Consumer Complaint Form
LPSC “Do Not Call” Program

Please Fax or Mail to:
Louisiana Public Service Commission
Do Not Call Program
Post Office Box 91154
Baton Rouge, LA 70821-9154

Phone: 225-219-7521
Fax : 225-342-2831

RESIDENTIAL CUSTOMER INFORMATION
___YES___NO My telephone number appears on the Louisiana Do Not Call Register.
If you answer ‘No’ do not continue on this form. Please call 1-877-676-0773 to register.

IMPORTANT! This form is for use by consumers whose residential phone number is registered in the LPSC Do Not Call Register that have received unsolicited non-exempt telephone solicitations. Please print or type the information requested. Information fields with an asterisk* are required. We cannot process your complaint unless these fields are completed. Please submit your complaint as soon as possible after the violation occurs, as this aids greatly in our investigation.

Your Name* (Please Print your full, legal name)

Your Mailing Address*: ________________________________
City*: __________________ State: LA Zip code*: ________ Parish*: ___________

Your phone number where you were called in violation of the program*(______) __________________

Is the above phone number a land line? ____ or a cell phone? _____ (Choose only one)

Are you presently 65 years of age or older*?______YES ______NO

Name of Your Local Telephone Company/Provider*

Name of Your Long Distance Telephone Carrier/Provider*

Other ways we may contact you? Wk Phone: (______) __________________ E Mail Address: ___________

SOLICITOR INFORMATION

Date of call*: (Month/Day/Year) __________ Time of Day of Call*: __________

Product or Service Offered*:

Name of the company that called your home*:

Company Address: ___________________________ City: _____ State: _____ ZIP: _______

Telemarketer Phone Number*: (______) __________ Number obtained by Caller ID*? ___YES ___NO

Additional information:
1. The call was a recorded message. (There was no “live operator” to greet me.)………………….. ___YES ___NO
2. The solicitor is a personal acquaintance, or called due to a referral by someone known to me … ___YES ___NO
3. I have an existing or prior (within the last 6 months) business relationship, or have purchased
   automobile from the company I am complaining against. ………………………………………..___YES ___NO
4. I use my residential phone in the operation of a business…………………………………………..___YES ___NO
5. I would be willing to testify in court regarding this complaint: ……………………………………___YES ___NO
6. I give permission to the Louisiana Public Service Commission to obtain any records related
to this call from my telecommunications carriers………………………………………………__YES ___NO
7. I give permission to the LPSC to forward any records related to this call and subsequent
   investigation of this matter to appropriate federal or state enforcement agencies………………___YES ___NO

Please describe your complaint briefly, use back of form if necessary:

_____________________________________________________________________________________

Signature*: ____________________________________________

Rev 04/09