

Business Opportunity Consumer Statement



**Illinois Secretary of State
Securities Department**
421 E. Capitol Ave., 2nd Floor
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69 W. Washington St., Ste. 1220
Chicago, IL 60602 • 312-793-3384
800-628-7937

By completing this statement you will be assisting the Illinois Securities Department with the inquiry of a Business Opportunities Company and/or Seller. The information received will enable the Securities Department to conduct a more accurate inquiry.

CONSUMER INFORMATION:

Name: _____ Age: _____

Address: _____

City: _____ State: _____ ZIP: _____

Home Telephone Number: _____ Work Telephone Number: _____

Please indicate the most convenient day to be contacted:

- Monday
- Tuesday
- Wednesday
- Thursday
- Friday

Please indicate the most convenient time and place to be contacted:

- Work (indicate time): _____
- Home (indicate time): _____

COMPANY INFORMATION:

Name, Title (if known), Address and Telephone Number of each person who offered or sold you the Business Opportunity:

Name	Title	Address	Telephone Number
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

CONTACT:

Was the Business Opportunity offered or sold at a fair or trade show?

- Yes (indicate location of fair or show and date): _____
Location and Date
- No

Did you respond to an advertisement based on a televised infomercial or radio broadcast?

- Yes (indicate station and date): _____
Station and Date
- No

Did you respond to a newspaper or magazine advertisement?

- Yes (indicate publication and approximate date): _____
Publication and Date
- No

Did the company or its representative contact you by telephone?

- Yes (indicate name of person and approximate date): _____
Publication and Date
- No

Did you learn about the Business Opportunity via the Internet?

- Yes (indicate Internet address of company, approximate date — include a copy of the page if available): _____ Internet Address and Date
- No

If contact by other means, please indicate type of contact: _____

Did you receive a written contact or other written materials?

- Yes
- No

Did you receive a disclosure document before purchasing the Business Opportunity?

- Yes
- No

Describe the Business Opportunity:

AMOUNT AND FORM OF PAYMENT:

Amount of Initial Payment: _____ Date Payment Made: _____

Payment made by:

- Cash: _____
- Credit Card: _____
- Promissory Note/or other Obligation to Pay: _____
- Check (indicate amount and check number): _____
- Other form of payment (please specify): _____

After the initial payment, were you required to make any additional payments?

- Yes (indicate amount, number and frequency of payments): _____
- No

Were these additional payments or fees disclosed in the original contact or agreement?

- Yes
- No

MISCELLANEOUS QUESTIONS:

Have you filed an inquiry or complaint with the company, the Better Business Bureau or any other person or governmental agency?

- Yes
- No

If yes, indicate name, address, and telephone number of person or agency and date: _____

What, if any, action has been taken?

Have you obtained private legal counsel?

- Yes
- No

If yes, indicate name, business address and telephone number of attorney: _____

ATTACH COPIES OF ANY PAPERS REGARDING THE BUSINESS OPPORTUNITY THAT WAS EITHER OFFERED OR SOLD TO YOU. (Include the front and back of all canceled checks.)

Are you willing to be interviewed by a Securities Department investigator?

- Yes
- No

Are you willing to testify if formal proceedings are commenced?

- Yes
- No

DESCRIBE IN DETAIL THE REASON FOR FILING THIS STATEMENT — IF MORE SPACE IS NEEDED, PLEASE ATTACH ADDITIONAL SHEETS:

Signature of Consumer

Date