FORM D



Filing Fee: There is no federal filing fee.

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

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

1084	1086745										
	OMB APPROVAL										
	OMB Numbe Expires: May Estimated av hours per for	31,200 erage b m	ūrden . 1								
	SEC USE ONLY										
	Prefix		Serial								

DATE RECIEVED

Filing Under (Check box(es) that apply): □ Rule 504 □ Rule 505 X Rule 506 □ Section 4(6) Type of Filing: X New Filing □ Amendment	5) 🗆 ULOE
A. BASIC IDENTIFICATION DAT	
Enter the information requested about the issuer	AUG WB 2003
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) WPCS INTERNATIONAL INCORPORATED	181/4
Address of Executive Offices (Number and Street, City, State, Zip Code) 140 South Village Avenue, Exton, Pennsylvania 19341	Telephone Number (Including Area Code) (610) 903-0400
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 Design and installation of wireless communications systems.	PROCESSED
Type of Business Organization X corporation	AUG 0 7 2003 THOMSON FINANCIAL
Actual or Estimated Date of Incorporation or Organization: Month Year	X Actual 🗆 Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation CN for Canada; FN for other foreign jurisdiction CN for Canada; FN foreign jurisdiction CN for Canada; FN foreign jurisdiction CN	
GENERAL INSTRUCTIONS Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation I	O 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 Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received 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 signal copy or bear typed or printed signatures.	signed. Any copies not manually signed must be photocopies of the

=ailure 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.

ATTENTION

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

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

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.

ecordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.



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 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. 	of the
Check Box(es) that Apply: ☐ Promoter X Beneficial Owner X Executive Officer X Director ☐ General and/or Managing Partner	
Full Name (Last name first, if individual) Hidalgo, Andrew	
Business or Residence Address (Number and Street, City, State, Zip Code) c/o WPCS International Incorporated, 140 South Village Avenue, Exton, Pennsylvania 19341	
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner X Executive Officer ☐ Director ☐ General and/or Managing Partner	
Full Name (Last name first, if individual) Walker, Donald	
Business or Residence Address (Number and Street, City, State, Zip Code) c/o WPCS International Incorporated, 140 South Village Avenue, Exton, Pennsylvania 19341	
Check Box(es) that Apply: □Promoter □Beneficial Owner XExecutive Officer □ Director □General and/or Managing Partner	
Full Name (Last name first, if individual) von Schaumburg, E.J.	
Business or Residence Address (Number and Street, City, State, Zip Code) c/o WPCS International Incorporated, 140 South Village Avenue, Exton, Pennsylvania 19341	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	
Full Name (Last name first, if individual) Dumbroff, Norm	
Business or Residence Address (Number and Street, City, State, Zip Code) c/o WPCS International Incorporated, 140 South Village Avenue, Exton, Pennsylvania 19341	
Check Box(es) that Apply: □Promoter □ Beneficial Owner □ Executive Officer X Director □General and/or Managing Partner	
Full Name (Last name first, if individual) Hebenton, Neil	
Business or Residence Address (Number and Street, City, State, Zip Code) c/o WPCS International Incorporated, 140 South Village Avenue, Exton, Pennsylvania 19341	
Check Box(es) that Apply: □Promoter □Beneficial Owner □Executive Officer X Director □General and/or Managing Partner	
Full Name (Last name first, if individual) Walker, Gary	
Business or Residence Address (Number and Street, City, State, Zip Code) c/o WPCS International Incorporated, 140 South Village Avenue, Exton, Pennsylvania 19341	
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer X Director ☐ General and/or Managing Partner	
Full Name (Last name first, if individual) Whitehead, William	
Business or Residence Address (Number and Street, City, State, Zip Code) 20 WPCS International Incorporated, 140 South Village Avenue, Exton, Pennsylvania 19341	
Jse blank sheet, or copy and use additional copies of this sheet, as necessary.)	

2 of 8

SEC 1972 (5/91)

,	1				B. IN	FORMA'	ΓΙΟΝ AB	OUT OF	ERING				
I. Has the i	ssuer solo		the issuer						ffering?			Yes No	Σ
2. What is	the minim	um invest	tment that	will be ac	cepted fro	m any ind	lividual? .					Not App	licable.
3. Does the	offering	permit joi	nt ownersl	nip of a si	ngle unit?	·····				•••••		X Yes	No
4. Enter the commission If a person state or state of such a br	or simila to be liste es, list the	r remuner d is an as names of	ation for s sociated po the broke	olicitation erson or a r or dealer	of purcha gent of a b :. If more	sers in co roker or d than five	nnection v lealer regis (5) person	vith sales of stered with s to be list	of securities the SEC	es in the o and/or wi	ffering. th a		
Full Name (Last nam	e first, if i	ndividual)										
Business or 4 West Los						ite, Zip Co	ode)						
Name of As Brookshire											··		
States in W					ends to Sol	icit Purch	asers						V All States
(Check "Al [AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	X All States
[IL] [IN] [MT] [RI]	[IA] [NE] [SC]	[KS] [NV] [SD]	[KY] [NH] [TN]	[LA] [NJ] [TX]	[ME] [NM] [UT]	[MD] [NY] [VT]	[MA] [NC] [VA]	[MI] [ND] [WA]	[MN] [OH] [WV]	[MS] [OK] [WI]	[MO] [OR] [WY]	[PA] [PR]	
Full Name	(Last nam	e first, if	individual))									
Business or	Residenc	e Address	s (Number	and Stree	t, City, St	ate, Zip C	ode)						
Name of A	ssociated	Broker or	Dealer										
States in W	hich Pers	on Listed	Has Solici	ited or Inte	ends to So	licit Purch	nasers						
(Check "Al [AL]	l States" ([AK]	or check in [AZ]	ndividual ([AR]	States) [CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
[IL] [IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]	
Full Name	(Last nan	ne first, if	individual)									
Business of	r Residen	ce Addres	s (Number	and Stree	et, City, St	ate, Zip C	ode)						
Name of A	ssociated	Broker or	Dealer										
States in W	/hich Pers	on Listed	Has Solic	ited or Int	ends to So	licit Purcl	nasers						
(Check "A"	ll States" [AK]	or check i [AZ]	ndividual : [AR]	States) [CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
[IL] [MT] [RI]	[IN] [NE] [SC]	[IA] [NV] [SD]	[KS] [NH] [TN]	[KY] [NJ] [TX]	[LA] [NM] [UT]	[ME] [NY] [VT]	[MD] [NC] [VA]	[MA] [ND] [WA]	[MI] [OH] [WV]	[MN] [OK] [WI]	[MS] [OR] [WY]	[MO] [PA] [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 exchange.		
	Type of Securities	Aggregate Offering Price	Amount Already Sold
	Debt		
	Equity - Common Stock and Warrants	\$2,500,000	\$1,000,000
	X Common Preferred		
	Convertible Securities (including warrants)		
	Partnership Interests		
	Other (Specify) Membership Units		
			\$1,000,000
	Total	\$1,500,000	<u> Ψ1,000,000</u>
_	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	22	\$1,000,000
	Non-accredited Investors		
	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 I.	Type of Security	Dollar Amount Sold
	Type of offering	**************************************	
	Rule 505		
	Regulation A		
	Rule 504		- des de est de la completa del completa de la completa de la completa del completa de la completa del la completa de la completa del la completa de la comp
	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 he 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 left of the estimate.		
	Transfer Agent's Fees		
	Printing and Engraving Costs	x	\$1,000
	Legal Fees	X	\$12,000
	Accounting Fees		
	Engineering Fees		
	Sales Commissions (specify finders' fees separately)	X	\$250,000
	Other Expenses (identify):		
	Total	X	\$263,000

b. Enter the difference between the aggregate offering total expenses furnished in response to Part C - Que proceeds to the issuer."	uestion 4.a. This difference is the "adjusted gross				\$ 2,2	37 ,- 000
Indicate below the amount of the adjusted gross procupurposes shown. If the amount for any purpose is not of the estimate. The total of the payments listed must response to Part C - Question 4.b above.	t known, furnish an estimate and check the box to t	he left				
		Of Di	yments to ficers, rectors, & filiates		Payment Others	ts To
Salaries and fees			0		\$	0
Assignment of Lease		0	0			0
Purchase, rental or leasing and installation o	f machinery and equipment	0	0	0		0 .
Construction or leasing of plant buildings an	d facilities		0			0
	ne value of securities involved in this offering that curities of another Issuer pursuant to a merger).	X	0		*\$9 C	0,000
Site Development and Coordination			0			0
Working capital		X	0		\$1,3	37 ³ ,000
Other (specify): Loan to P2i, Inc. with	respect to prospective merger	X	0			0
Column Totals	·	X	\$ 0		\$2, 23	37 , 3000
Total Payments Listed (column totals	added)		\$	2,23	7,000	
Service				<u>,</u>		
	D. FEDERAL SIGNATURE					
The issuer has duly caused this notice to be signed by constitutes an undertaking by the issuer to furnish to the he issuer to any non-accredited investor pursuant to particular to par	U.S. Securities and Exchange Commission, upon w					
ssuer (Print or Type) : WPCS INTERNATIONAL INCORPORATED	Signature Malan	Date 8	11/03			
Name of Signer (Print or Type): Andrew Hidalgo	Title of Signer (Print or Type): President	, 	• •			
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C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	E. STATE SIGNATURE
1.	Is any party described in 17 CFR 230.252(c), (d), (e) or (f) presently subject to any of the disqualification provisions of such rule?
	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 offerers.
	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering emption (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 blishing that these conditions have been satisfied.
dul	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 y authorized person.
	ner (Print or Type): CS International Incorporated Signature All 162
Nai	me of Signer (Print or Type): Title of Signer (Print or Type):

President

nstruction:

Andrew Hidalgo

6 of 8 SEC 1972 (5/91)

^{&#}x27;rint 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

	non-ac	to sell to credited ors in State 3-Item 1)	Type of security and aggregate offering price offered in State (Part C - Item 1)	Type of invest	tor and amour	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		X							
AK		X							
AZ		X							
AR		X							
CA		X							
со		X							
CT		X	\$2,500,000	2	\$75,000				X
DE		X							
DC		X							
FL		Х	\$2,500,000	2	\$230,000				X
GA		X	\$2,500,000	2	\$105,000				X
HI		X							
ID		X							
IL		X	\$2,500,000	1	\$12,500				X
IN		X							
IA		X							
KS		X							
KY		X							
LA		X	\$2,500,000	1	\$4,500				X
ME		X							
MD		X	\$2,500,000	1	\$6,250				X
МА		X							
MI		X	\$2,500,000	1	\$37,500				X
MN		X							
MS		X							
МО		X							

APPENDIX

	non-ac	to sell to credited ors in State 3-Item 1)	Type of security and aggregate offering price offered in State (Part C - Item 1)	Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)					
State	Yes	es No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
МТ		X							
NE		X							
NV		x							!
NH		x							
NJ		X	\$2,500,000	2	\$28,500				X
NM		X							
NY		X	\$2,500,000	6	\$306,250				X
NC		X							
ND		X							
ОН		X							
ОК		X							
OR		X							
PA		X							
RI		X							
SC		X							
SD		X							
TN		X							
TX		X							
UT		X							
VT		X							
VA		X							
WA		X							
WV		X							
WI		X							
WY		X							
PR		X							