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FORM D

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

JAN 20 2004

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



04005913

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

SEC USE ONLY	
Prefix	Serial
DATE RECEIVED	

Name of Offering (☐ check if this is an amendment and name has changed, and indicate change.)

Issuance of Common Stock, Series A 12.5% Redeemable Preferred Stock, Series B 13% Redeemable Preferred Stock and Junior Subordinated Promissory Notes

Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☒ Rule 506 ☐ Section 4(6) ☒ ULOE
Type of Filing: ☒ New Filing ☐ Amendment

A. BASIC IDENTIFICATION DATA

1. Enter the information requested about the issuer

Name of Issuer (☐ check if this is an amendment and name has changed, and indicate change.)

CompuPay Holdings Corp.

Address of Executive Offices (Number and Street, City, State, Zip Code)
One North Wacker Drive, Suite 4800, Chicago, IL 60606

Telephone Number (Including Area Code)
312-422-2400

Address of Principal Business Operations (Number and Street, City, State, Zip Code)
(if different from Executive Offices)

Telephone Number (Including Area Code)

Brief Description of Business

CompuPay Holdings Corp. is a holding company whose only substantial assets are CompuPay, Inc. and its subsidiaries. CompuPay, Inc. and its subsidiaries provide business services related to processing payroll and handling payroll tax payments.

Type of Business Organization

☒ corporation ☐ limited partnership, already formed ☐ other (please specify):
☐ business trust ☐ limited partnership, to be formed

Actual or Estimated Date of Incorporation or Organization: Month 11 Year 20 20 03 ☐ 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) DE

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.

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.

W

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)

Gill, Daniel M.

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

One North Wacker Drive, Suite 4800 Chicago, Illinois 60606

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

Full Name (Last name first, if individual)

Shisler, Bradley J.

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

One North Wacker Drive, Suite 4800 Chicago, Illinois 60606

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

Full Name (Last name first, if individual)

Willis Stein & Partners III., L.P.

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

One North Wacker Drive, Suite 4800 Chicago, Illinois 60606

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

Full Name (Last name first, if individual)

Heinzmann, Thomas L.

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

One North Wacker Drive, Suite 4800 Chicago, Illinois 60606

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

Full Name (Last name first, if individual)

Roth, Peter B.

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

6145 Paradise Point Drive, Miami, FL 33157

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

Full Name (Last name first, if individual)

Siegel, Roy

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

9750 NW 11 Street, Plantation, FL 33322

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

Full Name (Last name first, if individual)

Bream, Glen

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

5060 SW 101 Avenue, Cooper City, FL 33328

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)

Willis, John R.

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

One North Wacker Drive, Suite 4800, Chicago, Illinois 60606

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)

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

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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? Yes ☐ No ☒

Answer also in Appendix, Column 2, if filing under ULOE.

2. What is the minimum investment that will be accepted from any individual?..... \$0

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)

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]

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]

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 columns below the amounts of the securities offered for exchange and already exchanged

Type of Security	Aggregate Offering Price	Amount Already Sold
Debt	\$30,992,737.70	\$30,992,737.70
Equity	\$19,451,300.86	\$19,451,300.86
☒ Common ☒ Preferred		
Convertible Securities (including warrants)	\$0	\$0
Partnership Interests	\$0	\$0
Other (Specify _____)	\$0	\$0
Total	\$50,444,038.56	\$50,444,038.56

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 Investors	Aggregate Dollar Amount of Purchases
Accredited Investors	17	\$50,444,038.56
Non-accredited Investors	0	\$0
Total (for filings under Rule 504 only)	0	\$0

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	☐	\$
Printing and Engraving Costs	☐	\$
Legal Fees	☒	\$500,000
Accounting Fees	☐	\$
Engineering Fees	☐	\$
Sales Commission (specify finders' fees separately)	☐	\$
Other Expenses (identify) _____	☐	\$
Total	☐	\$

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

- b. Enter the difference between the aggregate offering price given in response to Part C – Question 1 and total expenses furnished in response to Part C – Question 4.a. This difference is the “adjusted gross proceeds to the issuer.”

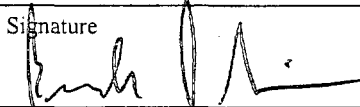
\$50,094,038.56

5. Indicate below the amount of the adjusted 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.

	Payments to Officers, Directors & Affiliates	Payments 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).....	☐ \$	☒ \$38,821,267
Repayment of indebtedness.....	☐ \$	☒ \$1,155,000
Working capital	☐ \$	☒ \$10,117,771
Other (specify): _____	☐ \$	☐ \$
_____	☐ \$	☐ \$
Column Totals	☐ \$	☒ \$50,094,038
Total Payments Listed (column totals added).....	☒ \$50,094,038	

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, the 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
CompuPay Holdings Corp.		January 14, 2004
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
Bradley J. Shisler	Assistant Secretary	

ATTENTION

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

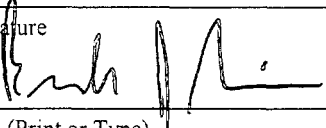
E. STATE SIGNATURE

1. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such 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 furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited 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 issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
CompuPay Holdings Corp.		January 14, 2004
Name (Print or Type)	Title (Print or Type)	
Bradley J. Shisler	Assistant Secretary	

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 State	2 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)	4 Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL	☐	☐						☐	☐
AK	☐	☐						☐	☐
AZ	☐	☒	Common Stock, Series A 12.5% Redeemable Preferred Stock, Series B 13% Redeemable Preferred Stock and Junior Subordinated Promissory Notes, in the aggregate offering price of: \$965,382.38	3	\$965,382.38	0	0	☐	☒
AR	☐	☐						☐	☐
CA	☐	☒	Common Stock, Series A 12.5% Redeemable Preferred Stock, Series B 13% Redeemable Preferred Stock and Junior Subordinated Promissory Notes, in the aggregate offering price of: \$681,869.52	1	\$681,869.52	0	0	☐	☒
CO	☐	☐						☐	☐
CT	☐	☐						☐	☐
DE	☐	☐						☐	☐
DC	☐	☐						☐	☐
FL	☐	☒	Common Stock, Series A 12.5% Redeemable Preferred Stock, Series B 13% Redeemable Preferred Stock and Junior Subordinated Promissory Notes in the aggregate offering price of: \$ 17,866,626.35	8	\$17,866,626.35	0	0	☐	☒
GA	☐	☐						☐	☐
HI	☐	☐						☐	☐
ID	☐	☐						☐	☐

APPENDIX

1		2		3	4				5	
		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)	Type of investor and amount purchased in State (Part C-Item 2)				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
IL		☐	☒	Common Stock, Series A 12.5% Redeemable Preferred Stock and Junior Subordinated Promissory Notes, in the aggregate offering price of: \$30,000,000	4	\$30,000,000	0	0	☐	☒
IN		☐	☐						☐	☐
IA		☐	☐						☐	☐
KS		☐	☐						☐	☐
KY		☐	☐						☐	☐
LA		☐	☐						☐	☐
ME		☐	☐						☐	☐
MD		☐	☐						☐	☐
MA		☐	☐						☐	☐
MI		☐	☐						☐	☐
MN		☐	☐						☐	☐
MS		☐	☐						☐	☐
MO		☐	☐						☐	☐
MT		☐	☐						☐	☐
NE		☐	☐						☐	☐
NV		☐	☐						☐	☐
NH		☐	☐						☐	☐
NJ		☐	☐						☐	☐
NM		☐	☐						☐	☐
NY		☐	☒	Common Stock, Series A 12.5% Redeemable Preferred Stock, Series B 13% Redeemable Preferred Stock and Junior Subordinated Promissory Notes, in the aggregate offering price of: \$930,160.31	1	\$930,160.31	0	0	☐	☒

APPENDIX

1	2 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)	4 Type of investor and amount purchased in State (Part C-Item 2)				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
NC	☐	☐						☐	☐
ND	☐	☐						☐	☐
OH	☐	☐						☐	☐
OK	☐	☐						☐	☐
OR	☐	☐						☐	☐
PA	☐	☐						☐	☐
RI	☐	☐						☐	☐
SC	☐	☐						☐	☐
SD	☐	☐						☐	☐
TN	☐	☐						☐	☐
TX	☐	☐						☐	☐
UT	☐	☐						☐	☐
VT	☐	☐						☐	☐
VA	☐	☐						☐	☐
WA	☐	☐						☐	☐
WV	☐	☐						☐	☐
WI	☐	☐						☐	☐
WY	☐	☐						☐	☐
PR	☐	☐						☐	☐

FORM U-2 UNIFORM CONSENT TO SERVICE OF PROCESS

KNOW ALL MEN BY THESE PRESENTS.

That the undersigned CompuPay Holdings Corp, a corporation organized under the laws of Delaware, for purposes of complying with the laws of the States indicated hereunder relating to either the registration or sale of securities, hereby irrevocably appoints the officers of the States so designated hereunder and their successors in such offices, its attorney in those States so designated upon whom may be served any notice, process or pleading in any action proceeding against it arising out of, or in connection with, the sale of securities or out of violation of the aforesaid laws of the States so designated; and the undersigned does hereby consent that any such action or proceeding against it may be commenced in any court of competent jurisdiction and proper venue within the States so designated hereunder by service of process upon the officers so designated with the same effect as if the undersigned was organized or created under the laws of that State and have been served lawfully with process in that State.

It is requested that a copy of any notice, process or pleading served hereunder be mailed to:

CompuPay Holdings Corp.
One North Wacker Drive, S-4800
Chicago, IL 60606
Attention: Bradley J. Shisler, Assistant Secretary
Facsimile No.: 312-422-2424

Place an "X" before the name of all the States for which the person executing this form is appointing the designated Officer of that State as its attorney in that State for receipt of service of process:

☐ ALABAMA	Secretary of State	☒ FLORIDA	Department of Banking and Finance
☐ ALASKA	Administrator of the Division of Banking and Corporations, Department of Commerce and Economic Development	☐ GEORGIA	Commissioner of Securities
☒ ARIZONA	The Corporation Commission	☐ GUAM	Administrator, Department of Finance
☐ ARKANSAS	The Securities Commissioner	☐ HAWAII	Commissioner of Securities
☒ CALIFORNIA	Commissioner of Corporations	☐ IDAHO	Director, Department of Finance
☐ COLORADO	Securities Commissioner	☒ ILLINOIS	Secretary of State
☐ CONNECTICUT	Banking Commissioner	☐ INDIANA	Secretary of State
☐ DELAWARE	Securities Commissioner	☐ IOWA	Commissioner of Insurance
☐ DISTRICT OF COLUMBIA	Public Service Commission	☐ KANSAS	Secretary of State
☐ KENTUCKY	Director, Division of	☐ OHIO	Secretary of State

	Securities		
☐ LOUISIANA	Commissioner of Securities	☐ OREGON	Director, Department of Insurance and Finance Securities Administrator
☐ MAINE	Administrator, Securities	☐ OKLAHOMA	Securities Administrator
☐ MARYLAND	Commissioner of the Division of Securities	☐ PENNSYLVANIA	Pennsylvania does not require filing of a Consent to Service of Process
☐ MASSACHUSETTS	Secretary of State	☐ PUERTO RICO	Commissioner of Financial Institutions
☐ MICHIGAN	Administrator, Corporation and Securities Bureau, Department of Commerce Division	☐ RHODE ISLAND	Director of Business Regulations
☐ MINNESOTA	Commissioner of Commerce	☐ SOUTH CAROLINA	Secretary of State
☐ MISSISSIPPI	Secretary of State	☐ SOUTH DAKOTA	Director of the Division of Securities
☐ MISSOURI	Securities Commissioner	☐ TENNESSEE	Commissioner of Commerce and Insurance
☐ MONTANA	State Auditor and Commissioner of Insurance	☐ TEXAS	Securities Commissioner
☐ NEBRASKA	Director of Banking and Finance	☐ UTAH	Director, Division of Securities
☐ NEVADA	Secretary of State	☐ VERMONT	Secretary of State
☐ NEW HAMPSHIRE	Secretary of State	☐ VIRGINIA	Clerk, State Corporation Commission
☐ NEW JERSEY	Chief, Securities Bureau	☐ WASHINGTON	Director of the Department of Licensing
☐ NEW MEXICO	Director, Securities Division	☐ WEST VIRGINIA	Commissioner of Securities
☒ NEW YORK	Secretary of State	☐ WISCONSIN	Commissioner of Securities
☐ NORTH CAROLINA	Secretary of State	☐ WYOMING	Secretary of State
☐ NORTH DAKOTA	Securities Commissioner		

Dated this _____ day of January, 2004.
(SEAL)

CompuPay Holdings Corp



By: Bradley J. Shisler
Its: Assistant Secretary

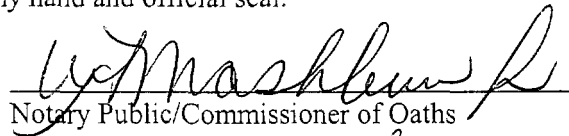
CORPORATE ACKNOWLEDGEMENT

State of _____)

County of _____)

On this ____ day of _____, 20____, before me _____ the undersigned officer, personally appeared _____ known personally to me to be the _____ of _____ and acknowledged that he, as an officer being authorized so to do, executed the foregoing instrument for the purposes therein contained, by signing the name of the corporation by himself as an officer.

IN WITNESS WHEREOF I have hereunto set my hand and official seal.


Notary Public/Commissioner of Oaths

(SEAL)

My Commission Expires July 19, 2006

