TELEPHONIC SELLER REGISTRATION
FILED PURSUANT TO ARIZONA’S TELEPHONE SOLICITATIONS STATUTE
A.R.S. § 44-1271, et. seq.

_____Initial Registration    _____Renewal/Update

INSTRUCTIONS

LIMITED REGISTRATION PURSUANT TO A.R.S. § 44-1272.01: If you qualify to file a Limited Registration Statement, you must only complete those fields marked with an Asterisk (*). Please specify the reason the Seller is filing a Limited Registration. Include the name and address of the person who is filing the Limited Registration on behalf of the Seller.

Reason for filing a Limited Registration:________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Name                                                   Address

FULL REGISTRATION PURSUANT TO A.R.S. § 44-1272: If you do not qualify to file a Limited Registration Statement, you must complete Items 1 through 12 of this form and include the following in order for your registration to be complete:

1. A copy of the bond filed with the Arizona Treasurer pursuant to A.R.S. § 44-1274.

2. If the Seller is a corporation or limited liability company, a copy of its articles of incorporation, bylaws and amendments to the bylaws.

3. A copy of any script, outline or presentation which the Seller’s Solicitor(s) will use. If any change is made to any script, outline, presentation, sales information or literature to be used by a Seller during any solicitation, the Seller shall submit the new or revised material before it is use.

4. Sales information and literature provided by the Seller to a Solicitor or described by the
Seller for use by the Solicitor, such as scripts, outlines, presentations, information on how to conduct telephone sales, sample instructions, sample closings, product information and contest or premium award information.

5. Sales information and any other literature provided by the Seller to a consumer in connection with any solicitation.

6. The current driver license or valid government issued photo identification card of each of the Seller’s principals and/or managers.

Note: The Telephone Solicitation Statute requires that certain Sellers provide additional information:

-- Business Opportunity Sellers also must complete Items 13 through 16 below;
-- Sellers who offer to provide premiums also must complete Items 17 through 21 below;
-- Sellers who provide or arrange for the providing of loans also must complete Paragraphs 22 and 23 below.

Telephonic Sellers must register with the Secretary of State by June 30th of every year. See attached fee schedule for registration fees. If there is a change in any of the information requested in items 1 through 23 below, you must file a supplemental statement with the Secretary of State within ten (10) days of the change, except that you need only update quarterly any changes relating to the Solicitors which you hire.

TELEPHONIC SELLER REGISTRATION

Please TYPE or PRINT:

*1. Name of Seller:_________________________________________________________________

*2. Business Name:_________________________________________________________________


   ______ Corporation. If your business is a Corporation or Limited Liability Corporation, you must attach a copy of your Articles of Incorporation, including all Amendments and Bylaws.

   ______ Partnership. If your business is a Partnership you must attach a copy of your Partnership Agreement.

   ______ Sole Proprietorship.

   ______ Fictitious Business Name. If your business operates under a fictitious business name, please state the location where the fictitious name is registered: ________________________________
4. State in which the above business is organized: _________________________________

*5. Provide the complete street address of the PHYSICAL location of the Seller’s principal place of business. **Note:** Addresses of virtual offices, Post Office boxes and/or mail drop boxes used by the business are NOT adequate.

______________________________________________________________________________

Address

City State Zip

*6. List all telephone numbers, including cell phone numbers, to be used to solicit business at the above location. (Attach additional pages if needed, using the same format):

_____________________         ____________________          ____________________

_____________________         ____________________          ____________________

_____________________         ____________________          ____________________

7. Provide the complete street address of the PHYSICAL location of all other locations from which the Telephonic Seller conducts business. **Note:** Addresses of virtual offices, Post Office boxes and/or mail drop boxes are NOT adequate. (Attach additional pages if needed, using the same format):

Location #1:

______________________________________________________________________________

Address

City State Zip

List all telephone numbers, including cell phone numbers, used to solicit business at the above location. (Attach additional pages if needed, using the same format):

_____________________         ____________________          ____________________

_____________________         ____________________          ____________________

_____________________         ____________________          ____________________

_____________________         ____________________          ____________________
Location #2:

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<tr>
<th>City</th>
<th>State</th>
<th>Zip</th>
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</table>

List all telephone numbers, including cell phone numbers, to be used to solicit business at the above location. (Attach additional pages if needed, using the same format):

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Location #3:

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<th>City</th>
<th>State</th>
<th>Zip</th>
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</table>

List all telephone numbers, including cell phone numbers, to be used to solicit business at the above location. (Attach additional pages if needed, using the same format):

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8. For EACH Principal and/or Manager of the Seller, provide the following information. Include a legible copy of the current driver license or valid government issued photo identification card for each individual named.

Principal/Manager #1:

True legal name:  ______________________________________________________

Residence address:  ______________________________________________________

<table>
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<tr>
<th>City</th>
<th>State</th>
<th>Zip</th>
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</table>

Telephone number:  _________________  Date of birth:  _______________________

Office Form SOSBS_TSRS.doc 4
Driver License Number __________________________ Issuing State ______________

The address of the business location for which the principal/manager is responsible:
______________________________________________________________________
______________________________________________________________________
City                                                State                                                Zip

Principal/Manger #2:

True legal name: ________________________________________________________
Residence address: _______________________________________________________
                                                                                   ____________
City                                                State                                                Zip
Telephone number: _________________   Date of birth: _________________________

Driver License Number __________________________ Issuing State ______________

The address of the business location for which the principal/manager is responsible:
______________________________________________________________________
______________________________________________________________________
City                                                State                                                Zip

Principal/Manger #3:

True legal name: ________________________________________________________
Residence address: _______________________________________________________
                                                                                   ____________
City                                                State                                                Zip
Telephone number: _________________   Date of birth: _________________________

Driver License Number __________________________ Issuing State ______________

The address of the business location for which the principal/manager is responsible:
______________________________________________________________________
______________________________________________________________________
City                                                State                                                Zip
9. This section must be completed for each principal and manager listed above:

<table>
<thead>
<tr>
<th>Principal or Manager’s Full Name</th>
<th>Have you ever been convicted or pled no contest to a felony or misdemeanor involving moral turpitude or a violation of the Arizona Telephone Solicitation Statute?</th>
<th>Have you been held liable, either by entry of a stipulated judgment in a civil action alleging fraud, embezzlement, racketeering, fraudulent conversion or misappropriation of property or a violation of the Arizona Telephone Solicitation Statute, or 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?</th>
<th>Are you subject to a currently effective injunction or restrictive order relative to a business activity as a result of an action brought by a public agency or department, including an action affecting a vocational license?</th>
<th>If you answered &quot;yes&quot; to any of these Items please complete the next page.</th>
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10. This section must be completed by each principal or manager who answered "yes" to any of the questions on the previous page.

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<tr>
<th>Full Name</th>
<th>Name of the Court</th>
<th>Date of the Conviction, Judgment, Order or Injunction</th>
<th>Name of the Government Agency that filed the Action (if applicable)</th>
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ATTACH ADDITIONAL SHEETS IF NEEDED, USING THE SAME FORMAT

11. If the Telephonic Seller uses a Solicitor (a person other than the Seller or employee of the Seller who uses a telephone to seek sales or rentals of merchandise on behalf of the Seller or uses a telephone to verify sales or rentals for a Seller), provide the following:

**Solicitor’s True Legal Business Name**

**Physical Location of Business**

- City
- State
- Zip

**Telephone Number(s)**

For each Principal and Manager of the Solicitor provide the following. **Include a legible copy of the current driver license or valid government issued photo identification card for each individual named.**

** Principal/Manager #1:**

- **True legal name:** ____________________________________________
- **Residence address:** __________________________________________
- **City**
- **State**
- **Zip**
- **Telephone number:** ________________  **Date of Birth:** _______________________
Driver License Number __________________________  Issuing State ______________
Principal/Manager #2:

True legal name: ____________________________________________________________

Residence address: __________________________________________________________

______________________________________________________
City                                        State                             Zip

Telephone number: _________________   Date of Birth: _________________________

Driver License Number __________________________  Issuing State ______________

ATTACH ADDITIONAL SHEETS IF NEEDED, USING THE SAME FORMAT

*12. Provide the following information for the Seller's Agent in Arizona who is authorized to receive
   Service of Process in this State:

Name of Agent

________________________________________________________

Address

________________________________________________________

City                                        State                             Zip

Telephone Number(s)

________________________________________________________

SELLERS OF BUSINESS OPPORTUNITIES ARE REQUIRED TO PROVIDE THE FOLLOWING
INFORMATION:

13. If the Seller is soliciting consumers to purchase a business opportunity or merchandise related to
a business opportunity, or is using a Solicitor for such purpose, the following information must be
provided:

Describe the business experience of the Seller, including the length of time that the Seller has sold the
business opportunity currently being offered to consumers as well as any business opportunity
previously sold by the Seller.

________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
14. Provide the names of ALL businesses for which each Principal and/or Manager of the Seller previously sold business opportunities and the dates that said business opportunities were sold:

<table>
<thead>
<tr>
<th>Principal/Manager’s Name</th>
<th>Other Business Name</th>
<th>Dates</th>
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15. Provide a factual description of the business opportunity currently offered to be sold and of the merchandise (including, objects, wares, goods, commodities, intangibles, real estate, securities or services), training and assistance that the Seller represents will be provided to the consumer:

________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

16. Provide a statement describing any goods, services, signs or fixtures relating to the establishment or the operation of the business opportunity that the consumer is required to purchase, lease or rent directly or indirectly from the Seller:

________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

SELLERS WHO OFFER TO PROVIDE A PREMIUM (any gift, bonus, prize, award or other incentive or inducement to purchase merchandise) ARE REQUIRED TO PROVIDE THE FOLLOWING INFORMATION:

17. Description of the Premium:

________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
18. Value or worth of the premium and the basis for valuation:____________________________________
_________________________________________________________________________________
_________________________________________________________________________________

19. All terms and conditions a consumer must satisfy in order to receive the premium:___________
_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________

20. The odds of being able to receive the premium:________________________________________
_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________

21. If the consumer will receive fewer than all of the premiums described by the Seller, provide the following information:

A. The manner in which the Seller decides which premium the consumer will receive:___________
_________________________________________________________________________________
_________________________________________________________________________________

B. The odds of being able to receive each premium, and if the odds are not calculable in advance, the factors used in calculating the odds:
_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________

C. The name and address of each person who, within the past twelve months, has received the premium having the greatest value and the premium with the smallest odds of being received:
_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________
SELLERS WHO REPRESENT OR IMPLY THAT THEY CAN OR MAY BE ABLE TO MAKE A LOAN, ARRANGE A LOAN, ASSIST IN ARRANGING A LOAN OR ASSIST IN PROVIDING INFORMATION THAT MAY LEAD TO OBTAINING A LOAN MUST PROVIDE THE FOLLOWING INFORMATION:

22. For the previous twenty-four (24) months, the names and addresses of any person who lent money to consumers who responded to the Seller’s solicitations:

_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________

23. For the twelve (12) months after the date of the registration, the names and addresses of all persons who informed the Seller that they may be able to either (1) lend money to consumers solicited by the Seller or (2) lend money to the Seller for the Seller to lend to consumers who respond to the Seller's representations that the Seller can make a loan, arrange a loan, assist in arranging a loan or assist in providing information that can lead to obtaining a loan.

Name                                                   Address
____________________________     ___________________________________________________
Name                                                   Address
____________________________     ___________________________________________________
Name                                                   Address
____________________________     ___________________________________________________

PROVIDE COPIES OF ALL CONTRACTS BETWEEN THE SELLER AND THE LENDER(S) OR PROSPECTIVE LENDER(S) WHO MAY LEND MONEY AS PROVIDED ABOVE.

I, the undersigned, being duly sworn (affirm) and say that this Registration Statement is complete, true and correct.

Printed Name of Seller Signature of Seller

Subscribed and sworn (affirmed) to before me this._____day of____________________________

My Commission Expires:

________________________________________ Notary Public

Office Form SOSBS_TSRS.doc
I, the undersigned, being duly sworn (affirm) and say that this Registration Statement is complete, true and correct.

__________________________  ____________________________
Printed Name of Principal    Signature of Principal

Subscribed and sworn (affirmed) to before me this______day of__________________________
My Commission Expires:

__________________________  ____________________________
Printed Name of Principal    Signature of Principal

Subscribed and sworn (affirmed) to before me this.______day of__________________________
My Commission Expires:

__________________________  ____________________________
Printed Name of Principal    Signature of Principal

Subscribed and sworn (affirmed) to before me this.______day of__________________________
My Commission Expires:

__________________________  ____________________________
Printed Name of Principal    Signature of Principal

Notary Public
FEE SCHEDULE (R2-12-302)

The annual registration fee for a full year registration shall be $500.00. The annual registration fee for an initial registration statement filed between August 1 and June 30 of a registration year shall be according to a sliding scale with a minimum fee of $250.00 as follows:

- $500 -- July (full year registration)
- $475 -- August
- $450 -- September
- $425 -- October
- $400 -- November
- $375 -- December
- $350 -- January
- $325 -- February
- $300 -- March
- $275 -- April
- $250 -- May and June