



Johnson County
Office of the District Attorney
Consumer Protection Division
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Office Use Only

Agent:

File No:

NO CALL CONSUMER COMPLAINT FORM

Stephen M. Howe
District Attorney

INFORMATION ABOUT THE CONSUMER (SIGNATURE ON BACK REQUIRED)

Name: Mr. Ms.	Date of Birth:	
Address:	Apt. #:	
City, State, Zip:		
Daytime Phone #: Home Phone #:		
I am a: (Circle One)	Individual Sole Proprietor	Corporation Partnership

TELEMARKETER INFORMATION

Telemarketer Rep: Legal Name of Company DBA:
Address:
City, State, Zip:
Phone #:
Sales Person: Contact Person:

INFORMATION ABOUT THE PHONE CALL

Date of Call:	Time of Call:	A.M.	P.M.
1. Was telemarketer calling to solicit contributions on behalf of charity? Yes ___ No ___ N/A ___			
2. Was telemarketer calling on behalf of political candidate/organization/party? Yes ___ No ___			
3. Was the telemarketer calling to conduct a poll? Yes ___ No ___			
4. Did the telemarketer call you in response to your express request? Yes ___ No ___ N/A ___			

5. Have you made any application, purchase or transaction with this company within the past 36 months? Yes ___ No ___
If Yes,

(a) What and When? _____

(b) have you objected to the company calling you? Yes ___ No ___

(c) have you requested that the company cease making calls to you? Yes ___ No ___ N/A ___

(d) has the relationship been terminated by either party? Yes ___ No ___ N/A ___

6. Was the telemarketer calling to sell you a product or services, to extend credit to you, or to set up a meeting to sell you a product or services or to extend credit to you? Yes ___ No ___ N/A ___

If yes, what? _____

7. Did the telemarketer:

(a) identify himself/herself? Yes ___ No ___ N/A ___

(b) identify who he/she represented? Yes ___ No ___ N/A ___

(c) immediately explain the purpose of the call? Yes ___ No ___ N/A ___

(d) promptly end the call if you advised you were not interested? Yes ___ No ___ N/A ___

8. Did you tell the telemarketer that your phone number is registered on the Kansas No-Call list?

Yes ___ No ___ N/A ___

If yes, telemarketer response: _____

9. Was the telemarketer message a recorded one? Yes ___ No ___ N/A ___

10. Did the telemarketer use threatening, intimidating, or profane language? Yes ___ No ___ N/A ___

11. If this company has called you in the past, did you at that time advise them not to call again? Yes ___ No ___

12. Would you be willing to testify in court regarding this complaint? Yes ___ No ___ N/A ___

VERIFICATION

In filing the complaint, I understand and agree that the employees of the District Attorney's Office are not my private attorneys, but instead represent Johnson County in enforcing laws designed to protect the public from deceptive and unconscionable business acts and practices. I understand that Kansas Law limits the period of time during which I may file any private legal actions(s), and I have been advised to contact a private attorney if I have any questions concerning those time limitations and my legal rights with regard to any private actions(s). I further understand and agree that the contents of this complaint may be forwarded to the business or person the complaint is directed against or to other appropriate agencies. Finally, I verify that the information contained in the above complaint is true and accurate to the best of my knowledge.

Your Signature (Required)

Date

PLEASE COMPLETE BOTH PAGES - INCOMPLETE FORMS MAY BE RETURNED

Complaint form page 2 of 2

