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## Letter of Agency

Customers Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone Numbers : \_\_\_\_\_

I authorize Panora Communications Cooperative to change my preferred long distance carrier from \_\_\_\_\_ Telecommunications Long Distance Company.

I designate Panora Communications Cooperative to act as my agent to make this change.

I understand that only one long distance carrier may be designated as my inter-state or as my intrastate preferred long distance any one telephone number.

I understand that I may consult with Panora Communications Cooperative as to whether a fee will apply to the change in my carrier.

\_\_\_\_\_  
Signature of Customer

\_\_\_\_\_  
Date