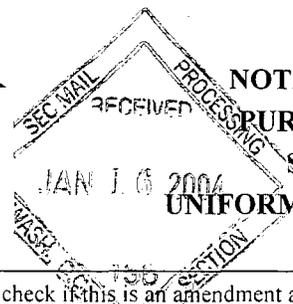


UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C 20549

FORM D

OMB Approval OMB Number:3235-0076 Expires: May 31, 2005 Estimated average burden hours per response . . . 1



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

Name of Offering () check if this is an amendment and name has changed, and indicate change.) Sale of Limited Liability Company Interests Filing Under (Check box(es) that apply) Rule 504 Rule 505 Rule 506 Section 4 (6) ULOE Type of Filing New Filing Amendment

PROCESSED

A. BASIC IDENTIFICATION DATA

1. Enter the information requested about issuer Name of Issuer () (check if this is an amendment and name has changed, and indicate change.) Commonwealth Income & Growth Private Fund I, LLC Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) Brief Description of Business Acquisition of computer peripheral equipment and other similar capital equipment, which is leased primarily to U.S. corporations and institutions.

JAN 20 2004 THOMSON FINANCIAL

Type of Organization corporation limited partnership, already formed other (please specify): Limited Liability Company business trust limited partnership, to be formed Actual or Estimated Date of Incorporation or Organization: Month 01 Year 04 Actual Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service Abbreviation for State: CN for Canada; FN for other foreign jurisdiction D E)

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. 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 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 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 photocopied 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 there 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 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 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 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 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 predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control Number.

A. BASIC IDENTIFICATION DATA

2. 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.

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)

Commonwealth Income & Growth Fund, Inc.

Business or Residence Address (Number and Street, City, State, Zip Code)

Oaklands Corporate Center, 470 John Young Way, Suite 300, Exton, PA 19341

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)

Springsteen, Kimberly A.

Business or Residence Address (Number and Street, City, State, Zip Code)

Commonwealth Capital Corp., Holiday Towers, 2435 US Hwy 19, Suite 340, Holiday, FL 34691

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)

Springsteen, George S.

Business or Residence Address (Number and Street, City, State, Zip Code)

Commonwealth Capital Corp., Holiday Towers, 2435 US Hwy 19, Suite 340, Holiday, FL 34691

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)

Abbot, Henry J.

Business or Residence Address (Number and Street, City, State, Zip Code)

Oaklands Corporate Center, 470 John Young Way, Suite 300, Exton, PA 19341

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)

Mason, Katrina

Business or Residence Address (Number and Street, City, State, Zip Code)

Oaklands Corporate Center, 470 John Young Way, Suite 300, Exton, PA 19341

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

B. INFORMATION ABOUT OFFERING

1. Has the issuer sold or does the issuer intend to sell, to non-accredited investors in this offering?
 Answer also in Appendix, Column 2, if filing under ULOE.

Yes No

2. What is the minimum investment that will be accepted from any individual?

\$20,000

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 Name (Last name first, if individual) Commonwealth Capital Securities Corp.

Business or Residence Address (Number and Street, City, State, Zip Code)

Oaklands Corporate Center, 470 John Young Way, Suite 300, Exton, PA, 19341

Name of Associated Broker or Dealer Commonwealth Capital Securities Corp.

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

(Check "All States" or check individual States)..... All States

[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID]
 [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO]
 [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA]
 [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]

Full Name (Last name first, if individual) See Attached List

Business or Residence Address (Number and Street, City, State, Zip Code)

Name of Associated Broker or Dealer

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

(Check "All States" or check individual States)..... All States

[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID]
 [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO]
 [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA]
 [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Name of Associated Broker or Dealer

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

(Check "All States" or check individual States)..... All States

[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID]
 [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO]
 [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA]
 [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

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 answer is "none" or "zero". If the transaction is an exchange offering, check this box and indicate in the column below the amounts of the securities offered for exchange and already exchanged.

Type of Security	Aggregate Offering Price	Amount Already Sold
Debt.....	\$ 0 _____	\$ 0 _____
Equity	\$ 0 _____	\$ 0 _____
<input type="checkbox"/> Common <input type="checkbox"/> Preferred		
Convertible Securities (including warrants)	\$ 0 _____	\$ 0 _____
Partnership Interests	\$ 0 _____	\$ 0 _____
Other (Specify <u>Limited Liability Company ("LLC") Interests</u>	\$ 20,000,000 _____	\$ 0 _____
Total	\$ 20,000,000 _____	\$ 0 _____

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.

	Number of Investors	Aggregate Dollar Amount of Purchases
Accredited Investors.....	_____ up to 499 _____	\$ 0 _____
Non-accredited Investors.....	_____ up to 35 _____	\$ 0 _____
Total (for filings under Rule 504 only)	_____	\$ _____

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 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.....	<input type="checkbox"/> \$ 0 _____
Printing and Engraving Costs.....	<input checked="" type="checkbox"/> \$ 3,000 _____
Legal Fees.....	<input checked="" type="checkbox"/> \$ 10,000 _____
Accounting Fees.....	<input type="checkbox"/> \$ 0 _____
Engineering Fees.....	<input type="checkbox"/> \$ 0 _____
Sales Commissions (Specify finder's fees separately)	<input checked="" type="checkbox"/> \$ 1,600,000 _____
Other Expenses (identify) <u>Offering Fees and Expenses</u>	<input checked="" type="checkbox"/> \$ 900,000 _____
Total.....	<input checked="" type="checkbox"/> \$ 2,513,000 _____

b. Enter the difference between the aggregate offering price given in response to Part C - Question I and total expenses furnished in response to Part C-Question 4.a. This difference is the "adjusted gross proceeds to the issuer." \$17,487,000

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C-Question 4.b. above.

	Payment to Officers, Directors & Affiliates	Payments To Others
Salaries and fees.....	<input type="checkbox"/> \$0	<input type="checkbox"/> \$0
Purchase of real estate.....	<input type="checkbox"/> \$0	<input type="checkbox"/> \$0
Purchase, rental or leasing and installation of machinery and equipment.....	<input type="checkbox"/> \$0	<input checked="" type="checkbox"/> \$485,000
Construction or leasing of plant buildings and facilities.....	<input type="checkbox"/> \$0	<input type="checkbox"/> \$0
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).....	<input type="checkbox"/> \$0	<input type="checkbox"/> \$0
Repayment of indebtedness.....	<input type="checkbox"/> \$0	<input type="checkbox"/> \$0
Working capital.....	<input type="checkbox"/> \$0	<input type="checkbox"/> \$0
Other (specify):.....	<input type="checkbox"/> \$0	<input type="checkbox"/> \$0
.....	<input type="checkbox"/> \$	<input type="checkbox"/> \$
.....	<input type="checkbox"/> \$	<input type="checkbox"/> \$
.....	<input type="checkbox"/> \$	<input type="checkbox"/> \$
Column Totals.....	<input type="checkbox"/> \$	<input checked="" type="checkbox"/> \$485,000
Total Payments Listed (column totals added).....	<input checked="" type="checkbox"/> \$485,000	

D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b) (2) of Rule 502.

Issuer (Print or Type)	Signature	Date
Commonwealth Income & Growth Private Fund I, LLC	<i>Kimberly A. Springsteen</i>	1-13-04
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
Kimberly A. Springsteen	EXECUTIVE VICE PRESIDENT	

ATTENTION

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

COMMONWEALTH INCOME & GROWTH PRIVATE FUND I (CIGPFI) BROKER/DEALER SELLING GROUP TO DATE (1/13/04)			
SELLING AGREEMENTS (AS OF 1/13/04)	CONTACT NAME/TITLE	ADDRESS	PH#
Burch & Co, Inc.	Wm. Brian Candler/Compliance Officer	911 Main Street 2302 Commerce Tower, Kansas City, Missouri 64105	816-842-4660
Capital Financial Services	Bradley P. Wells/COO	1 N. Minot Minot, ND 58703	701-857-0262
Steven L. Falk & Assoc. Inc.	Steven L. Falk/President	46 Roundhill Road Kinnelon, NJ 07405	973-838-5756
Harrison Douglas, Inc.	Doug W. Schriener/President	5303 E. Evans Avenue, Suite 201, Denver, CO 80222	303-584-0821
Investors Capital Corporation	Steven C. Preskenis/Counsel	230 Broadway Lynnfield, MA 01940 8565	786-593- 8565
G.A. Repple & Company	Glenn Repple/President	101 Normandy Rd., Suite 101 Casselberry, FL 32707	407-339-9090
Sterling Enterprises Group, Inc.	Alyn Towne III/President	PO Box 66719, St. Pete Beach, FL 33706	727-384-6550
Stuart Stone & Co., LLC	Gregory S. Grasso, Esq./Operating Mgr.	171 Ridgedale Ave., Suite F Florham Park, NJ 07932	973-443-9666
Waterford Investor Services, Inc.	Frank Wainscott/President	1201 S. Highland Ave., Suite 2 Clearwater, FL 33756	727-441-1616