

**State of Delaware  
Department of Justice  
Telemarketing Registration Statement**

**TELEMARKETING BUSINESS IDENTIFICATION FORM**

**Instructions.** If the Registrant indicated yes under Section VI, this form must be completed for each telemarketing business hired by the Registrant for telemarketing to customers located in the State of Delaware. Please type or print the following information in the space provided. If necessary, attach additional sheets.

1. **The Telemarketing Business's Legal Name:**

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2. **The Telemarketing Business's Address:**

Address (Line 1)	
Address (Line 2)	
City, State, Zip Code	

3. **The Telemarketing Business's Phone Number:**

(    ) _____ - _____
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4. **The Telemarketing Business's Business Name:**

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5. **The Telemarketing Business's State of Incorporation:**

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6. **The Telemarketing Business's Registered Agent:**

Name	
Address Line # 1	
Address Line # 2	
City, State, Zip	
Phone Number	(_____) _____ - _____