

LETTER OF AUTHORIZATION FOR NUMBER PORTABILITY

This letter is to authorize its withholder to act on behalf of:					
(Customer's Billing Name)					
(Customer's Billing Address)					
(Local Service Address if different	ent from above)				
To act as our agent in the mat	ter of: Number Portability				
Telephone Number(s):					
(Please use additional page if r	l needed)				
Current Voice Carrier:					
Current Account Number:					
RNC (Tax ID) / Registro Merca	ntil:				
Passport / ID Number:					
Name and Surname (in capital					
letters): Title/Position:					
Signature:					
Date:					

All FIELDS MUST BE FILLED IN



Telephone Number(s):				