

OREGON DEPARTMENT OF JUSTICE Telephonic Seller Registration Form

GENERAL INSTRUCTIONS

* Submit this Registration Form and the \$400.00 registration fee to: Oregon Department of Justice Financial Fraud/Consumer Protection Section Telemarketing

1162 Court Street NE Salem, OR 97301

* This registration is effective for one year from the date of registration. If there are any changes to the information you supplied prior to the registration expiration date, you must submit an addendum to ODOJ. The addendum must be submitted within 10 days of the change. The addendum must include all material changes; it may be through a letter to ODOJ.

For changes in sales staff, submit an addendum on a quarterly basis, computed from the effective date of registration. The quarterly sales staff updates should include information for all sales staff (both employees and independent contractors) who solicited on your behalf during the previous reporting quarter. Include all sales staff who were employed during the reporting quarter whether or not they are still employed at the time of filing, per OAR 137-20-0201(4). Individual sales staff are not required to file a registration form; the form you file will cover all sales staff soliciting on your behalf.

*This registration form must be submitted and accepted within 10 days before you start doing business in Oregon per ORS 646.553.

* Within 20 days of receipt of the registration form, ODOJ will do one of the following: register your company, request additional information from you, or deny your registration request. If your registration is accepted and you have more than one business location, a conformed copy of the registration and confirmation notice will be sent to each of the addresses you listed on the registration. WITHIN 10 DAYS OF RECEIPT, YOU MUST POST THE CONFIRMATION NOTICE IN A CONSPICUOUS PLACE AT EACH OF YOUR BUSINESS LOCATIONS. You must keep a copy of the entire registration form packet at each business location(s) listed. You must also post the name of the individual(s) in charge of each location in close proximity to where you post the confirmation notice, per OAR 137-020-0201(5).

* "You" in the Registration Form means "you, the telephonic seller" and where appropriate includes your sales staff and representatives, regardless of your business entity status.

*Parent entity" and "affiliate entity" mean that an entity that will engage in business transactions with consumers relating to sales solicited by you, or that the entity will accept responsibility for your acts, or for statements made by you which relate to sales solicited by you.

*"Purchaser" and "prosecpective purchaser" mean the consumer to whom you are selling.

* If you need more space to answer a question, attach a separate document and title it with the question number you are answering.

* If a question does not apply to you, please write "not applicable" or "n/a"

* If you have additional questions, please contact the Oregon Department of Justice at (503) 934-4400.

* References noted in the Registration Form are to Oregon Revised Statutes (ORS) 646.551 to 646.559 and Oregon Administrative Rules (OAR) 137-020-0200 to 137-020-0205, and Oregon Department of Justice (ODOJ)

		<u> </u>	FOR OFFICIAL USE ONLY				
1.	Date this registration form submitted to Oregon DOJ:						
2.	Date o	f any previous registration with	Oregon DOJ:				
3.		ing is made on behalf of: ame(s) that will be used when cont	acting the public)				
4.	List names of parent entity, affiliated entity, or other fictitious/"doing business as" or other names under which you do business.						
	Legal I	Name of your business, if differe	ent from above:				
5.	Please	e provide a brief description of w	/hat you sell:				
6.	 A) If your business, parent entity, or affiliated entity is a registered entity: (for example, a Corporation, LLC, Partnership, Limited Partnership) list the registered name of each entity and the State in which each entity is registered, and the date of registration. Attach a copy of each entity's organizational papers (for example: Articles of Incorporation, Articles or Organization, bylaws, etc.) B) If your business, parent organization, or affiliated organization is not a registered entity, but uses a fictitious "doing business as" name, list the name used, the individual who registered the name, and the State where and date of registered: 						
7.	List the complete street address of the principal location from which you will solicit sales:						
8.	List an	y other addresses from which y	ou will solicit sales:				
9.	List your mailing address(es) if different from the answer in question #7 or #8:						
	List all	List all your telephone numbers and the address where each telephone number is located					
		Phone Number	Addres				
10.							

Name:	Date of Birth:					
Office Held:	Ownership Interest:					
Driver's License #:	State of Issuance:					
Complete Address of his/her principal residence						
Name:	Date of Birth:					
Office Held:	Ownership Interest:					
Driver's License #:	State of Issuance:					
Complete Address of his/her principal residence	<u>.</u>					
Name:	Date of Birth:					
Office Held:	Ownership Interest:					
Driver's License #:	State of Issuance:					
Complete Address of his/her principal residence						
	j					
Name:	Date of Birth:					
Office Held:	Ownership Interest:					
Driver's License #:	State of Issuance:					
Complete Address of his/her principal residence:						
Name:	Date of Birth:					
Office Held:	Ownership Interest:					
	State of Issuance:					

If any individual or entity listed above has criminal or civil legal issues as listed below, provide the detailed information referenced below. Attach additional pages if needed.

Has been convicted of or plead "no contest" to a felony or misdemeanor involving fraud, theft, embezzlement, fraudulent conversion, or misappropriation of property; or

Is subject to 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 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, the Oregon Unlawful Trade Practices Act; or

Is subject to any currently effective injunction or restrictive court order relating to business activity as the result of an action brought by a federal, state, or local public agency, including, but not limited to, an action relating to a vocational license; or

Has, at any time during the previous seven tax years, filed for bankruptcy, been adjudged a bankrupt, been reorganized due to insolvency, or 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 filed bankruptcy, been adjudged a bankrupt, or reorganized during or within one year after the period that the person held that position.

	Name:	
	Court or Administrative Agency Rendering Decision, Judgment, or Order:	
	Docket #:	
12.	Date of Conviction, Judgment, or Order:	
	Name of Governmental Agency which brought the action:	
	Name:	
	Court or Administrative Agency Rendering Decision, Judgment or, Order:	
	Docket #:	
	Date of Conviction, Judgment, or Order:	
	Name of Governmental Agency which brought the action:	
	Name:	
	Court or Administrative Agency Rendering Decision, Judgment or, Order:	
	Docket #:	
	Date of Conviction, Judgment, or Order:	
	Name of Governmental Agency which brought the action:	

	 A) If you provide a script to individuals who solicit for you, insert the language for all Script(s) and Prompts for Sales Staff, under: Exhibit #1 - Scripts & Prompts for Sales Staff - 13(A) - Page 6; 	If you provide a script to individuals who solicit for you, insert the language for all Script(s) and/or Prompts for Sales Staff, under:					
13.		Or, if you do not provide a script(s) and/or prompts for Sales Staff soliciting for you					
	B)	certify so here:					
	0)	By checking this box, I certify that I do not provide a script(s) and/or prompts for Sales Staff soliciting for me.					
		If you provide written material(s) to prospective or actual customers, insert the language for that					
	A)	material, under:					
14.		Exhibit #2 - Written Materials for Customers - 14(A) - Page 7;					
1.4.	_ \	Or, if you do not provide any written material to prospective or actual customers, certify so here:					
	B)	By checking this box, I certify that I do not provide written material(s) to prospective or actual customers.					
	A)	If you use Sales Staff who solicit on your behalf, provide their names, pseudonyms or aliases and principal residence addresses, under:					
	7.)	Exhibit # 3 - Salesperson Information - 15(A) - Page 8;					
15.		Or, if you do not use Sales Staff who solicit on your behalf, certify so here:					
	B)						
		By checking this box, I certify that I do not use Sales Staff who solicit on my behalf.					
		If you or your Sales Staff indicate to your customers or prospective customers that they will: receive					
	A)	specific items in one shipment, receive portions of that item in different shipments, or receive a					
	,,,	certificate in which the buyer must use to redeem the the item described, complete: Exhibit # 4 - Shipment Notification - 16(A) - Page 10;					
		Or, if you and your Sales Staff do not indicate to your customers or prospective customers that					
16.		purchasers will: receive specific items in one shipment, receive portions of that item in different					
		shipments, or receive a certificate in which the buyer must use to redeem the item described, then certify so here:					
		By checking this box, I certify that I do not indicate to my customers or prospective					
		customers that purchasers will: receive specific items in one shipment, receive portions of that item in different shipments, or receive a certificate in which the purchaser must					
		use to redeem the item described.					
		If you sell, metals, coins, stones, and/or minerals, complete:					
	A) Exhibit #5 (Metal, Coin, Stone, Mineral Additional Information) - 17(A) - Page 12						
17.		Or, if you do not sell or offer to sell any metal, coins, stones, or minerals, then certify so here:					
	B)	By checking this box, I certify that I do not sell or offer to sell any metal, coins, stone or minerals.					
		If you sell or offer any interest in oil, gas, or mineral fields, wells, or exploration sites complete:					
	A)	Exhibit #6 (Oil, Gas, or Mineral Fields, Wells, or Explorations Sites Additional Information) - 18(A) -					
18.		Page 13					
10.		Or, if you do not sell an interest in Oil, Gas, or Mineral Fields, Wells, or exploration sites certify so here:					
	B)	By checking this box, I certify that I do not sell an interest in Oil, Gas, or Mineral Fields, Wells, or exploration sites.					

Exhibit #1: Scripts & Prompts for Sales Staff

If you provide script(s) and/or prompt(s) to Sales Staff who solicit for you, insert the language for those script(s) and/or prompt(s) in the space below (or attach to this application):

Exhibit #2: Written Material for Customers

If you provide written material(s) to prospective or actual customers, insert the language for that material in the space below (or attach to this application):

Exhibit #3: Salesperson Information						
If you use Sales Staff who solicit on your behalf, provide their names, pseudonyms or aliases and principle residence addresses, in the space below:						
Sales Staff Name	Sales Staff Residence	Sales Staff Pseudonym Alias	Date of Employment			
			· ·			

Exhibit #3: Quarterly Addendum - Additional Salesperson Information (as applicable)

For changes in sales staff, submit an addendum on a quarterly basis, computed from the effective date of registration. The quarterly sales staff updates should include information for all sales staff (both employees and independent contractors) who solicited on your behalf during the previous reporting quarter. Include all sales staff who were employed during the reporting quarter whether or not they are still employed at the time of filing, per OAR 137-20-0201(4). Individual sales staff are not required to file a registration form; the form you file will cover all sales staff soliciting on your behalf.

Sales Staff Name	Sales Staff Residence	Sales Staff Pseudonym Alias	Date of Employment

Exhibit #4A: Shipment Notification

If you or your Sales Staff indicate to your customers or prospective customers that they will: receive specifc items in one shipment, portions of that item in different shipments, or receive a certifciate in which the buyer must use to redeem the item described, then list below all items, regardless if they are referred to as gifts, premiums, bonuses, prizes or other.

other.		*ltem:	5" Portable TV Model #4323 (Details of item offered)
a	5		
Fxamole	2		
E Xa			
		*Item:	
		Value:	
	1.	Basis:	
		Price:	
		Supplier:	alue:
		*Item:	
		Value:	
	2.	Basis:	
		Price:	
		Supplier:	
		*Item:	
		Value:	
	3.	Basis:	
		Price:	
		Supplier:	
		*Item:	
		Value:	
	4.	Basis:	
		Price:	
		Supplier:	
		*Item:	
		Value:	
	5.	Basis:	
		Price:	
		Supplier:	

Exhibit #4B: Shipment Notification Items: Terms & Conditions

Include a copy of all rules, regulations, terms, and conditions a prospective buyer must meet in order to receive the items listed above.

Exhibit #4C: Shipment Notification Items: Odds of Winning

If you represent or imply, or direct salespersons to represent or imply to purchasers that the purchaser wi	Il receive
certain specific items, but the purchaser is to receive fewer than all of the items, list:	

The manner in which the telephor	ic seller decides w	vhich item or items a	a particular prospec	ctive purchaser is to
receive;				

A)

B)

C)

The Odds a single prospective purchaser has of receiving each described item;

The name and address of each recipient who has, during the preceding 12 months (or if the seller has not been in business that long, during the period the telephonic seller has been in business) received the item having the greatest value and the item with the smallest odds of being received.

		5: Metal, Coin, Stone, Mineral Additional Information etals, coins, stones, and/or minerals, complete the section below:
		John Goldhand (Vendor Name)
<u> </u>	e	1234 Golden Road (Vendor Address)
	E Xampie	Golden, OR 97000 (Vendor City, State, Zip)
) L	х Ц	(503) 000-0000 (Vendor Phone #)
		Item: You purchase .999 pure silver from this vendor (Purchased Item Description)
lf you w	vait to tra	ansfer metals, coins, stones, or minerals to the purchaser until the purchaser has paid in full, include:
	The ad	dress of each location where the metal, stone, or material will be kept;
(A)		
(B)		ept on premises owned by the seller, the name of the owner of the business at which the metal, stone, eral will be kept;
(C)		of any contract or other document which evidences the seller's right to store the metal, stone, or I at the address(es) listed
-		ot selling the metal, stone, or mineral from your own inventory, but instead purchase e, or mineral to fill orders taken from purchasers;
(D)	Includ seller's	<u>e</u> a copy of all contracts or other documents evidencing your ability to call upon suppliers to fill the orders.
		t to purchasers that you have insurance or a surety bond of any type relating to your purchase of any r mineral;
(E)	Includ	e a copy of all these insurance policies and bonds;
include entity m purcha the you	data to nade, su sed the ror the r ness).	y representations as to the earning or profit potential of purchases of any metal, stone, or mineral, substantiate the claims made. If the representation relates to previous sales you made or a related ubstantiating data shall be based on the experiences of at least 50 percent of the persons who have particular metal, stone, or mineral from the seller or related entity during the preceding six months (or if related entity has not been in business that long, during the period the seller or related entity has been include the raw data upon which the representation is based, including, but not limited to, all of the
(F)	The ler	ngth of time you or related entity has been selling the particular metal, stone, or mineral being offered;
(G)		mber of purchasers thereof from you or related entity known to you or related entity to have made at e same earnings or profit as those represented;
(H)		rcentage that the number disclosed pursuant to paragraph (B) represents the total number of sers from you or related entity of the particular metal, stone, or mineral.

Exhibit #6:	Oil, Gas,	Mineral	Fields,	Wells,	or Ex	ploration	Sites Ad	lditional
Information	n					-		

Your ownership interest, if any, in each field, well, or site being offered for sale;

The total number of interests to be sold in each field, well, or site being offered for sale;

If, in selling an interest in any particular field, well, or site, reference is made to an investigation of these fields, wells, or sites by the seller or anyone else, the filing shall include the following:

The name, business address, telephone number, and professional credentials of the person or persons who
made the investigation

A copy of the report and other documents relating to the investigation prepared by the person or persons.

If you any representation as to the earning or profit potential of purchases of any interest in these fields, wells, or sites, include data to substantiate the claims made. If the representation relates to previous sales made by the seller or a related entity, the substantiating data shall be based on the experiences of at least 50 percent of the purchasers of the particular interests from the seller or the related entity during the preceding six months (or if the seller has not been in business that long, during the period the seller or related entity has been in business), include the raw data upon which the representation is based, including, but not limited to, all of the following:

The length of time you or related entity has been selling the particular interests in the fields, wells, or sites being offered;

The number of purchasers of the particular interests from you or related entity known to the seller to have made at least the same earnings as those represented;

The percentage which the number disclosed pursuant to paragraph (B) of this subsection represents of the total number of purchasers of the particular interests from you or related entity.

(A)

(B)

(C)

(D)

(E)



TO THE DEPARTMENT OF JUSTICE THE STATE OF OREGON CONSENT TO SERVICE OF PROCESS TELEPHONIC SELLER

Name of Seller: Type of Entity:

This consent is filed with the Oregon Department of Justice per Oregon Revised Statutes 646.553.

The above identified seller and any successors hereby irrevocably appoint the Oregon Department of Justice as attorney to receive service of any lawful process in any non-criminal suit, action, or proceeding against the seller, or the seller's successor, executor or administrator, which may arise under the Unlawful Trade Practices Act.

When such service of process is made upon the Department of Justice, it shall have the same force and validity as if served personally on the seller. The plaintiff will also mail a copy of the service of process to the primary address listed on the seller's registration and a copy of the process is to be mailed by the plaintiff in such action to the following address:

(Street Address or Post Office Box | City | State & Zip Code)

CONSENT AUTHORIZATION:

(Signature of Authorized Agent for Telephonic Seller)

(Printed Name of Authorized Agent for Telephonic Seller)

(Title of Authorized Agent for Telephonic Seller)

Date



All Principals of the Telephonic Seller Must Sign & Date this Verification

By your signature, under penalty of perjury, you declare as an authorized authority, that this registration form has been examined by you and is true, correct, and complete. Making false statements in this document is against the law and may be penalized by fines, imprisonment, or both.

Signature:		
Print Name:		
Date:		
Signed at:	City: St	ate:
Signature:		
Print Name:		
Date:		
Signed at:	City: St	ate:
Signature:		
Print Name:		
Date:		
Signed at:	City: St	ate:
Signature:		
Print Name:		
Date:		
Signed at:	City: St	ate:
Signature:		
Print Name:		
Date:		
Signed at:	City: St	ate:
Signature:		
Print Name:		
Date:		
Signed at:	City: St	ate:
Signature:		
Print Name:		
Date:		
Signed at:	City: St	ate:

Financial Institution Name and Address:	Type of Account	Account Number	Name, Address & Phone of Authorized Signer