

Authorization to Change to Golden West Long Distance

Subscriber Billing Name: _____

Billing Address: _____

City: _____ State: _____ Zip: _____

INTERSTATE OR INTERLATA CARRIER (generally out-of-state calling)

Telephone Number(s) Old Long Distance Provider New Long Distance Provider

_____ from _____ to Golden West (0865)

_____ from _____ to Golden West (0865)

I designate Golden West Long Distance to act as my agent for the Long Distance Provider change(s) listed above.
I understand that only one Long Distance Provider may be designated as my interstate or InterLATA Long Distance Provider for any one telephone number.

X _____
Subscriber's Signature Required

X _____
Date Required

INTRASTATE OR INTRALATA CARRIER (generally in-state calling)

Telephone Number(s) Old Long Distance Provider New Long Distance Provider

_____ from _____ to Golden West (0865)

_____ from _____ to Golden West (0865)

I designate Golden West Long Distance to act as my agent for the Long Distance Provider change(s) listed above.
I understand that only one Long Distance Provider may be designated as my intrastate or IntraLATA Long Distance Provider for any one telephone number.

X _____
Subscriber's Signature Required

X _____
Date Required

Calling Plan: _____

Office Use Only