



ADAM H. PUTNAM
COMMISSIONER

Florida Department of Agriculture and Consumer Services
Division of Consumer Services

**FLORIDA DO NOT CALL
COMPLAINT FORM**

Section 501.059, Florida Statutes
Rule 5J-5.002, Florida Administrative Code

Please Send Complaint Form to:

FDACS
Division of Consumer Services
Mediation and Enforcement
2005 Apalachee Parkway
Tallahassee, FL 32399-6500

www.FloridaConsumerHelp.com
1-800-HELP-FLA (435-7352)
(850) 410-3800

**Report Unsolicited
Communications**

Provide your phone number that received the call: (____) ____ - ____

Date of Call: ____ / ____ / ____ Time of Call: ____ : ____ AM PM

Did you receive a Phone Call or Text Message?

How did the call begin? Live Person Recorded (Robocall) Voicemail Transmission Abandoned/Dead Air

What is the phone number that called/text? (____) ____ - ____ or None

Was this number obtained from Caller ID? Yes No

Did you call the number displayed on your Caller ID? Yes No

• If yes, did you speak with a representative of the business that called you? Yes No

Was a callback number provided? Yes No

• If yes, provide the number: (____) ____ - ____

Was a product or service offered? Yes No

• If yes, what type of product or service? _____

Was a company name provided? Yes No

• If yes, what is the name of the company? _____

Did the caller immediately identify him/herself and the company they represent? Yes No

• What is the name provided? _____

Have you done business with this company in the past? Yes No

Provide additional relevant details captured or provided during call:

How may we reach you?

Full Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____ - _____

Telephone Number: (____) ____ - ____ Email: _____

STATEMENT:

I acknowledge that the information I provide with my complaint may be a matter of public record, if not considered exempt, is truthful and accurate to the best of my ability. Yes No

Whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his official duty shall be guilty of a misdemeanor of the second degree, punishable as provided in Section 775.082, 775.083, or 837.06, F.S.

Signature: _____

Date: _____