



LETTER OF AUTHORIZATION FOR NUMBER PORTABILITY

This letter is to authorize Telnix to act on behalf of:

(Customer's Billing Name)

(Customer's Billing Address)

(**Local** Service Address if different from above)

To act as our agent in the matter of: Number Portability

Telephone Number(s):

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(Please use additional page if needed)

Current Voice Carrier:

Current Account Number:

RNC (Tax ID) / Registro Mercantil:

Passport / ID Number:

Name and Surname (in capital letters):

Title/Position:

Signature:

Date:

