

OTS RPM Zero Activity Form

RPM Name:			
RPM Registration Nur	mber:		
Contact Name:			
Contact Phone Numb	er:		
Reporting Period:	Month	Year	
By signing below, I co not be submitting any		no reportable activity for this RPM account and nis period.	reporting period mentioned above and will
NAMI		SIGNATURE	DATE SIGNED

December 29 2010 v 1.0