SECURITIES AND EXCHANGE COMMISSION

FORM D

Official notice of an offering of securities that is made without registration under the Securities Act in reliance on an exemption provided by Regulation D and Section 4(6) under the Act.

Filing Date: **2021-09-28 SEC Accession No.** 0001885064-21-000001

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FILER

Clear Health Pass Holdings LLC

CIK:1885064| IRS No.: 863303322 | State of Incorp.:DE | Fiscal Year End: 1231 Type: D | Act: 33 | File No.: 021-414828 | Film No.: 211284976

Mailing Address 30 WALL STREET 8TH FLOOR NEW YORK NY 10005 Business Address 30 WALL STREET 8TH FLOOR NEW YORK NY 10005 2126344300

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

FORM D

Washington, D.C. 20549

OMB APPROVAL					
OMB Number:	3235-0076				
Expires: June 3	30, 12				
Estimated average					
burden					
hours per	4.00				
response:	4.00				

Notice of Exempt Offering of Securities

1. Issuer's Identity					
CIK (Filer ID Number)	Pre	evious Name(s)	X	None	Entity Type
0001885064					□Corporation
Name of Issuer					☐ Limited Partnership
Clear Health Pass Ho	oldings LLC				
Jurisdiction of Incorpor	ration/				☐ General Partnership
Organization					☐ Business Trust
DELAWARE	Organization				□Other
Year of Incorporation/C	•				
Over Five Years Age					
Within Last Five Year Within La	ars (Specify Year) 202	21			
☐ Yet to Be Formed					
2. Principal Place of I	Business and Conta	ct Information			
Name of Issuer					
Clear Health Pass Ho	oldings LLC				
Street Address 1			Street Address 2		
30 WALL STREET				8TH FLOOR	
City	State/Province/Cour	ntry		ZIP/Postal Code	Phone No. of Issuer
NEW YORK	NEW YORK			10005	2126344300
3. Related Persons					
Last Name	First Na	ame			Middle Name
Cataldi	John				
Street Address 1	Street /	Address 2			
30 Wall Street	8th Flo	oor			
City	State/P	rovince/Country	′		ZIP/Postal Code
New York	NEW '	YORK			10005
Relationship: 🗷 Exec	cutive Officer 🗷 Directo	or □ Promoter			
Clarification of Respon	nse (if Necessary)				
4. Industry Group					

	Agriculture Banking & Financial Service Commercial Banking Insurance Investing Investing Investment Banking Pooled Investment Fund Other Banking & Financial Services Business Services Energy Coal Mining Electric Utilities Energy Conservation Environmental Services Oil & Gas	 ☐ Health Insurance ☐ Hospitals & Physicians ☐ Pharmaceuticals ☑ Other Health Care ☐ Manufacturing Real Estate 	Retailing Restaurants Technology Computers Telecommunications Other Technology Travel Airlines & Airports Lodging & Conventions Tourism & Travel Services Other Travel Other
	☐ Other Energy		
5. Is	ssuer Size		
Rev	enue Range	Aggregate Net Asset Value	Range
X	No Revenues	□ No Aggregate Net Asset	Value
	\$1 - \$1,000,000	□ \$1 - \$5,000,000	
	\$1,000,001 - \$5,000,000	□ \$5,000,001 - \$25,000,00	00
	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,0	000
	\$25,000,001 - \$100,000,000	\$50,000,001 - \$100,000	,000
	Over \$100,000,000	□ Over \$100,000,000	
	Decline to Disclose	□ Decline to Disclose	
	Not Applicable	☐ Not Applicable	
6. F	ederal Exemption(s) and Exc	lusion(s) Claimed (select all that apply)	
□R	ule 504(b)(1) (not (i), (ii) or (iii))	 □Rule 505	
□R	ule 504 (b)(1)(i)	□Rule 506	
□R	ule 504 (b)(1)(ii)	□Securities Act Section 4(6)	
□R	tule 504 (b)(1)(iii)	□Investment Company Act Section 3(c)	
		\square Section 3(c)(1) \square Section 3(c)(9)	
		\square Section 3(c)(2) \square Section 3(c)(10)	
		□Section 3(c)(3) □Section 3(c)(11)	
		□Section 3(c)(4) □Section 3(c)(12)	
		\square Section 3(c)(5) \square Section 3(c)(13)	
		\Box Section 3(c)(6) \Box Section 3(c)(14)	
		□Section 3(c)(7)	
7. T	ype of Filing		

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New Notice Date of First Sale
First Sale Yet to Occur

☐ Amendment						
8. Duration of Offering						
Does the Issuer intend th	nis offering to las	t more than c	one year? ☒ Yes ☐	No		
9. Type(s) of Securities	Offered (select	all that app	ly)			
☐ Pooled Investment Fur	nd Interests			☑ Equity		
☐ Tenant-in-Common Se	curities			□Debt		
☐ Mineral Property Secu	rities			Option, Warrant or Another Security	Other Righ	nt to Acquire
Security to be Acquired Right to Acquire Secur		of Option, W	arrant or Other	☐ Other (describe)		
10. Business Combinat	ion Transaction	1				
Is this offering being mad acquisition or exchange of		with a busine	ess combination tra	nsaction, such as a mei	rger,	□ Yes 🗷 No
Clarification of Response	e (if Necessary)					
11. Minimum Investmer	nt					
Minimum investment acc	epted from any o	outside inves	tor\$ 1,000,000 US	SD		
12. Sales Compensatio	n					
Recipient			Recipient CRD N	lumber □ None		
(Associated) Broker or D	ealer		(Associated) Bro Number	ker or Dealer CRD	□None	
Street Address 1			Street Address 2			
City			State/Province/C	ountry		ZIP/Postal Code
State(s) of Solicitation (s apply) Check "All States" or che States		□ All □ States	□ Foreign/non-U	S		
13. Offering and Sales	Amounts					
Total Offering Amount	\$ 100,000,000		ndefinite			
Total Amount Sold	\$ 0	USD				
Total Remaining to be So	old\$ 100,000,000	J USD or □ Ir	ndefinite			
Clarification of Response	e (if Necessary)					
14. Investors						

	Select if securities in the offering have been or may be sold to persons who do not qualify as accredited investors,	
	Number of such non-accredited investors who already have invested in the offering	
	Regardless of whether securities in the offering have been or may be sold to persons who do not qualify as accredited investors, enter the total number of investors who already have invested in the offering:	0
15. 8	Sales Commissions & Finders' Fees Expenses	
	vide separately the amounts of sales commissions and finders' fees expenses, if any. If the amount of an expend of known, provide an estimate and check the box next to the amount.	iture
Sale	s Commissions \$ 7,000,000 USD 🗷 Estimate	
Find	ers' Fees \$ 240,000 USD 🗷 Estimate	
Clar	ification of Response (if Necessary)	
16. L	Jse of Proceeds	
the p	vide the amount of the gross proceeds of the offering that has been or is proposed to be used for payments to an persons required to be named as executive officers, directors or promoters in response to Item 3 above. If the anaknown, provide an estimate and check the box next to the amount.	
\$ 0	USD 🗷 Estimate	
Clari	ification of Response (if Necessary)	
Sign	nature and Submission	
Ple	ease verify the information you have entered and review the Terms of Submission below before signing a cking SUBMIT below to file this notice.	nd

In submitting this notice, each Issuer named above is:

Terms of Submission

- Notifying the SEC and/or each State in which this notice is filed of the offering of securities described and undertaking to furnish them, upon written request, the information furnished to offerees.
- Irrevocably appointing each of the Secretary of the SEC and, the Securities Administrator or other legally designated officer of the State in which the Issuer maintains its principal place of business and any State in which this notice is filed, as its agents for service of process, and agreeing that these persons may accept service on its behalf, of any notice, process or pleading, and further agreeing that such service may be made by registered or certified mail, in any Federal or state action, administrative proceeding, or arbitration brought against it in any place subject to the jurisdiction of the United States, if the action, proceeding or arbitration (a) arises out of any activity in connection with the offering of securities that is the subject of this notice, and (b) is founded, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these statutes, or (ii) the laws of the State in which the issuer maintains its principal place of business or any State in which this notice is filed.
- Certifying that the Issuer is not disqualified from relying on any Regulation D exemption it has identified in Item 6 above for one of the reasons stated in Rule 505(b)(2)(iii).

Each Issuer identified above has read this notice, knows the contents to be true, and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

For signature, type in the signer's name or other letters or characters adopted or authorized as the signer's signature.

Issuer	Signature	Name of Signer	Title	Date
Clear Health Pass Holdings LLC	William Hill	William Hill	CFO/Director	2021-09-28

Persons who respond to the collection of information contained in this form are not required to respond

unless the form displays a currently valid OMB number.

* This undertaking does not affect any limits Section 102(a) of the National Securities Markets Improvement Act of 1996 ("NSMIA") [Pub. L. No. 104-290, 110 Stat. 3416 (Oct. 11, 1996)] imposes on the ability of States to require information. As a result, if the securities that are the subject of this Form D are "covered securities" for purposes of NSMIA, whether in all instances or due to the nature of the offering that is the subject of this Form D, States cannot routinely require offering materials under this undertaking or otherwise and can require offering materials only to the extent NSMIA permits them to do so under NSMIA's preservation of their anti-fraud authority.