

*Did you lose money?

Mail completed form to:
Consumer Protection Section
30 E. Broad St., 14th floor
Columbus, OH 43215

Unwanted Call Notification Form

Information About You (the Consumer):		Questions with an (*) must be completed.
*Telephone Number:		*Type of Phone:
*Service Provider:		Email:
First:		Last:
Street Address:		
City:	State:	Zip:
Subject of the Notification:		
*Caller Phone Number:		Name of Company:
*Date of Call:		*Time of Call:
Type of Call:		
*The best way to describe the nat	ure of the c	all (check all that apply):
To get money from me		To get me to call them back
To sell me something		For political purposes
To try to get my personal information		To solicit for a church or charity
To threaten arrest		To conduct a survey
To say I owed money		Don't know
Additional Description (max 500 ch	aracters):	

*If yes, how much?

^{*}By checking this box, I acknowledge that the information given above is true to the best of my knowledge and belief. I understand that any information I submit to the Ohio Attorney General's Office is considered public information and may be released in a public records request. I understand that the Ohio Attorney General cannot serve as my private attorney.