



Long Distance Request Form
One Bill---Local Customer Service---Competitive Rates

PO Box 235
 100 Market St
 Gorham, Ks 67640

785-637-5300

www.gorhamtel.com

Date: _____

Billing Name: _____

Billing Acct#: _____

Billing Telephone #: _____

(Please Check One Plan)	Office Use	Per/min	Choice	Monthly
gtcLD-Call1	900	\$ 0.12		\$ -
gtcLD-Call2	901	\$ 0.08		\$ 3.95
gtc LD 100-min Block	906	\$0.099		\$ 9.95
100 Anytime Minutes *\$.07 after 100				
Unlimited	UNLIM			\$ 25.95
1 Year Contract *Resident Only				
gtcLD-800 #	902	\$ 0.13		\$ 2.95

Please switch my service to GTC Long Distance. I am responsible for all valid GTD Long Distance Charges for usage and will call Gorham Telephone Company, with any questions regarding my billing. By signing this form, I authorize Gorham Telephone Company to change my carrier of interstate and intrastate calls to GTC Long Distance.

(*Some restrictions apply)

Customer Name (Print)	Customer Signature