



CUSTOMER INFORMATION	
Company Name:	Account No:
Requested Start of Service Date:	Order Date:
Type of Change: <input checked="" type="checkbox"/> Port Number <input type="checkbox"/> Add New Toll Free	
Toll Free Prefix Requested:	

Toll Free Number	Current RESPORG ID	Ring to Number	Area of Service	New or Port	Swi or Ded
		N/A	<input type="checkbox"/> 48 <input checked="" type="checkbox"/> 50 <input checked="" type="checkbox"/> Canada <input type="checkbox"/> International	<input type="checkbox"/> New <input checked="" type="checkbox"/> Port	<input type="checkbox"/> Switched <input checked="" type="checkbox"/> Dedicated
		N/A	<input type="checkbox"/> 48 <input checked="" type="checkbox"/> 50 <input checked="" type="checkbox"/> Canada <input type="checkbox"/> International	<input type="checkbox"/> New <input checked="" type="checkbox"/> Port	<input type="checkbox"/> Switched <input checked="" type="checkbox"/> Dedicated
		N/A	<input type="checkbox"/> 48 <input checked="" type="checkbox"/> 50 <input checked="" type="checkbox"/> Canada <input type="checkbox"/> International	<input type="checkbox"/> New <input checked="" type="checkbox"/> Port	<input type="checkbox"/> Switched <input checked="" type="checkbox"/> Dedicated
		N/A	<input type="checkbox"/> 48 <input checked="" type="checkbox"/> 50 <input checked="" type="checkbox"/> Canada <input type="checkbox"/> International	<input type="checkbox"/> New <input checked="" type="checkbox"/> Port	<input type="checkbox"/> Switched <input checked="" type="checkbox"/> Dedicated
		N/A	<input type="checkbox"/> 48 <input checked="" type="checkbox"/> 50 <input checked="" type="checkbox"/> Canada <input type="checkbox"/> International	<input type="checkbox"/> New <input checked="" type="checkbox"/> Port	<input type="checkbox"/> Switched <input checked="" type="checkbox"/> Dedicated
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Customer Authorization

I hereby designate USA Digital Communications, Inc. to act as the Responsible Organization (RESPORG) for the toll free numbers listed above. I further authorize USA Digital Communications, Inc. to act as my agent in facilitating the transfer of the toll free number(s) from the current Responsible Organization (RESPORG) to USA Digital Communications, Inc.

Signature *date*

Company Name: <i>(as listed on the billing invoice)</i>		
Contact:		
Title:		
Service Address:		
City:	State:	Zip:
Phone Number:	Fax Number:	

Instructions for Completing the Letter of Authorization for Toll Free Number and Responsible Organization Transfer Form

Section 1 - Customer Information

Please leave this section blank.

Section 2 – Number(s) to be Ported

List each toll free number to be ported on a separate line. Leave all other boxes as-is.

Section 3 – Customer Authorization

Sign, date and complete the contact information box. Enter the name and address exactly as it appears on the statement from your current carrier, even if you have moved recently. *If any of the contact information does not match with the information listed in the toll-free database, your request will be rejected without further inquiry.*

IMPORTANT – Please include a copy of the most recent statement from your current carrier along with the completed form. This can speed up the process greatly.

525 West Main St.
Suite 100
Belleville, IL 62220

phone: 618-222-8150
fax: 618-222-8151



To Whom it May Concern:

I(We) wish to have the toll-free numbers indicated on the accompanying Responsible Organization Transfer Form transferred to 800Link, Inc. For the purpose of utilizing their voice mail system.

Authorized Signature _____ Date _____

Please Print Name _____