The Securities and Exchange Commission has not necessarily reviewed the information in this filing and has not determined if it is accurate and complete.

The reader should not assume that the information is accurate and complete.

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				OMB APPROVAL
UNITED STATES SECURITIES AND EXCHANO Washington, D.C. 20549			GE COMMISSION	OMB 3235-
	Number: 0076			
		ORM D		Estimated average burden
	Notice of Exemp	ot Offering of Secu	rities	hours per
				response: 4.00
1. Issuer's Identity				
CIK (Filer ID Nur	nber) Previous Names	X None		Entity Type
<u>0001554859</u>			X Corporation	1
Name of Issue	r		Limited Par	rtnership
Semler Scientific, Inc.			Limited Lia	bility Company
Jurisdiction o			General Par	rtnership
Incorporation/Organ	nization		Business Tr	rust
DELAWARE Year of Incorpora	tion/Organization		Other (Spec	rify)
-	uvii/Orgailizauvii			
Over Five Years Ago X Within Last Five Years (S	Specify Verr) 2012			
Yet to Be Formed	specify real) 2015			
Tet to De Formed				
2. Principal Place of Busines	s and Contact Information			
Name	of Issuer			
Semler Scientific, Inc.				
Street A	Address 1		Street Address 2	
2330 N.W. EVERETT STRE	EET			
City	State/Province/Countr	0		ber of Issuer
PORTLAND	OREGON	97210	408-627-4557	
3. Related Persons				
Last Name	Fi	rst Name	Middle Nar	ne
Murphy-Chutorian, M.D.	Douglas			
Street Address 1	-	t Address 2		
2330 NW Everett St.				
City	State/Pro	ovince/Country	ZIP/PostalC	ode
Portland	OREGON		97210	
Relationship: X Executive	Officer X Director Promo	oter		
Clarification of Response (if	Necessary):			
Last Name		rst Name	Middle Nar	ne
Semler, M.D.	Herbert		J.	
Street Address 1		t Address 2		
2330 NW Everett St.	Site			
City	State/Pro	ovince/Country	ZIP/PostalC	ode
Portland	OREGON	0	97210	

Relationship: Executive Officer X Director Promoter

Clarification of Response (if Necessary):

Last Name	First Name	Middle Name
Walker	James Streat Address 3	
Street Address 1 2330 NW Everett St.	Street Address 2	
City	State/Province/Country	ZIP/PostalCode
Portland	OREGON	97210
Relationship: X Executive Officer	Director Promoter	
Clarification of Response (if Necessa	ry):	
Last Name	First Name	Middle Name
Semler	Shirley	
Street Address 1	Street Address 2	
2330 NW Everett St.		
City Portland	State/Province/Country OREGON	ZIP/PostalCode 97210
Relationship: X Executive Officer 2		97210
Relationship. A Executive officer 2		
Clarification of Response (if Necessa	ry):	
Last Name	First Name	Middle Name
Garfield	Greg	S.
Street Address 1	Street Address 2	
2330 NW Everett St.		
CityState/Province/CountryPortlandOREGON		ZIP/PostalCode 97210
Relationship: Executive Officer X		97210
Relationship. Executive Officer A	Director Fromoter	
Clarification of Response (if Necessa	ry):	
Last Name	First Name	Middle Name
Pan, M.D., Ph.D.	Wayne	Т.
Street Address 1	Street Address 2	
2330 NW Everett St.	State/Ducrince/Country	ZIP/PostalCode
City Portland	State/Province/Country OREGON	97210
Relationship: Executive Officer X Director Promoter		5/210
Clarification of Response (if Necessa	ry):	
Last Name	First Name	Middle Name
Barclay	Bruce	J
Street Address 1	Street Address 2	
2330 NW Everett St.		
City Portland	State/Province/Country OREGON	ZIP/PostalCode 97210
Relationship: Executive Officer X		<i></i>
-		
Clarification of Response (if Necessa	ry):	
Last Name	First Name	Middle Name
Leibowitz, M.D., F.A.A.P.	Arthur	N.
Street Address 1	Street Address 2	
2330 NW Everett St.	State/Ducyings/Country	7ID/DestalCode
City Portland	State/Province/Country OREGON	ZIP/PostalCode 97210
	OKLOUN	5/210

Relationship: Executive Officer X Director Promoter

Clarification of Response (if Necessary):

L	ast Name	First Name		Middle Name
Collins		Aidan	М.	
Stre	et Address 1	Street Address 2		
2330 NW Ever	ett St.			
	City	State/Province/Country	y	ZIP/PostalCode
Portland		OREGON	97210	
Relationship:	Executive Officer	X Director Promoter		

Clarification of Response (if Necessary):

4. Industry Group

Agriculture Banking & Financial Services Commercial Banking Insurance Investing Investment Banking Decled Investment Fund	Health Care Biotechnology Health Insurance Hospitals & Physicians Pharmaceuticals	Retailing Restaurants Technology Computers Telecommunications
Pooled Investment Fund Is the issuer registered as an investment company under the Investment Company Act of 1940? Yes No Other Banking & Financial Set	X Other Health Care Manufacturing Real Estate Commercial Construction REITS & Finance	Other Technology Travel Airlines & Airports Lodging & Conventions Tourism & Travel Services Other Travel
Business Services Energy Coal Mining Electric Utilities Energy Conservation Environmental Services	Residential Other Real Estate	Other Travel

Oil & Gas

Other Energy

5. Issuer Size

Revenue Range	OR	Aggregate Net Asset Value Range
No Revenues		No Aggregate Net Asset Value
\$1 - \$1,000,000		\$1 - \$5,000,000
\$1,000,001 - \$5,000,000		\$5,000,001 - \$25,000,000
\$5,000,001 - \$25,000,000		\$25,000,001 - \$50,000,000
\$25,000,001 - \$100,000,000		\$50,000,001 - \$100,000,000
Over \$100,000,000		Over \$100,000,000
X Decline to Disclose		Decline to Disclose
Not Applicable		Not Applicable

6. Federal Exemption(s) and Exclusion(s) Claimed (select all that apply)

Rule 504(b)(1) (not (i), (ii) or (iii))

Investment Company Act Section 3(c)

Rule 504 (b)(1)(i)	Section 3(c)(1	.) Section 3(c)(9)
Rule 504 (b)(1)(ii)	Section 3(c)(2	2) Section 3(c)(10)
Rule 504 (b)(1)(iii) Rule 505	Section 3(c)(3	3) Section 3(c)(11)
X Rule 506(b)	Section 3(c)(4	Section 3(c)(12)
Rule 506(c)	Section 3(c)(5	5) Section 3(c)(13)
Securities Act Section 4(a)(5)	Section 3(c)(6	5) Section 3(c)(14)
	Section 3(c)(7))
7. Type of Filing		
X New Notice Date of First Sale 2015-02-24 Amendment	First Sale Yet to O	lecur
8. Duration of Offering		
Does the Issuer intend this offering to last more th	nan one year? Y	zes X No
9. Type(s) of Securities Offered (select all that app	oly)	
X Equity		Pooled Investment Fund Interests
Debt		Tenant-in-Common Securities
Option, Warrant or Other Right to Acquire And Security to be Acquired Upon Exercise of Option	0	Mineral Property Securities
Other Right to Acquire Security	,	Other (describe)
10. Business Combination Transaction		
Is this offering being made in connection with a b a merger, acquisition or exchange offer?	usiness combinati	on transaction, such as Yes X No
Clarification of Response (if Necessary):		
11. Minimum Investment		
Minimum investment accepted from any outside i	nvestor \$0 USD	
12. Sales Compensation		
Recipient	Recipie	nt CRD Number X None
(Associated) Broker or Dealer X None	(Associ	ated) Broker or Dealer CRD Number X None
Street Address 1	Charles /D.	Street Address 2
City State(s) of Solicitation (select all that apply)		ovince/Country ZIP/Postal Code
Check "All States" or check individual States	All States Foreig	gn/non-US
13. Offering and Sales Amounts		
Total Offering Amount \$8,000,000 USD or	Indefinite	
Total Amount Sold\$498,600 USD		
Total Remaining to be Sold \$7,501,400 USD or	Indefinite	
Clarification of Response (if Necessary):		
14. Investors		
Select if securities in the offering have been or		rsons who do not qualify as accredited

investors, and enter the 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:

1

15. Sales Commissions & Finder's Fees Expenses

Provide separately the amounts of sales commissions and finders fees expenses, if any. If the amount of an expenditure is not known, provide an estimate and check the box next to the amount.

Sales Commissions	\$0 USD	Estimate
Finders' Fees	\$0 USD	Estimate

Clarification of Response (if Necessary):

16. Use of Proceeds

Provide the amount of the gross proceeds of the offering that has been or is proposed to be used for payments to any of the persons required to be named as executive officers, directors or promoters in response to Item 3 above. If the amount is unknown, provide an estimate and check the box next to the amount.

\$0 USD Estimate

Clarification of Response (if Necessary):

Signature and Submission

Please verify the information you have entered and review the Terms of Submission below before signing and clicking SUBMIT below to file this notice.

Terms of Submission

In submitting this notice, each issuer named above is:

- 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, in the accordance with applicable law, 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 the issuer 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, if the issuer is claiming a Regulation D exemption for the offering, the issuer is not disqualified from relying on Regulation D for one of the reasons stated in Rule 505(b)(2)(iii) or Rule 506(d).

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
Semler Scientific, Inc.	/s/ Daniel Conger	Daniel E. Conger	Vice President, Finance	2015-03-10

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.