



Wisconsin Department of Agriculture, Trade and Consumer Protection
 Bureau of Consumer Protection
 2811 Agriculture Drive, PO Box 8911, Madison WI 53708-8911
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TELEMARKETING / NO CALL

Wisconsin Stat. § 100.52 and Wis. Admin. Code ch. ATCP 127, subchs. II and V apply to telephone solicitations, commonly referred to as telemarketing calls. The administrative rules in ch. ATCP 127, subchs. II and V were promulgated under authority of Wis. Stat. §§ 100.20(2) and 100.52(3), (4)(d), and (8). DATCP is responsible for administering and enforcing these telemarketing laws. See Wis. Stat. §§ 93.01(intro.) and (3), 93.07(1), and 93.07(24)

1. HOW DO WE CONTACT YOU?

FIRST NAME	MIDDLE INITIAL	LAST NAME
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PROVIDE BUSINESS NAME, IF YOU ARE FILING ON BEHALF OF A BUSINESS

HOME PHONE () -	WORK PHONE () -	EXT.	CELL PHONE () -
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Contact me between 8:00 A.M. and 4:00 P.M. at: HOME WORK CELL EMAIL

ADDRESS STREET (Provide business address when filing on behalf of a business)	APT. #	PO BOX
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CITY	STATE	ZIP	COUNTY
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All business telephone lines affected by complaint:

2. WHAT TELEMARKETER IS YOUR COMPLAINT AGAINST?

NAME OF TELEMARKETING FIRM	BUSINESS EMAIL	BUSINESS WEBSITE
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ADDRESS STREET	SUITE #	PO BOX
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CITY	STATE	ZIP	COUNTY
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NAME OF COMPANY TELEMARKETER WAS SOLICITING FOR	PHONE NUMBER APPEARING ON CALLER ID (If available) () -
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MANAGER'S NAME (If available)

INFORMATION ABOUT YOUR COMPLAINT

3. Did you receive a phone call or text message? Phone call Text message

4. Date of call/text: Time: A.M. P.M. Length of call in minutes:

5. Your age or age of person who spoke to business? (Check one) 0-17 18-61 62 or older

6 What product, service, prize or contest was offered?

7. Telemarketer said they got your number from?

8. Please answer the following questions:

What number was called by the telemarketer? () - Home Cell Work Business

At the time of the call/text, was this phone number registered on Wisconsin's No Call Registry? No Yes

Did you tell the telemarketer your phone number is on Wisconsin's No Call Registry? No Yes

What did the telemarketer say?

Was the telemarketer seeking a donation for a charitable cause? No Yes

What or who was it for?

Was the phone number or message saved on Caller ID, a message machine or another service? No Yes

Was caller identification blocked by the telemarketer? No Yes

Did you previously buy goods or services from the company? No Yes

When and what did you buy?

Did the telemarketer use threatening, intimidating or profane language? No Yes

Was the telemarketing message a recording i.e., no "live" person greeted you? No Yes

Has the telemarketer or company called before and did you tell them not to call back? No Yes What date was this?

Did the telemarketer identify her/himself? No Yes

Did the telemarketer identify the company they were representing? No Yes

Were you asked if you wanted to listen to a sales pitch? No Yes

Did the telemarketer explain the purpose of the call? No Yes

Did the telemarketer clearly and simply describe what they were selling? No Yes

Did the telemarketer immediately end the call if you said you were not interested? No Yes

9. Did the telemarketer mail any follow-up information to you? No Yes *If yes, please attach to complaint.*

10. Would you be willing to testify in court regarding this complaint if needed? No Yes

11. May we contact your telecommunications carrier to obtain any records related to this call? No Yes

12. Describe your complaint in detail.

13. How do you feel your complaint should be resolved? (Please be specific)

How did you hear about us/find us? Presentation Newspaper/Radio/TV Referral (BBB, Legal Action, etc) Internet Other

By filing this complaint, I hereby give the business complained about my consent to communicate, including disclosure of non-public personal information, with the Bureau of Consumer Protection at the Department of Agriculture, Trade and Consumer Protection about any and all matters connected with this complaint. This complaint and the information provided will be used in efforts to resolve the problem and will typically be shared with the party complained against. It may also be used to enforce applicable state laws.

In compliance with *Wis. Stat. § 15.04(1)(m)*, the following notice is provided: This form is authorized by *Wis. Stat. § 93.07(2)*. Completing this form is voluntary. Personally identifiable information provided in this form is subject to Wisconsin's Public Records Law, *Wis. Stat. §§ 19.31 to 19.37*, and therefore might be released in responding to a public records request. In responding to a public records request, the Department will maintain the confidentiality of personally identifiable information provided in this form to the extent permitted by law.

All the information that I have provided in this form is true and accurate to the best of my knowledge.

YOUR SIGNATURE

PRINT NAME

DATE

Please attach copies (both sides) of all documentation that supports your complaint, such as: invoices, receipts, contracts, cancelled checks, advertisement/catalog page showing item ordered, lease documents, telephone bills.

MAIL this form and copies of your papers to: OR EMAIL this form: Fill in electronically and attach digital copies of your papers and send to:

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