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November 17, 2006

VIA OVERNIGHT DELIVERY

Renee J. Jenkins  
Director of Administration  
Public Utilities Commission of Ohio  
180 E. Broad St.  
Columbus, OH 43215-3793

06-1374-TP-ATA

Re: Budget Phone, Inc. ("Budget Phone")  
Revisions to Prepaid Tariff  
ATA Registration Filing

Dear Ms. Jenkins:

Enclosed please find one original and ten (10) copies of Budget Phone, Inc.'s Local Exchange Carrier Registration Form filed under (ATA) requirements to revise its prepaid local exchange tariff no. 3, with all required attachments. An updated Service Requirements Form has been provided under Budget Phone, Inc.'s ZTA filing for additional revisions to its prepaid tariff. The ZTA revision filing has been sent under separate cover on the same date of this filing.

I have also enclosed an extra copy of this filing to be date-stamped and returned to me in the enclosed preaddressed, postage-prepaid envelope.

If you have any questions or if I may provide you with additional information, please do not hesitate to contact me via phone (678-775-2253) or email ([ajanssen@telecomcounsel.com](mailto:ajanssen@telecomcounsel.com)).

Respectfully submitted,

Angela Janssen, Legal Assistant to  
Lance J.M. Steinhart  
Attorney for Budget Phone, Inc.

Enclosures

cc: Ron Munn  
Ohio Consumer Counsel

This is to certify that the images appearing are an accurate and complete reproduction of a case file document delivered in the regular course of business.  
Technician JO Date Processed 11-20-06

**The Public Utilities Commission of Ohio**  
**TELECOMMUNICATIONS APPLICATION FORM**

(Effective: 10/01/2004)  
(Pursuant to Case Nos. 99-998-TP-COI and 99-563-TP-COI)

In the Matter of the Application of \_\_\_\_\_ )  
Budget Phone, Inc. \_\_\_\_\_ )  
to \_\_\_\_\_ )

Case No. 06 - 1374 -TP- ATA

Name of Registrant(s) Budget Phone, Inc.  
DBA(s) of Registrant(s) \_\_\_\_\_  
Address of Registrant(s) 1325 Barksdale Blvd., Suite 200, Bossier City, LA 71111  
Company Web Address www.budgetphone.com  
Regulatory Contact Person(s) Ronald Munn Phone (318) 671-5000 Fax (318) 671-5024  
Regulatory Contact Person's Email Address rmunn@budgetphone.com  
Contact Person for Annual Report Art Magee Phone (318) 671-5000  
Consumer Contact Information Vicki Hamilton Phone (318) 671-5000  
Date November 17, 2006 TRF Docket No. \_\_\_\_\_ -CT-TRF or \_\_\_\_\_ -TP-TRF

Motion for protective order included with filing? ☐ Yes ☒ No

Motion for waiver(s) filed affecting this case? ☐ Yes ☒ No [Note: waiver(s) tolls any automatic timeframe]

Company Type (check all applicable): ☐ CTS (IXC) ☐ ILEC ☒ CLEC ☐ CMRS ☐ AOS  
☐ Other (explain) \_\_\_\_\_

**NOTE:** This form must accompany all applications filed by telecommunication service providers subject to the Commission's rules promulgated in Case No. 99-998-TP-COI, as well as by ILECs filing an ARB or NAG case pursuant to the guidelines established in Case No. 96-463-TP-UNC. *It is preferable **NOT** to combine different types of filings, but if you do so, you must file under the process with the longest applicable review period.*

**I. Please indicate the reason for submitting this form (check one)**

- ☐ 1 (AAC) Application to Amend Certificate by a CLEC to modify Serving Area (0-day notice, 7 copies)
- ☐ 2 (ABN) Abandonment of all Services  
☐ a. CLEC (90-day approval, 10 copies) ☐ b. CTS (14-day approval, 10 copies) ☐ c. ILEC (NOT automatic, 10 copies)
- ☐ 3 (ACE) New Operating Authority for providers other than CMRS (30-day approval, 7 copies); for CMRS, see item No. 15 on this page.  
☐ a. Switched Local ☐ b. Non-switched local ☐ c. CTS ☐ d. Local and CTS ☐ e. Other (explain) \_\_\_\_\_
- ☐ 4 (ACO) LEC Application to Change Ownership (30-day approval, 10 copies)
- ☐ 5 (ACN) LEC Application to Change Name (30-day approval, 10 copies)
- ☐ 6 (AEC) Carrier-to-Carrier Contract Amendment to an agreement approved in a NAG or ARB case (30-day approval, 7 copies)  
*NOTE: see item 25 (CTR) on page two of this form for all other contract filings.*
- ☐ 7 (AMT) LEC Merger (30-day approval, 10 copies)
- ☐ 8 (ARB) Application for Arbitration (see 96-463-TP-COI for applicable process, 10 copies)
- ☒ 9 (ATA) Application for Tariff Amendment for Tier 1 Services, Application to Reclassify Service Among Tiers, or Change to Non-Tier Service  
☒ a. Tier 1 (and Carrier-to-Carrier tariff filings as set-forth in 95-845-TP-COI)  
☐ i. Pre-filing submittal (30-day pre-filing submittal with Staff and OCC; **Do Not Docket**, 4 copies)  
☐ ii. New End User Service which has been preceded by a 30-day pre-filing submittal with Staff for all submittals and also with OCC for Tier 1 residential services (0-day filing, 10 copies)  
☐ iii. New End User Service (NOT preceded by a 30-day filing submittal, 30-day approval, 10 copies)  
☐ iv. New Carrier-to-Carrier Service which has been preceded by a 30-day pre-filing with Staff (0-day filing, 10 copies)  
☐ v. Change in Terms and Conditions, textual revision, correction of error, etc. (30-day approval, 10 copies)  
☒ vi. Grandfather service (30-day approval, 10 copies)  
☐ vii. Initial Carrier-to-Carrier Services Tariff subsequent to ACE approval (60-day approval, 10 copies)  
☐ viii. *Withdrawal of Tier 1 service must be filed as an "ATW", not an "ATA" - see item 12, below*  
☐ b. Reclassification of Service Among Tiers (NOT automatic, 10 copies)  
☐ c. Textual revision with no effect on rates for non-specific or non-tier service (30-day approval, 10 copies)
- ☐ 10 (ATC) Application to Transfer Certificate (30-day approval, 7 copies)
- ☐ 11 (ATR) LEC Application to Conduct a Transaction Between Utilities (30-day approval, 10 copies)
- ☐ 12 (ATW) Application to Withdraw a Tier 1 Service  
☐ a. CLEC (60-day approval, 10 copies) ☐ b. ILEC (NOT automatic, 10 copies)
- ☐ 13 (CIO) Application for Change in Operations by Non-LEC Providers (0-day notice, 7 copies)
- ☐ 14 (NAG) Negotiated Interconnection Agreement Between Carriers (0-day effective, 90-day approval, 8 copies)
- ☐ 15 (RRC) For CMRS providers only to Register or to Notify of a Change in Operations (0-day notice, 7 copies)
- ☐ 16 (SLF) Self-complaint Application  
☐ a. CLEC only -Tier 1 (60-day automatic, 10 copies)  
☐ b. Introduce or increase maximum price range for Non-Specific Service Charge (60-day approval, 10 copies)
- ☐ 17 (UNC) Unclassified (explain) \_\_\_\_\_ (NOT automatic, 15 copies)

- ☐ 18(ZTA) Tariff Application Involving only Tier 2 Services  
 NOTE: Notifications do not require or imply Commission Approval.  
☐ a. New End User Service (0-day notice, 10 copies)  
☐ b. Change in Terms and Conditions, textual revision, correction of error, etc. (0-day notice, 10 copies)  
☐ c. Withdrawal of service (0-day notice, 10 copies)
- ☐ 19 Other (explain) \_\_\_\_\_ (NOT automatic, 15 copies)

**THE FOLLOWING ARE TRF FILINGS ONLY, NOT NEW CASES (0-day notice, 3 copies)**

- ☐ 20 Introduction or Extension of Promotional Offering  
☐ 21 New Price List Rate for Existing Service  
☐ a. Tier 1 ☐ b. Tier 2  
☐ 22 Designation of Registrant's Process Agent(s)  
☐ 23 Update to Registrant's Maps  
☐ 24 Annual Tariff Option For Tier 2 Services – indicate which option you intend to adopt to maintain the tariff. NOTE, changing options is only permitted once per calendar year.  
☐ Paper Tariff ☐ Electronic Tariff. If electronic, provide the tariff's web address: \_\_\_\_\_

**THE FOLLOWING ARE CTR FILINGS ONLY, NOT NEW CASES (0-day notice, 7 copies)**

- ☐ 25 Application to establish, revise, or cancel an end-user contract. (NOTE: see item 6 on page 1 of this form for carrier-to-carrier contract amendments)  
 CTR Docket No. \_\_\_\_\_ - \_\_\_\_\_ - TP – CTR (Use same CTR number throughout calendar year)

**II. Please indicate which of the following exhibits have been filed. The numbers (corresponding to the list on page (1) and above) indicate, at a minimum, the types of cases in which the exhibit is required:**

<input type="checkbox"/>	[all]	A copy of any motion for waiver of O.A.C. rule(s) associated with this filing. NOTE: the filing of a motion for waiver tolls any automatic timeframe associated with this filing.
<input type="checkbox"/>	[3]	Completed Service Requirements Form.
<input type="checkbox"/>	[3, 9(vii)]	A copy of registrant's proposed tariffs. (Carrier-to-Carrier resale tariff also required if facilities-based)
<input type="checkbox"/>	[3]	Evidence that the registrant has notified the Ohio Department of Taxation of its intent to conduct operations as a telephone utility in the State of Ohio.
<input type="checkbox"/>	[3]	Brief description of service(s) proposed.
<input type="checkbox"/>	[3a-b,3d]	Explanation of whether applicant intends to provide <input type="checkbox"/> resold services, <input type="checkbox"/> facilities-based services, or <input checked="" type="checkbox"/> both resold and facilities-based services.
<input type="checkbox"/>	[3a-b,3d]	Explanation as to whether CLEC currently offers CTS services under separate CTS authority, and whether it will be including those services within its CLEC filing, or maintaining such CTS services under a separate affiliate.
<input type="checkbox"/>	[3a-b,3d]	Explanation of how the proposed services in the proposed market area are in the public interest.
<input type="checkbox"/>	[3a-b,3d]	Description of the proposed market area.
<input type="checkbox"/>	[3a-b,3d]	Description of the class of customers (e.g., residence, business) that the applicant intends to serve.
<input type="checkbox"/>	[3a-b,3d]	Documentation attesting to the applicant's financial viability, including the following: 1) An executive Summary describing the applicant's current financial condition, liquidity, and capital resources. Describe internally generated sources of cash and external funds available to support the applicant's operations that are the subject of this certification application. 2) Copy of financial statements (actual and pro forma income statement and a balance sheet). Indicate if financial statements are based on a certain geographical area(s) or information in other jurisdictions 3) Documentation to support the applicant's cash and funding sources.
<input type="checkbox"/>	[3a-d]	Documentation attesting to the applicant's technical and managerial expertise relative to the proposed service offering(s) and proposed service area.
<input type="checkbox"/>	[3a-d]	Documentation indicating the applicant's corporate structure and ownership.
<input type="checkbox"/>	[3a-b,3d]	Information regarding any similar operations in other states. Also, if this company has been previously certified in the State of Ohio, include that certification number.
<input type="checkbox"/>	[3a-b,3d]	Verification that the applicant will maintain local telephony records separate and apart from any other accounting records in accordance with the GAAP.
<input type="checkbox"/>	[3a-b,3d]	Verification of compliance with any affiliate transaction requirements.
<input type="checkbox"/>	[3a-b,3d]	Explanation as to whether rates are derived through (check all applicable): <input type="checkbox"/> interconnection agreement, <input type="checkbox"/> retail tariffs, or <input type="checkbox"/> resale tariffs.
<input type="checkbox"/>	[1,3a-b,3d]	Explanation as to which service areas company currently has an approved interconnection or resale agreement.
<input type="checkbox"/>	[3a-b,3d, 9a(i-iii)]	Explanation of whether applicant intends to provide Local Services which require payment in advance of Customer receiving dial tone.
<input type="checkbox"/>	[3a,3b,3d, 9a,(i-iii)]	Tariff sheet(s) listing the services and associated charges that must be paid prior to customer receiving dial tone (if applicable).
<input type="checkbox"/>	[3a-b,3d,8]	Letters requesting negotiation pursuant to Sections 251 and 252 of the Telecommunications Act of 1996 and a proposed timeline for construction, interconnection, and offering of services to end users.
<input type="checkbox"/>	[3,4,7,10-11,13]	Certification from Ohio Secretary of State as to party's proper standing (domestic or foreign corporation, authorized use of fictitious name, etc.). In transfer of certificate cases, the transferee's good standing must be established.
<input type="checkbox"/>	[3-4,7,10-11,13]	List of names, addresses, and phone numbers of officers and directors, or partners.
<input type="checkbox"/>	[3]	A sample copy of the customer bill and disconnection notice the applicant plans to utilize.

<input checked="" type="checkbox"/>	[1,4,9,10-13,16-21]	Copy of superseded tariff sheet(s) & price list(s), if applicable, marked as Exhibit A.
<input checked="" type="checkbox"/>	[1,4,9,10-13,16-21]	Copy of revised tariff sheets & price lists, marked as Exhibit B.
<input type="checkbox"/>	[3]	Provide a copy of any customer application form required in order to establish residential service, if applicable.
<input checked="" type="checkbox"/>	[1-2,4-7,9,12-13,16,18-24]	Description of and rationale for proposed tariff changes, including a complete description of the service(s) proposed or affected. Specify for each service affected whether it is <input type="checkbox"/> business; <input checked="" type="checkbox"/> residence; or <input type="checkbox"/> both. Also indicate whether it is a <input type="checkbox"/> switched or <input type="checkbox"/> dedicated service. Include this information in either the cover letter or Exhibit C.
<input checked="" type="checkbox"/>	[1,2,4,9a(v-vi), 5,10,16,18(b-c), 21]	Specify which notice procedure has been/will be utilized: <input checked="" type="checkbox"/> direct mail; <input type="checkbox"/> bill insert; <input type="checkbox"/> bill notation or <input type="checkbox"/> electronic mail. NOTE: <input type="checkbox"/> Tier 1 price list increases <b>must</b> be within an approved range of rates. <input type="checkbox"/> SLF Filings – The customer notice will not be sent until reviewed and approved by Commission Staff.
<input type="checkbox"/>	[2,4-5,9a(v), 9b, 10,12-13,16, 18(b-c),20-21]	Copy of real time notice which has been provided to customers. For SLF's the customer notice will be addressed in a Commission Order. NOTE: SLF Filings – The customer notice will not be sent until reviewed and approved by Commission Staff.
<input type="checkbox"/>	[1,2,5,9a(v),11-13, 18,21(increase only)]	Affidavit attesting that customer notice has been provided.
<input type="checkbox"/>	[2,12]	Copy of Notice which has been provided to ILEC(s).
<input type="checkbox"/>	[2,12]	Listing of Assigned (NPA) NXX's where in the LECs (NPA) NXX's would be reassigned.
<input type="checkbox"/>	[2,4,10,12-13,]	List of Ohio exchanges specifically involved or affected.
<input type="checkbox"/>	[14]	The interconnection agreement adopted by negotiation or mediation.
<input type="checkbox"/>	[15]	For commercial mobile radio service providers, a statement affirming that registrant has obtained all necessary federal authority to conduct operations being proposed, and that copies have been furnished by cellular, paging, and mobile companies to this Commission of any Form 401, 463, and / or 489 which the applicant has filed with the Federal Communications Commission.
<input type="checkbox"/>	[15]	Exhibits must include company name, address, contact person, service description, and evidence of registration with the Ohio Secretary of State.
<input type="checkbox"/>	[24]	Affidavit that total price of contract exceeds total cost of all regulated services.
<input type="checkbox"/>	[5,13]	New title sheet with proposed new company name.
<input type="checkbox"/>	[1,3,13]	For CLEC's, List of Ohio Exchanges the applicant intends to serve (Use spreadsheet from: <a href="http://www.puc.state.oh.us/puco/forms.cfm?doc_id=357">http://www.puc.state.oh.us/puco/forms.cfm?doc_id=357</a> ).
<input type="checkbox"/>	[1,3a-b,3d,7, 10,13, 23]	Maps depicting the proposed serving and calling areas of the applicant.  <b>If Mirroring Large ILEC</b> exchanges for both serving area and local calling areas: • <b>Serving area</b> must be clearly reflected on an Ohio map attached to tariffs and textually described in tariffs by noting that it is reflecting a particular large ILEC/CLEC territory, and listing the involved exchanges. • <b>Local calling areas</b> must be clearly reflected on an Ohio map attached to the tariffs, and/or clearly delineated in tariffs, including a complete listing of each exchange being served and all exchanges to which local calls can be made from each of those exchanges.  <b>If Self-defining</b> serving area and/or local calling area as an area other than that of the established ILEC exchange(s): • <b>Serving Area</b> must be clearly reflected on an Ohio map attached to the tariffs, and textually described in tariffs by listing the involved exchanges. • <b>Local Calling Areas</b> must be described in the tariff through textual delineation and clear maps. Maps for self-defined <b>serving and local calling areas</b> are required to be traced on United States Geological Survey topography maps. These maps are the Standard Topographic Quadrangle maps, 7.5 minute 1:24,000.
<input type="checkbox"/>		Other information requested by the Commission staff.
<input type="checkbox"/>	[3]	Initial certification that includes Tier 2 Services, indicate which option you intend to adopt to maintain the tariff: <input type="checkbox"/> Paper Tariff <input type="checkbox"/> Electronic Tariff – If electronic, provide the web address for the tariff:

III. Registrant hereby attests to its compliance with the following requirements in the Service Requirements Form, as well as all pertinent entries and orders issued by the Commission with respect to these issues. Further, registrant hereby affirms that it will maintain with its TRF docket an up-to-date, properly marked, copy of the Service Requirements Form available for public inspection.

**MANDATORY REQUIREMENTS FOR ALL BASIC LOCAL EXCHANGE AND CTS PROVIDERS:**

- ☒ Sales tax
- ☒ Minimum Telephone Service Standards (MTSS)
- ☒ Surcharges

**MANDATORY REQUIREMENTS FOR ALL BASIC LOCAL EXCHANGE PROVIDERS:**

- ☒ 1+ IntraLATA Presubscription

**SERVICE REQUIREMENTS FOR PROVISION OF CERTAIN SERVICES (CHECK ALL APPLICABLE):**

- ☐ Discounts for Persons with Communication Disabilities and the Telecommunication Relay Service [Required if toll service provided]
- ☐ Emergency Services Calling Plan [Required if toll service provided]
- ☐ Alternative Operator Service (AOS) requirements [Required for all providing AOS (including inmate services) service]
- ☐ Limitation of Liability Language [Required for all who have tariff language that may limit their liability]
- ☐ Termination Liability Language [Required for all who have early termination liability language in their tariffs]
- ☐ Service Connection Assistance (SCA) [Required for all LECs]
- ☐ Local Number Portability and Number Pooling [Required for facilities-based LECs]
- ☐ Package Language [Required for tariffs containing packages or service bundles containing both local and toll and/or non-regulated services]

**IV. List names, titles, phone numbers, and addresses of those persons authorized to respond to inquiries from the Consumer Services Department on behalf of the applicant regarding end-user complaints:**

Vicki Hamilton  
CSR Manager  
1325 Barksdale Blvd., Suite 200  
Bossier City, LA 71111  
(888) 424-5588

**V. List names, titles, phone numbers, and addresses of those persons authorized to make and/or affirm or verify filings at the Commission on behalf of the applicant:**

Lance J.M. Steinhart  
Lance JM Steinhart, PC  
1720 Windward Concourse  
Suite 250  
Alpharetta, Georgia 30005  
(770) 232-9200 (Phone)  
(770) 232-9208 (Facsimile)  
[lsteinhart@telecomcounsel.com](mailto:lsteinhart@telecomcounsel.com) (E-mail)

*NOTE: An annual report is required to be filed with the Commission by each company on an annual basis. The annual report form will be sent for completion to the address and individual(s) identified in this Section unless another address or individual is so indicated.*

**VI. List Name(s), DBA(s) and PUCO Certification Number(s) of any affiliates you have operating in Ohio under PUCO authority, whether Telecommunications or other. (If needed, use a separate sheet and check here: ☐)**

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## AFFIDAVIT

### *Compliance with Commission Rules and Service Standards*

I am an officer of the applicant corporation, Budget Phone, Inc., and am authorized to make this statement  
(Name of Company)  
on its behalf. I attest that these tariffs comply with all applicable rules, including the Minimum Telephone Service Standards (MTSS) for the state of Ohio. I understand that the tariff notification filings do not imply Commission approval and that the Commission's rules, including the Minimum Telephone Service Standards, as modified and clarified from time to time, supercede any contradictory provisions in our tariff. We will fully comply with the rules of the state of Ohio and understand that noncompliance can result in various penalties, including the suspension of our certificate to operate within the state of Ohio.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on November 17, 2006 at Bossier City, LA  
(Date) (Location)

Ronald Munn Jr 11-17-06  
\*( Ronald Munn, Director Regulatory and Revenue Assurance) (Date)

*\* This affidavit is required for every tariff-affecting filing. It may be signed by counsel or an officer of the applicant, or an authorized agent of the applicant.*

## VERIFICATION

I, Ronald Munn, Director Regulatory and Revenue Assurance verify that I have utilized, verbatim, the Commission's Telecommunications Application Form and that all of the information submitted here, and all additional information submitted in connection with this case, is true and correct to the best of my knowledge.

Ronald Munn Jr 11-17-06  
\*( Ronald Munn, Director Regulatory and Revenue Assurance) (Date)

*\*Verification is required for every filing. It may be signed by counsel or an officer of the applicant, or an authorized agent of the applicant.*

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**Send your completed Application Form, including all required attachments as well as the required number of copies, to:**  
**Public Utilities Commission of Ohio**  
**Attention: Docketing Division** (or to the Telecommunications Division Chief if a prefiling submittal)  
**180 East Broad Street, Columbus, OH 43215-3793**

**EXHIBIT A**

**Superseded Approved Tariff Pages**

### CHECK SHEET

All tariff sheets are effective as of the date shown at the bottom of the respective sheet(s). Original and revised sheets as named below comprise all changes from the original tariff and are currently in effect as of the date on the bottom of this sheet.

#### SHEET REVISION

I	Original
2	3 <sup>rd</sup> Revised *
3	1 <sup>st</sup> Revised *
4	Original
5	Original
6	Original
7	Original
8	Original
9	Original
10	1 <sup>st</sup> Revised
11	Original
11.1	Original *
12	Original
13	Original
14	Original
15	Original
16	Original
17	Original
18	Original
19	Original
20	Original
21	Original
22	Original
23	Original
24	Original
25	2 <sup>nd</sup> Revised *
25.1	1 <sup>st</sup> Revised *
26	Original
27	Original
28	Original
29	1 <sup>st</sup> Revised *
29.1	Original*
29.2	Original*
30	Original
31	3 <sup>rd</sup> Revised *
32	3 <sup>rd</sup> Revised *

As Approved in Case No.

Effective Date: November 21, 2006

Ronald Munn, Director Regulatory and Revenue Assurance  
Budget Phone, Inc.  
1325 Barksdale Blvd., Suite 200  
Bossier City, LA 71111



**SECTION 4 - SERVICE RATES**

**4.1 Basic Local Exchange Service Rates**

**4.1.1 Monthly Recurring Charges**

- The monthly service charge includes local phone service only.
- Taxes, which are not included in the quoted rates.
- Any additional features added to the basic service

**4.1.2 Rates**

**(A) Residential Basic Line Service\***

First Line:	\$29.95 to 59.95 per month**
Each Additional Line:	\$29.95 to 59.95 per month"

- \* Monthly charges include local exchange phone service only. A Connection charge applies when a Budget Phone Residential Basic Flat Rate Local Exchange Services subscriber requests connection to one or more customer calling features after the initial establishment of service.

\*\* Budget Phone Prompt Pay Program listed below offers discounts for timely payments.

**(A) Nonrecurring Charges**

- (1) Installation charges apply and will be divided between each of the first three bills after commencement of service. The charges are outlined on the price list.
- (2) A reconnection charge will be applied to each number restored after a disconnection. If disconnected service is reconnected, there will be no guarantee that the same number can be retained. The charges are outlined in the price list.

As Approved in Case No. 02-\_\_\_\_-TP-ATA

Effective Date:

Art McGee, Comptroller  
6901 W. 70th Street  
Shreveport, Louisiana 71129-2309

**Section 7 - Price List**

	Monthly Recurring Charge	Nonrecurring Charge
Service	Maximum	Maximum
Basic Monthly Service – per access line	59.95	\$35.00
Budget Phone Basic Plan - per access line in the Cincinnati Bell, SBC, Sprint, and Verizon Exchanges of Ohio (N)	59.95 (N)	\$50.00 (N)
Number or Name Change (per line)		\$45.00
<b>Features:</b>		
Caller ID	20.00	25.00
Three Way	n/a	n/a
Call Waiting	15.00	25.00
Call Forwarding	n/a	n/a
Call Return	n/a	n/a
Unpublished Number	15.00	25.00
Expanded Area Service	n/a	n/a
Inside Wiring	n/a	n/a
Assignment or transfer or service	n/a	n/a
Reconnection Charge	n/a	\$60.00
Returned Check Charge	n/a	\$50.00
IAF (N)	\$4.10 (N)	\$4.10 (N)
Directory Assist. (N)		
Local (N)	n/a (N)	\$1.00 (N)
National (N)	n/a (N)	\$1.75 (N)

(D)

As Approved in Case No.

Effective Date: November 21, 2006

Ronald Munn, Director Regulatory and Revenue Assurance

Budget Phone, Inc.

1325 Barksdale Blvd., Suite 200

Bossier City, LA 71111

**Section 7 - Price List**

	Recurring Actual Charge		Nonrecurring Actual Charge	
<b>Service</b>				
Basic Monthly Service - per access line	\$39.95		\$30.00**	
Budget Phone Basic Plan - per access line In the Cincinnati Bell, SBC, Sprint and Verizon exchanges of Ohio (N)	\$49.95	(N)	\$50.00**	(N)
Bonus Prepaid Package - per access line In the SBC exchanges of Ohio (N)	\$39.95	(R)	\$30.00*	
Deluxe Prepaid Package - per access line In the SBC exchanges of Ohio	\$49.95	(R)	\$30.00**	
In the Verizon exchanges of Ohio (N)	\$59.95	(N)	\$50.00**	(N)
Deluxe 2000 Package - per access line In the Cincinnati Bell, SBC, Sprint and Verizon exchanges of Ohio (N)	\$10.00	(N)		
Number or Name Change (per line)			\$30.00	
<b>Features:</b>				
Caller ID	\$10.00		\$15.00*	
Three Way	\$5.00		\$15.00*	
Call Waiting	\$5.00		\$15.00*	
Call Forwarding	\$5.00		\$15.00*	
Call Return	\$8.00		\$15.00*	
Unpublished Number	\$5.00		\$15.00*	
Expanded Area Service	\$20.00		\$15.00*	
Inside Wiring	\$4.99		\$15.00*	
Assignment or transfer or service			\$39.95	
Reconnection Charge			\$25.00	
Returned Check Charge			\$25.00	
IAF (N)	\$4.10	(N)		
Directory Assist. (N)				
Local (N)	n/a	(N)	\$1.00	(N)
National (N)	n/a	(N)	\$1.75	(N)

\* Charge only if feature is added after service installation

\*\* Nonrecurring Actual Charge (also known as "activation fee") can be charged to customer over the first three months in the amounts of \$10.00, \$10.00 and \$10.00.

As Approved in Case No.

Effective Date: November 21, 2006

Ronald Munn, Director Regulatory and Revenue Assurance

Budget Phone, Inc.

1325 Barksdale Blvd., Suite 200

Bossier City, LA 71111

**EXHIBIT B**

**Proposed Revised Tariff Pages**

### CHECK SHEET

All tariff sheets are effective as of the date shown at the bottom of the respective sheet(s). Original and revised sheets as named below comprise all changes from the original tariff and are currently in effect as of the date on the bottom of this sheet.

#### SHEET REVISION

1	Original
2	4 <sup>th</sup> Revised *
3	1 <sup>st</sup> Revised
4	Original
5	Original
6	Original
7	Original
8	Original
9	Original
10	1 <sup>st</sup> Revised
11	Original
11.1	Original
12	Original
13	Original
14	Original
15	Original
16	Original
17	Original
18	Original
19	Original
20	Original
21	Original
22	Original
23	Original
24	Original
25	2 <sup>nd</sup> Revised
25.1	1 <sup>st</sup> Revised
26	Original
27	1 <sup>st</sup> Revised *
28	Original
29	1 <sup>st</sup> Revised
29.1	Original
29.2	Original
30	Original
31	4 <sup>th</sup> Revised *
32	4 <sup>th</sup> Revised *

As Approved in Case No.

Effective Date: December 20, 2006

Ronald Munn, Director Regulatory and Revenue Assurance  
Budget Phone, Inc.  
1325 Barksdale Blvd., Suite 200  
Bossier City, LA 71111

**SECTION 4 - SERVICE RATES**

4.1 Basic Local Exchange Service Rates<sup>1</sup> (T)

4.1.1 Monthly Recurring Charges

- The monthly service charge includes local phone service only.
- Taxes, which are not included in the quoted rates.
- Any additional features added to the basic service

4.1.2 Rates

(A) Residential Basic Line Service\*

First Line: \$29.95 to 59.95 per month  
Each Additional Line: \$29.95 to 59.95 per month

- \* Monthly charges include local exchange phone service only. A Connection charge applies when a Budget Phone Residential Basic Flat Rate Local Exchange Services subscriber requests connection to one or more customer calling features after the initial establishment of service.

(A) Nonrecurring Charges

- (1) Installation charges apply and will be divided between each of the first three bills after commencement of service. The charges are outlined on the price list.
- (2) A reconnection charge will be applied to each number restored after a disconnection. If disconnected service is reconnected, there will be no guarantee that the same number can be retained. The charges are outlined in the price list.

<sup>1</sup> Basic Local Exchange Service is grandfathered to customers already enrolled in the plan and will no longer be offered after December 20, 2006. (N)

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**Section 7 - Price List**

	Monthly Recurring Charge	Nonrecurring Charge
Service	Maximum	Maximum
Basic Local Exchange Service <sup>1</sup> – per access line (T)	59.95	\$35.00
Budget Phone Basic Plan - per access line in the Cincinnati Bell, SBC, Sprint, and Verizon Exchanges of Ohio	59.95	\$50.00
Number or Name Change (per line)		\$45.00
<b>Features:</b>		
<b>Caller ID</b>	20.00	25.00
Three Way	n/a	n/a
<b>Call Waiting</b>	15.00	25.00
Call Forwarding	n/a	n/a
Call Return	n/a	n/a
<b>Unpublished Number</b>	15.00	25.00
Expanded Area Service	n/a	n/a
Inside Wiring	n/a	n/a
Assignment or transfer or service	n/a	n/a
Reconnection Charge	n/a	\$60.00
Returned Check Charge	n/a	\$50.00
IAF	\$4.10	\$4.10
Directory Assist.		
Local	n/a	\$1.00
National	n/a	\$1.75

<sup>1</sup> Basic Local Exchange Service is grandfathered to customers already enrolled in the plan and will no longer be offered after (N) December 20, 2006.

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**Section 7 - Price List**

	Recurring Actual Charge	Nonrecurring Actual Charge
<b>Service</b>		
Basic Local Exchange Service <sup>1</sup> – per access line (T)	\$39.95	\$30.00**
Budget Phone Basic Plan - per access line In the Cincinnati Bell, SBC, Sprint and Verizon exchanges of Ohio	\$49.95	\$50.00**
Bonus Prepaid Package – per access line In the SBC exchanges of Ohio	\$39.95	\$30.00**
Deluxe Prepaid Package - per access line In the SBC exchanges of Ohio	\$49.95	\$30.00**
In the Verizon exchanges of Ohio	\$59.95	\$50.00**
Deluxe 2000 Package - per access line In the Cincinnati Bell, SBC, Sprint and Verizon exchanges of Ohio	\$10.00	
Number or Name Change (per line)		\$30.00
<b>Features:</b>		
Caller ID	\$10.00	\$15.00*
Three Way	\$5.00	\$15.00*
Call Waiting	\$5.00	\$15.00*
Call Forwarding	\$5.00	\$15.00*
Call Return	\$8.00	\$15.00*
Unpublished Number	\$5.00	\$15.00*
Expanded Area Service	\$20.00	\$15.00*
Inside Wiring	\$4.99	\$15.00*
Assignment or transfer or service		\$39.95
Reconnection Charge		\$25.00
Returned Check Charge		\$25.00
IAF	\$4.10	
Directory Assist.		
Local	n/a	\$1.00
National	n/a	\$1.75

<sup>1</sup> Basic Local Exchange Service is grandfathered to customers already enrolled in the plan and will no longer be offered after December 20, 2006. (N)

\* Charge only if feature is added after service installation

\*\* Nonrecurring Actual Charge (also known as “activation fee”) can be charged to customer over the first three months in the amounts of \$10.00, \$10.00 and \$10.00.

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## **EXHIBIT C**

### **Rationale For Proposed Revised Tariff Changes**

To grandfather Budget Phone's Basic Local Exchange Service since this service will no longer be available to new customers but remains available to customers that are currently subscribing to this service. If the customer terminates it's service, the customer will not be permitted to re-subscribe to this service.

## **Exhibit D**

### **Proposed Customer Notice**

The customer notice will not be sent until reviewed and approved by Commission Staff

\_\_\_\_\_, 2006

Dear Valued Customer,

On November 20, 2006, Budget Phone filed a tariff revision with the Public Utilities Commission of Ohio, requesting rate increases for certain services. These changes, which will become effective on December 20, 2006, will be applied to customers making application for new service and to existing customer accounts.

In compliance with the requirements of the Commission, Budget Phone is sending you notification of the following changes to our plans:

**Basic Local Exchange Service** is grandfathered to customers already enrolled in the plan at the rate of \$39.95. This service and will no longer be offered after December 20, 2006. If a customer ever terminates this service that customer will not be permitted to re-subscribe to that service.

As always, Budget Phone encourages you to contact our Customer Service Department at 888-424-5588, with any questions.

Thank you,

Budget Phone, Inc.