



OFFICE OF THE ATTORNEY GENERAL

TELEMARKETING COMPANY REGISTRATION STATEMENT

1. LEGAL NAME OF TELEMARKETING COMPANY (hereinafter "Applicant")

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2. PRINCIPAL BUSINESS LOCATION

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3. PRINCIPAL BUSINESS LOCATION IN THIS STATE

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4. PRINCIPAL BUSINESS TELEPHONE NUMBER

() _____

5. PRINCIPAL BUSINESS FAX NUMBER

() _____

6. IF APPLICANT WILL DO BUSINESS UNDER A FICTITIOUS NAME--IDENTIFY WHERE SUCH NAME(S) ARE REGISTERED AND ATTACH A COPY OF ALL REGISTRATION DOCUMENTS.

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TELEMARKETING COMPANY REGISTRATION STATEMENT

9. DOES APPLICANT HAVE ONE OR MORE PARENT ENTITIES THAT WILL EITHER ENGAGE IN A BUSINESS TRANSACTION WITH A PURCHASER RELATING TO ANY SALE SOLICITED BY APPLICANT OR ACCEPT RESPONSIBILITY FOR ANY STATEMENT OR ACT OF APPLICANT RELATING TO ANY SALE SOLICITED BY APPLICANT?

10. IF THE ANSWER TO QUESTION 9 IS YES, PLEASE PROVIDE THE FOLLOWING INFORMATION FOR EACH SUCH PARENT ENTITY, AND ATTACH HERETO THE INFORMATION REQUIRED BY SUBSECTIONS A, B, C, OR D OF QUESTION 8, AS APPLICABLE, FOR EACH SUCH PARENT ENTITY:

A. Name of Parent Entity:

Parent Entity Address and Phone Number:

Type of Entity: _____

State Organized in: _____

B. Name of Parent Entity:

Parent Entity Address and Phone Number:

Type of Entity: _____

State Organized in: _____

11. DOES APPLICANT HAVE ONE OR MORE AFFILIATES THAT WILL EITHER ENGAGE IN A BUSINESS TRANSACTION WITH A PURCHASER RELATING TO ANY SALE SOLICITED BY APPLICANT OR ACCEPT RESPONSIBILITY FOR ANY STATEMENT OR ACT OF APPLICANT RELATING TO ANY SALE SOLICITED BY APPLICANT?

12. IF THE ANSWER TO QUESTION 11 IS YES, PLEASE PROVIDE THE FOLLOWING INFORMATION FOR EACH SUCH AFFILIATE AND ATTACH HERETO THE INFORMATION REQUIRED BY SUBSECTIONS A, B, C OR D OF QUESTION 8, AS APPLICABLE, FOR EACH SUCH AFFILIATE:

A. Name of Affiliate:

Affiliate's Address and Phone Number:

Type of Entity: _____

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State Organized in: _____

B. Name of Affiliate:

Affiliate's Address and Phone Number:

Type of Entity: _____

State Organized in: _____

13. THE TELEPHONE NUMBER(S) APPLICANT WILL BE USING TO SOLICIT BUSINESS FROM THE LOCATION SET FORTH IN QUESTION 2 ARE:

_____ - _____ - _____	_____ - _____ - _____
_____ - _____ - _____	_____ - _____ - _____
_____ - _____ - _____	_____ - _____ - _____
_____ - _____ - _____	_____ - _____ - _____
_____ - _____ - _____	_____ - _____ - _____
_____ - _____ - _____	_____ - _____ - _____
_____ - _____ - _____	_____ - _____ - _____

14. APPLICANT'S OTHER BUSINESS LOCATION(S):

A. APPLICANT WILL ALSO BE SOLICITING BUSINESS FROM THE FOLLOWING LOCATION(S):

(i) _____

(ii) _____

(iii) _____

(iv) _____

B. DESIGNATING IN THE PARENTHESIS SET FORTH BELOW WHERE EACH IS LOCATED, THE TELEPHONE NUMBER(S) APPLICANT WILL BE USING TO SOLICIT BUSINESS FROM EACH OF THE LOCATION(S) SET FORTH IN QUESTION 14(A) ARE:

_____ - _____ - _____ (____)	_____ - _____ - _____ (____)
_____ - _____ - _____ (____)	_____ - _____ - _____ (____)
_____ - _____ - _____ (____)	_____ - _____ - _____ (____)
_____ - _____ - _____ (____)	_____ - _____ - _____ (____)
_____ - _____ - _____ (____)	_____ - _____ - _____ (____)

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15. THE FOLLOWING INFORMATION IS PROVIDED PURSUANT TO KRS 367.46973 FOR EACH OF APPLICANTS OFFICERS, DIRECTORS, TRUSTEES, GENERAL OR LIMITED PARTNERS, SOLE PROPRIETORS, AND PERSONS HAVING MANAGEMENT RESPONSIBILITIES IN THE APPLICANTS'S BUSINESS ACTIVITIES, AS APPLICABLE:

A. NAME

DATE OF BIRTH: _____

OFFICE HELD: _____

OWNERSHIP INTEREST: YES { } NO { }

APPLICANT'S BUSINESS LOCATION(S) RESPONSIBLE FOR AND DUTIES:

COMPLETE ADDRESS OF RESIDENCE:

DRIVERS LICENSE #: _____ STATE OF ISSUANCE:

B. NAME: _____

DATE OF BIRTH: _____

OFFICE HELD: _____

OWNERSHIP INTEREST: YES { } NO { }

APPLICANT'S BUSINESS LOCATION(S) RESPONSIBLE FOR AND DUTIES:

TELEMARKETING COMPANY REGISTRATION STATEMENT

OWNERSHIP INTEREST: YES { } NO { }

APPLICANT'S BUSINESS LOCATION(S) RESPONSIBLE FOR AND DUTIES:

COMPLETE ADDRESS OF RESIDENCE:

DRIVERS LICENSE #: _____ STATE OF ISSUANCE: _____

16. THE FOLLOWING INFORMATION IS PROVIDED FOR EACH INDIVIDUAL NOT LISTED IN THE ANSWER TO QUESTION 15 WHO IS RESPONSIBLE FOR THE MANAGEMENT OF APPLICANT'S BUSINESS AT ANY OF ITS LOCATIONS:

A. NAME:

DATE OF BIRTH: _____

OFFICE HELD: _____

OWNERSHIP INTEREST: YES { } NO { }

APPLICANT'S BUSINESS LOCATION(S) RESPONSIBLE FOR AND DUTIES:

COMPLETE ADDRESS OF RESIDENCE:

TELEMARKETING COMPANY REGISTRATION STATEMENT

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DRIVERS LICENSE #: _____ STATE OF ISSUANCE: _____

B. NAME: _____

DATE OF BIRTH: _____

OFFICE HELD: _____

OWNERSHIP INTEREST: YES { } NO { }

APPLICANT'S BUSINESS LOCATION(S) RESPONSIBLE FOR AND DUTIES:

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COMPLETE ADDRESS OF RESIDENCE:

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DRIVERS LICENSE #: _____ STATE OF ISSUANCE: _____

C. NAME: _____

DATE OF BIRTH: _____

OFFICE HELD: _____

OWNERSHIP INTEREST: YES { } NO { }

APPLICANT'S BUSINESS LOCATION(S) RESPONSIBLE FOR AND DUTIES:

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TELEMARKETING COMPANY REGISTRATION STATEMENT

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COMPLETE ADDRESS OF RESIDENCE:

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DRIVERS LICENSE #: _____ STATE OF ISSUANCE: _____

D. NAME:

DATE OF BIRTH: _____
OFFICE HELD: _____
OWNERSHIP INTEREST: YES { } NO { }
APPLICANT'S BUSINESS LOCATION(S) RESPONSIBLE FOR AND DUTIES:

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COMPLETE ADDRESS OF RESIDENCE:

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DRIVERS LICENSE #: _____ STATE OF ISSUANCE: _____

17. THE FOLLOWING INFORMATION IS PROVIDED FOR EACH PERSON LISTED IN THE ANSWER TO QUESTIONS 15 OR 16 WHO:

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- A. HAS BEEN CONVICTED OF A FELONY OR A MISDEMEANOR INVOLVING A VIOLATION OF THIS STATUTE, OR FRAUD, THEFT, EMBEZZLEMENT, FRAUDULENT CONVERSION, OR MISAPPROPRIATION OF PROPERTY, OR
- B. HAS HAD ENTERED AGAINST HIM A FINAL JUDGMENT OR ORDER IN A CIVIL OR ADMINISTRATIVE ACTION, INCLUDING A STIPULATED JUDGMENT OR ORDER, IF THE COMPLAINT OR PETITION IN THE CIVIL OR ADMINISTRATIVE ACTION ALLEGED ACTS CONSTITUTING A VIOLATION OF ANY TELEPHONE SOLICITATION STATUTE, FRAUD, THEFT, EMBEZZLEMENT, FRAUDULENT CONVERSION, OR MISAPPROPRIATION OF PROPERTY, THE USE OF UNTRUE OR MISLEADING REPRESENTATIONS IN AN ATTEMPT TO SELL OR DISPOSE OF REAL OR PERSONAL PROPERTY, OR THE USE OF UNFAIR, UNLAWFUL, OR DECEPTIVE BUSINESS PRACTICES, OR
- C. IS SUBJECT TO AN INJUNCTION OR RESTRICTIVE COURT ORDER RELATING TO BUSINESS ACTIVITY AS THE RESULT OF AN ACTION BROUGHT BY A FEDERAL, STATE, OR LOCAL PUBLIC AGENCY OR UNIT OF THAT AGENCY, INCLUDING, AN ACTION AFFECTING ANY VOCATIONAL LICENSE.

(i) NAME AND

TITLE: _____

COURT OR ADMINISTRATIVE AGENCY RENDERING CONVICTION, JUDGMENT OR ORDER:

DOCKET AND CASE NUMBER: _____

DATE OF CONVICTION, JUDGMENT OR ORDER: _____

NAME OF GOVERNMENTAL AGENCY WHICH BROUGHT THE ACTION:

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(ii) NAME AND TITLE: _____

COURT OR ADMINISTRATIVE AGENCY RENDERING CONVICTION, JUDGMENT OR ORDER:

DOCKET AND CASE NUMBER: _____

DATE OF CONVICTION, JUDGMENT OR ORDER: _____

NAME OF GOVERNMENTAL AGENCY WHICH BROUGHT THE ACTION:

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18. THE FOLLOWING INFORMATION IS PROVIDED FOR EACH PERSON LISTED IN THE ANSWER TO QUESTIONS 15 OR 16 WHO HAS:

- A. AT ANY TIME DURING THE PREVIOUS SEVEN YEARS FILED IN BANKRUPTCY, BEEN ADJUDGED BANKRUPT, OR BEEN REORGANIZED BECAUSE OF INSOLVENCY; OR
- B. BEEN A PRINCIPAL, DIRECTOR, OFFICER, TRUSTEE, GENERAL OR LIMITED PARTNER, OR HAD MANAGEMENT RESPONSIBILITIES OF ANY OTHER CORPORATION, PARTNERSHIP, JOINT VENTURE, OR BUSINESS ENTITY THAT HAS SO FILED OR WAS SO ADJUDICATED OR REORGANIZED, DURING OR WITHIN ONE YEAR AFTER THE PERSON HELD THAT POSITION

(i) NAME & TITLE: _____

NAME OF DEBTOR: _____

IF DEBTOR IS NOT A NATURAL PERSON, THE PERSON'S TITLE AND DUTIES WITH DEBTOR:

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DATE BANKRUPTCY FILED: _____
COURT WHERE CASE WAS FILED _____
DOCKET AND CASE NUMBER: _____
BANKRUPTCY CHAPTER OF CASE: _____
NAME OF GOVERNMENTAL AGENCY WHICH BROUGHT THE ACTION:

-

(ii) NAME & TITLE: _____
NAME OF DEBTOR: _____
IF DEBTOR IS NOT A NATURAL PERSON, THE PERSON'S TITLE AND DUTIES WITH DEBTOR:

-

DATE BANKRUPTCY FILED: _____
COURT WHERE CASE WAS FILED _____
DOCKET AND CASE NUMBER: _____
BANKRUPTCY CHAPTER OF CASE: _____
NAME OF GOVERNMENTAL AGENCY WHICH BROUGHT THE ACTION:

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19. SALESMEN TO BE EMPLOYED BY APPLICANT AT EACH OF ITS BUSINESS LOCATIONS SET FORTH IN THE ANSWER TO QUESTION 14--ADD ADDITIONAL PAGES IN SAME FORMAT IF NECESSARY.

A. BUSINESS LOCATION: _____

(i) FULL NAME: _____
ADDRESS: _____

DRIVERS LICENSE #: _____ STATE OF ISSUANCE: _____
TELEPHONE NUMBER: _____
ASSUMED NAMES: _____

(ii) FULL NAME: _____
ADDRESS: _____

TELEMARKETING COMPANY REGISTRATION STATEMENT

DRIVERS LICENSE #: _____ STATE OF ISSUANCE: _____

TELEPHONE NUMBER: _____

ASSUMED NAMES: _____

(iii) FULL NAME: _____

ADDRESS: _____

DRIVERS LICENSE #: _____ STATE OF ISSUANCE: _____

TELEPHONE NUMBER: _____

ASSUMED NAMES: _____

(iv) FULL NAME: _____

ADDRESS: _____

DRIVERS LICENSE #: _____ STATE OF ISSUANCE: _____

TELEPHONE NUMBER: _____

ASSUMED NAMES: _____

B. BUSINESS LOCATION: _____

(i) FULL NAME: _____

ADDRESS: _____

DRIVERS LICENSE #: _____ STATE OF ISSUANCE: _____

TELEPHONE NUMBER: _____

ASSUMED NAMES: _____

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(ii) FULL NAME: _____
ADDRESS: _____

DRIVERS LICENSE #: _____ **STATE OF ISSUANCE:** _____
TELEPHONE NUMBER: _____
ASSUMED NAMES: _____

(iii) FULL NAME: _____
ADDRESS: _____

DRIVERS LICENSE #: _____ **STATE OF ISSUANCE:** _____
TELEPHONE NUMBER: _____
ASSUMED NAMES: _____

(iv) FULL NAME: _____
ADDRESS: _____

DRIVERS LICENSE #: _____ **STATE OF ISSUANCE:** _____
TELEPHONE NUMBER: _____
ASSUMED NAMES: _____

20. WILL THE APPLICANT REPRESENT OR IMPLY, OR DIRECT SALESPERSONS TO REPRESENT OR IMPLY, TO PURCHASERS THAT THE PURCHASER WILL RECEIVE CERTAIN SPECIFIC ITEMS, INCLUDING A CERTIFICATE OF ANY TYPE WHICH THE PURCHASER MUST REDEEM TO OBTAIN THE ITEM DESCRIBED IN THE CERTIFICATE, OR ONE OR MORE ITEMS AMONG DESIGNATED ITEMS, WHETHER THE ITEMS ARE DENOMINATED AS GIFTS PREMIUMS, BONUSES, PRIZES, OTHERWISE?

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YES* _____ NO _____ *If YES, Answer the Following:

A. LIST OF ITEMS OFFERED:

- (i) _____ (v) _____
- (ii) _____ (vi) _____
- (iii) _____ (vii) _____

B. THE ACTUAL VALUE OR WORTH OF EACH ITEM DESCRIBED TO PROSPECTIVE PURCHASERS AND THE BASIS FOR THE VALUATION:

ACTUAL VALUE OF ITEM BASIS FOR VALUATION

- (i) \$ _____

- (ii) \$ _____

- (iii) \$ _____

- (iv) \$ _____

- (v) \$ _____

- (vi) \$ _____

C. THE PRICE PAID BY THE APPLICANT TO ITS SUPPLIER FOR EACH OF THESE ITEMS AND THE NAME, ADDRESS, AND TELEPHONE NUMBER OF EACH ITEM'S SUPPLIER--ADD ADDITIONAL PAGES IN SAME FORMAT IF NECESSARY.

PRICE PAID BY APPLICANT

- (i) \$ _____ (iii) \$ _____ (v) \$ _____
- (ii) \$ _____ (iv) \$ _____ (vi) \$ _____

NAME, ADDRESS AND TELEPHONE NUMBER OF SUPLIER

- (i) NAME: _____
ADDRESS: _____

TELEPHONE NUMBER: _____

- (ii) NAME: _____
ADDRESS: _____

TELEMARKETING COMPANY REGISTRATION STATEMENT

TELEPHONE NUMBER: _____

(iii) NAME: _____

ADDRESS: _____

TELEPHONE NUMBER: _____

(iv) NAME: _____

ADDRESS: _____

TELEPHONE NUMBER: _____

(v) NAME: _____

ADDRESS: _____

TELEPHONE NUMBER: _____

(vi) NAME: _____

ADDRESS: _____

TELEPHONE NUMBER: _____

21. WILL THE PURCHASER RECEIVE FEWER THAN ALL OF THE ITEMS DESCRIBED BY THE APPLICANT?

YES* _____

NO _____

***If YES** Answer the Following:

A. THE MANNER IN WHICH THE MERCHANT DECIDES WHICH ITEM EACH PROSPECTIVE PURCHASER IS TO RECEIVE:

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B. THE ODDS A SINGLE PROSPECTIVE PURCHASER HAS OF RECEIVING EACH DESCRIBED ITEM:

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C. THE NAME AND ADDRESS OF EACH RECIPIENT WHO HAS, DURING THE PRECEDING 12 MONTHS, OR IF THE APPLICANT HAS NOT BEEN IN BUSINESS THAT LONG, DURING THE PERIOD THE APPLICANT HAS BEEN IN BUSINESS, RECEIVED THE ITEM HAVING THE GREATEST VALUE AND THE ITEM WITH THE SMALLEST ODDS OF BEING RECEIVED:

RECIPIENT OF ITEM HAVING THE GREATEST VALUE:

NAME:

ADDRESS:

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RECIPIENT OF ITEM HAVING THE SMALLEST ODDS OF BEING RECEIVED:

NAME:

ADDRESS:

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D. ALL RULES, REGULATIONS, TERMS AND CONDITIONS A PROSPECTIVE PURCHASER MUST MEET IN ORDER TO RECEIVE THEM:

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22. WILL THE APPLICANT BE OFFERING AN INVESTMENT, BUSINESS OR EMPLOYMENT OPPORTUNITY?

YES* _____

NO _____

***If YES** Answer the Following:

A. THE NUMBER OF CONSUMERS OR INVESTORS WHO HAVE PARTICIPATED TO DATE:

-

B. THE ACTUAL EXPERIENCE OF THE CONSUMERS OR INVESTORS AS MEASURED BY STANDARDS USED IN THE SALES PRESENTATIONS:

-

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- _____
- _____
- _____

23. WILL APPLICANT PROVIDE A SALES SCRIPT DOCUMENT SALESPERSONS ARE REQUIRED TO FOLLOW?

YES* _____

NO _____

***If YES PROVIDE A COPY**

I, _____, CERTIFY THAT I AM _____
(TITLE)

OF THE TELEPHONE SOLICITATION MERCHANT, _____
(NAME OF TELEPHONE SOLICITATION MERCHANT)

LOCATED AT _____, AND THAT THE
STATEMENTS IN THE ABOVE REGISTRATION ARE TRUE.

SIGNATURE

SUBSCRIBED AND SWORN TO BEFORE ME THIS _____ DAY OF _____, 20_____

NOTARY PUBLIC

MY COMMISSION EXPIRES _____

TELEMARKETING COMPANY REGISTRATION STATEMENT

ATTACHMENTS

- A. A COPY OF ALL SCRIPTS, OUTLINES, OR PRESENTATIONS APPLICANT WILL REQUIRE ANY OF ITS SALES PERSONNEL TO USE WHEN SOLICITING BUSINESS
- B. A COPY OF ALL OTHER SALES INFORMATION OR LITERATURE APPLICANT HAS PROVIDED, OR INTENDS TO PROVIDE, TO ITS SALES PERSONNEL.
- C. A COPY OF ALL SALES INFORMATION OR LITERATURE APPLICANT DOES, OR INTENDS TO, PROVIDE TO ANY PROSPECTIVE OR ACTUAL PURCHASER
- D. SURETY BOND
- E. REGISTRATION FEE
- F. FICTITIOUS NAME REGISTRATION, IF APPLICABLE
- G. PREMIUM BOND, IF APPLICABLE
- H. COPY OF APPLICABLE MATERIALS REQUESTED BY QUESTION #8
- I. CONSENT FOR SERVICE

MAIL THIS REGISTRATION STATEMENT TO:

**OFFICE OF THE ATTORNEY GENERAL
CONSUMER PROTECTION DIVISION
TELEPHONE SOLICITATION
1024 CAPITAL CENTER DRIVE, SUITE 200
FRANKFORT, KY 40601**

TELEMARKETING COMPANY REGISTRATION STATEMENT

THE OFFICE OF THE ATTORNEY GENERAL DOES NOT DISCRIMINATE ON THE BASIS OF RACE, COLOR, NATIONAL ORIGIN, SEX, RELIGION, AGE OR DISABILITY IN EMPLOYMENT OR THE PROVISION OF SERVICES AND PROVIDES, UPON REQUEST, REASONABLE ACCOMMODATION INCLUDING AUXILIARY AIDS AND SERVICES NECESSARY TO AFFORD INDIVIDUALS WITH DISABILITIES AN EQUAL OPPORTUNITY TO PARTICIPATE IN ALL PROGRAMS AND ACTIVITIES.