

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

FORM D

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

3235-0076

Expires: Estimated average burden

SEC USE ONLY Serial

[TX]

Date Received

Prefix

RECEIVED

Name of Offering ([]) check if this is an amendment	at and name has changed	I, and indicate chang	(c) (C) (C)	7	•
traine of offering ([] eneck it this is an amendmen	it and name has energed	i, and marcate chang			
HMPF NOTE FUND, LP					
Filing Under (Check box(es) that apply): Type of Filing: [X] New Filing	[] Rule 504	[] Rule 505	[X] Rule 506	[] Section 4((6) [] ULOE
	A. BASIC	IDENTIFICATI	ON DATA		
Enter the information requested about	out the issuer				
HMPF Note Fund, LP, a Texas Limited 1	Partnership				
Name of Issuer ([] check if this is an amendr	nent and name has cha	anged, and indicat	e change.)		
9250 Manday Bood Suito 291 Dollas "	Toyor 75221			214/346-07	50
8350 Meadow Road, Suite 281, Dallas, Address of Executive Offices (Number and S		Code)			ber (Including Area Code)
Address of Principal Business Operations (Nu	imber and Street, City	, State, Zip Code)		Telephone Num	ber (Including Area Code)
if different from Executive Offices)					
Real Estate Investments			· <u> </u>		PROCESSED
Brief Description of Business				3	PROCESSED NOV 2 9 2006
Type of Business Organization				_	THOMSON
	imited partnership, alr nited partnership, to be	-	[] other (please	specify):	FINANCIAL
		MONTH		EAR	
Actual or Estimated Date of Incorporation or Jurisdiction of Incorporation or Organization:		Aug.	- abbassistion f C		Actual [] Estimate

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.

CN for Canada; FN for other foreign jurisdiction)

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 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 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
 - 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 [X] General and/or Managing Partner

Full Name (Last name first, if individual)

HMI Notes, LLC

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

8350 Meadow Road, Suite 286, Dallas, Texas 75231

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

Full Name (Last name first, if individual)

.8350 Meadow Road, Suite 286, Dallas, Texas_75231

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

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

James N. Howard

Full Name (Last name first, if individual)

8350 Meadow Road, Suite 286, Dallas, Texas 75231

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

John Howard

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

8350 Meadow Road, Suite 286, Dallas, Texas 75231

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 [X]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)

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

	•					B. INF	ORMAT	'ION AB	OUT OF	FERING	3				
1.	Has the	issuer so	old, or do	es the issu	ier intenc	i to sell, t	o non-acc	credited i	nvestors i	in this of	fering?			Yes	No [X]
			A	nswer als	o in App	endix, Co	olumn 2, i	if filing u	nder ULC	DE.					
2.	What is	the mini	mum inv	estment tl	nat will b	e accepte	d from ar	ıy individ	dual?	.,,,				\$ <u>25</u>	,000
														Yes	No
3.	Does th	e offerin	g permit j	oint own	ership of	a single ı	ınit?			,,,				[X]	[]
	or simil listed is of the b	lar remur an assoc roker or c	eration fo iated pers dealer. If i	ar solicita	tion of point of a br five (5) r	urchasers roker or d persons to	in conne	etion wit	h sales of	`securitie	es in the c	offering. I	any commission f a person to be es, list the name der, you may set		
Full Na	me (Las	t name fi	rst, if ind	ividual)										·	
D	NON	E	dduana ()	lionale da o	- d Ctroot	, City, Sta	ta Zin C	'ada)							
Busines	s or Kes	sidence F	vaaress (1	number ai	na Street,	, City, Sta	ite, Zip C	ode)							
Name o	f Assoc	iated Bro	ker or De	ealer										<u>.</u>	
States in	ı Which	Person	Listed Ha	s Solicite	d or Inter	nds to So	licit Purc	hasers						-	
						[CO]			[DC]	[FL]	[GA]	[HI]	[ID]	[X] All :	States
	[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MŚ]	[MÓ]		
	[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI] [[OR] Wy] [P	[PA] R]		
Full No	me (La	st name f	irst, if inc	lividual)											
														<u></u>	
Busines	is or Re	sidence A	Address (1	Number a	nd Street	, City, Sta	ite, Zip C	Code)							
Name o	f Assoc	iated Bro	ker or De	ealer											
States in	n Which	Person	Listed Ha	s Solicite	d or Inter	nds to So	licit Purc	hasers			· · · · · · · · · · · · · · · · · · ·				
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	[AL] [IL]	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]		
	[MT] [RI]	[NE] [SC]	ΝÝ	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]		
Full Na	-			individu				[,,,,		[,, ,]	[" · · ·]	[,, •]			
							·								
Busine	ss or R	esidence	e Addres	s (Numb	er and S	street, Ci	ty, State	, Zip Co	ode)						
Name	of Asso	ociated I	Broker o	Dealer											
States	in Whi	ch Darco	n Lietad	Har Sol	icited or	Intends	to Solic	it Purch:	acerc						
	neck "A	All State:	s" or che	ck indivi	idual Sta	ites)							**************************************	[.].A.ll	States
	[AL] [IL]	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]		
	[MT] [RI]	[NE]	[NV] [SD]	[NH]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK]	[OR] [WY]	[PA] [PR]		
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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 Alread Sold
	Debt	S	\$
	Equity	\$	\$
	[] Common [] Preferred		
	Convertible Securities (including warrants)	S0	S0
	Partnership Interests	\$ 4,000,000	\$ 100,000
	Other (Specify) -	S0-	S -0-
	Total	\$ 4,000,000	\$100,000_
	Answer also in Appendix, Column 3, if filing under ULOE.	<u> </u>	3
2.		Number of Investors	Aggregate Dollar Amoun of Purchases
	Accredited Investors	1	\$ 100,000
	Non-accredited Investors		S
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		<u> </u>
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.	Tuna of	Dollar Amoun
	Type of offering NOT APPLICABLE	Type of Security	Sold
	Rule 505		S
	Regulation A		\$
	Rule 504		\$
	Total		s
4.	a. Furnish a statement for all expenses in connection with the issuance and distribution of the secur Exclude amounts in relating solely to organization expenses of the issuer. The information may be given contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the	n as subject to future	
	Transfer Agent's Fees	[]	S <u>-0-</u>
	Printing and Engraving Costs	[]	\$
	Legal Fees	[]	S
	Accounting Fees	[]	S0-
	Engineering Fees	[]	\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify) Organization Costs (Estimate)	[]	\$ 15,000 \$ -0- \$ -0-
	Total		S <u>3,985,000</u>

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

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE O	F 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."		S_3,985,000
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.	Payments to Officers, Directors & Affiliates	Payments To Others
	Salaries and fees	[]\$0-	[]\$0
	Purchase of real estate	[]\$0-	[]S <u>-0-</u>
	Purchase, rental or leasing and installation of machinery and equipment	[]\$0-	[]S <u>-0-</u>
	Construction or leasing of plant buildings and facilities	[]\$0	[] S <u>-0-</u>
	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	(16.0	
	issuer pursuant to a merger)	[]\$0-	[]\$0-
	Repayment of indebtedness	[] S <u>-0-</u>	[]\$0
	Working capital	[]\$0-	[] \$ <u> -0- </u>
	Other (specify): Investments	[]\$0	[X] \$ <u>3.985,000</u>
		{] \$ <u>-()-</u>	[X] \$ <u>3,985,000</u>
	Column Totals		
	Total Payments Listed (column totals added)	[x] \$ <u>3,985,00</u>	<u>0</u>
_	D. FEDERAL SIGNATURE		
co	the issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is finishing an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon mished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.	led under Rule 505, the written request of its	he following signatur staff, the informatio
[·	Ssuer (Print or Type) HMPF Note Fund, LP Signature L L L L L L L L L L L L L	11/-	
] 1	HMPF Note Fund, LP	11/16/06	
ī	Name of Signer (Print or Type) Title of Signer (Print or Type) HFS HMPF Note Fund, L BY: HMI Notes, LLC, its General Partner, BY HMI, IN		
١.	OHN HOWARD BY: John Howard, Vice President	57, 115 7 Tanagar	
L_			

ATTENTION

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

E. STATE SIGNATURE

	· · · · · · · · · · · · · · · · · · ·	/es	No
1.	Is any party described in 17 CFR 230.252(c), (d), (e) or (f) presently subject to any of the disqualitication		
	provisions of such rule?	[]	[x]

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.
- The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to
 offcrees.
- 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) HMPF Note Fund, LP	Signature 11/16/06
Name of Signer (Print or Type) JOHN HOWARD	Tire of Signer (Print or Type) HFS HMPF Note Fund, LP BY: HMI Notes, LLC, its General Partner, BY HMI, INC., its Manager BY: John Howard, Vice President

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	2		3	4				5	
	Intend to non-acc invest Sta (Part B-	credited ors in ate	Type of security and aggregate offering price offered in state (Part C-Item 1)	Тур	Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)				
State	Yes	No	Limited Partnership Interests	Number of accredited investors	Amount	Number of non-accredited investors	Amount	Yes	No
AL									
AK									
ΑZ									
AR									
CA									
со									
СТ									
DE									
DC									
FL									
GA									
HI									
ID									
ΙL									
IN									
ΙA								<u> </u>	
KS									
KY									
LA									
ME									
MĐ									
МА									
МІ									
MN									
MS									
МО									

APPENDIX

1	2 3			5					
	Intend to sell to non-accredited investors in State (Part B-Item 1) Intend to sell to Type of security and aggregate offering price offered in state (Part C-Item 1)			Тур	Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)				
State	Yes	No	Limited Partnership Interests	Number of accredited investors	Amount	Number of non-accredited investors	Amount	Yes	No
мт							•		
NE									
NV									
NH									
NJ			-				-		
NM									
NY									
NC									
ND	1								
ОН									
ОК									
OR									
PA									
RI									
sc									
SD						<u></u>			
TN			· · · · · · · · · · · · · · · · · · ·						<u> </u>
TX	Х		\$4,000,000	1	\$100,000				Х
UT									
VT									<u> </u>
VA									
WA									
wv									
WI									
WY				ļ 					<u> </u>
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