

FILE

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March 30, 2007

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PUCO

VIA OVERNIGHT MAIL

Chief of Docketing Division
Public Utilities Commission
180 East Broad Street, 3rd Floor
Columbus, OH 43215-3793

07-360-TP-ZTA

RE: **ZTA Filing**
McLeodUSA Telecommunications Services, Inc. ("McLeodUSA")
90-9087-TP-TRF

Dear Docketing Division:

Enclosed please find an original and ten copies of revised pages to McLeodUSA Telecommunications Services, Inc.'s ("McLeodUSA") Telephone Tariff No. 2. In this filing McLeodUSA is removing the Busy Line Verify and Busy Line Verify Interrupt (Sheet No. 134); Increasing the Local DA (Sheet No. 132); and modifying the text for Non-Local DA (Sheet No. 132). The Check Sheets (Sheet Nos. 2 and 3) were modified accordingly.

Enclosed you will find the following Exhibits:

- 1) Exhibit A – current approved tariff pages;
- 2) Exhibit B – proposed replacement tariff pages;
- 3) Exhibit C – description and rationale; and
- 4) Exhibit D – copy of notice and affidavit attesting to the distribution of notice.

This filing has an Issue Date of April 2, 2007 and Effective Date of April 12, 2007. Please file stamp the extra copy and return it to me in the enclosed, self-addressed, stamped envelope. If you have any questions, please contact me at jredman-carter@mcleodusa.com or (319) 790-2250.

Sincerely,

Julia Redman-Carter
Regulatory Analyst

Enclosures

This is to certify that the images reproduced are an accurate and complete reproduction of a document delivered in the regular course of business.
Technician SB Date Processed 4-2-07

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 McLeodUSA Telecommunications)

Services Inc. is removing BLV and BLVI and increasing Local DA)
within the range. PUCO Tariff No. 2 - Telephone)

Case No. 07 - 360 - TP - ZTA

Name of Registrant(s) McLeodUSA Telecommunications Services, Inc.

DBA(s) of Registrant(s) McLeodUSATelecommunications Services, Inc.

Address of Registrant(s) One Martha's Way, Hiawatha, IA 52233

Company Web Address www.mcleodusa.com

Regulatory Contact Person(s) William A. Haas Phone (319) 790-7295 Fax (319) 790-7901

Regulatory Contact Person's Email Address william.haas@mcleodusa.com

Contact Person for Annual Report William A. Haas Phone (319) 790-7295

Consumer Contact Information Christine C. Johnson Phone (319) 790-6702

Date 03/30/07 TRF Docket No. - - - - CT-TRF or 90 - 9087 - 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)
- ☐ (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 (RCC) 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 Notification 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)
Docket No. _____ - TP - CTR (Use same CTR number throughout calendar year)

CTR

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 an
<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 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"/>	[3-5,7,10-11,13]	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"/>	[1-2,4-7,9,12-13,16,18-23,25]	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 type="checkbox"/> residence; or <input checked="" 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 <u>has been</u> will be utilized: <input type="checkbox"/> direct mail; <input type="checkbox"/> bill insert; <input checked="" type="checkbox"/> bill notation or <input type="checkbox"/> electronic mail. NO <input type="checkbox"/> Tier 1 price list increases must be within an approved range of rates. <input type="checkbox"/> SLF Filings – Do NOT send customer notice until it has been reviewed and approved by Commission Staff
<input checked="" type="checkbox"/>	[2,4-5,9a(v), 9b, 10,12-13,16, 18(b-c),20-21]	Copy of real time notice which <u>has been</u> will be provided to customers. NOTE: SLF Filings – Do NOT send customer notice until it has been reviewed and approved by Commission Staff
<input checked="" 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 Se
<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 CLECs, List of Ohio Exchanges the applicant intends to serve (Use spreadsheet from: http://www.puc.state.oh.us/puco/forms/form.cfm?doc_id=357).
<input type="checkbox"/>	[1,3a-b,3d,7, 10,13, 23]	Maps depicting the proposed serving and calling areas of the applicant. If Mirroring Large ILEC exchanges for both serving area and local calling areas: • Serving area 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. • Local calling areas 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. If Self-defining serving area and/or local calling area as an area other than that of the established ILEC exchange(s): • Serving Area must be clearly reflected on an Ohio map attached to the tariffs, and textually described in tariffs by listing the involved exchanges. • Local Calling Areas must be described in the tariff through textual delineation and clear maps. Maps for self-defined serving and local calling areas are required to be traced on United States Geological Survey topograph 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:

Christine C. Johnson; Manager; (319)790-6702; McLeodUSA, One Martha's Way, Hiawatha, IA 52233

William A. Haas; Associate General Counsel; (319)790-7295; McLeodUSA, One Martha's Way, Hiawatha, IA 52233

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:

Julia Redman-Carter; Manager; (319)790-2250; McLeodUSA, One Martha's Way, Hiawatha, IA 52233

William A. Haas; Associate General Counsel; (319)790-7295; McLeodUSA, One Martha's Way, Hiawatha, IA 52233

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 Telecommunication or other. (If needed, use a separate sheet and check here: ☐)

AFFIDAVIT

Compliance with Commission Rules and Service Standards

I am an officer of the applicant corporation, McLeodUSA Telecommunications Services, Inc., and am authorized to make this statement 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 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, supersede 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 5/30/07 at Hiawatha, IA
(Date) (Location)

William A. Haas 3-30-07
(Signature and Title) (Date)
VP & Deputy General Counsel

** 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, William A. Haas 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.

William A. Haas 3-30-07
(Signature and Title) (Date)
VP & Deputy General Counsel

**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.*

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

CHECK SHEET

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

<u>Sheet</u>	<u>Revision</u>	<u>Sheet</u>	<u>Revision</u>	<u>Sheet</u>	<u>Revision</u>
1	1 st Revised	33	1 st Revised	63	1 st Revised
2	50 th Revised*	34	1 st Revised	64	1 st Revised
3	48 th Revised*	35	Original	64.1	Original
4	7 th Revised	36	1 st Revised	65	6 th Revised
5	2 nd Revised	37	Original	65.01	1 st Revised
6	Original	38	2 nd Revised*	65.1	1 st Revised
7	Original	39	Original	65.2	Original
8	Original	40	Original	66	4 th Revised
9	Original	41	1 st Revised	67	1 st Revised
10	Original	42	Original	68	Original
11	1 st Revised	43	Original	69	3 rd Revised
12	5 th Revised	44	Original	70	3 rd Revised*
13	6 th Revised	45	Original	71	3 rd Revised
14	7 th Revised	46	Original	72	5 th Revised
14.1	2 nd Revised	47	Original	73	Original
15	7 th Revised	48	Original	74	1 st Revised
16	Original	49	Original	75	1 st Revised
17	Original	50	Original	76	2 nd Revised
18	Original	51	3 rd Revised	77	Original
19	Original	52	3 rd Revised	78	Original
20	Original	52.1	1 st Revised	79	1 st Revised
21	Original	52.2	Original	80	2 nd Revised
22	1 st Revised	53	7 th Revised	81	3 rd Revised
23	1 st Revised	53.1	1 st Revised	82	1 st Revised
24	Original	54	2 nd Revised	83	2 nd Revised
25	Original	55	Original	83.1	2 nd Revised
26	Original	56	Original	83.2	2 nd Revised
27	Original	57	1 st Revised	83.3	2 nd Revised
28	Original	58	1 st Revised	83.4	Original
29	Original	59	Original	83.5	Original
30	Original	60	Original	84	3 rd Revised
31	Original	61	Original	84.1	2 nd Revised
32	Original	62	Original	85	Original

Issued: December 27, 2006

Effective: February 27, 2007

BY: William A. Haas
Vice President and Deputy General Counsel
One Martha's Way, P.O. Box 3177
Hiawatha, Iowa 52233

Issued under authority of the Public Utilities Commission of Ohio, dated March 16, 2000, in Case No. 99-972-TP-ACE.

CHECK SHEET (cont'd)

<u>Sheet</u>	<u>Revision</u>	<u>Sheet</u>	<u>Revision</u>	<u>Sheet</u>	<u>Revision</u>
85.1	Original	119	5 th Revised	130.8	Original
86	Original	119.1	1 st Revised	130.9	Original
87	Original	120	3 rd Revised	130.10	Original
88	Original	120.01	Original	130.11	Original
89	Original	120.1	2 nd Revised	130.12	Original
90	1 st Revised	120.2	3 rd Revised	130.13	Original
91	Original	120.3	2 nd Revised	130.14	Original
92	Original	120.3A	1 st Revised	131	Original
93	1 st Revised	120.3B	Original	132	2 nd Revised
94	Original	120.3C	Original	133	1 st Revised
95	Original	120.3D	Original	133.1	Original
96	Original	120.4	Original	133.2	Original
97	1 st Revised	120.5	1 st Revised	134	3 rd Revised
98	1 st Revised	120.6	Original	135	3 rd Revised
99	1 st Revised	121	4 th Revised	136	Original
100	2 nd Revised	121.1	4 th Revised	137	Original
101	3 rd Revised	121.1A	2 nd Revised	138	Original
102	Original	121.1B	Original	139	Original
103	Original	121.1C	1 st Revised	140	Original
104	Original	121.1D	1 st Revised	140.1	10 th Revised
104.1	Original	122	1 st Revised	140.2	13 th Revised
105	4 th Revised	122.1	2 nd Revised	140.2.1	3 rd Revised
106	3 rd Revised	123	Original	140.3	7 th Revised
106.1	1 st Revised*	124	Original	140.4	10 th Revised
107	7 th Revised	125	Original	140.5	7 th Revised
108	9 th Revised	126	Original	140.6	8 th Revised
109	Original	127	Original	140.7	5 th Revised
110	6 th Revised	128	Original	140.8	2 nd Revised
111	6 th Revised	129	Original	140.9	2 nd Revised
112	7 th Revised	130	Original	141	8 th Revised
113	4 th Revised	130.1	1 st Revised	142	6 th Revised
114	1 st Revised	130.2	2 nd Revised	143	8 th Revised
115	Original	130.3	1 st Revised	144	8 th Revised
116	4 th Revised	130.5	Original	144.1	4 th Revised
116.1	1 st Revised	130.6	2 nd Revised	144.2	4 th Revised
117	5 th Revised	130.7	4 th Revised	144.3	5 th Revised
118	5 th Revised	130.7.1	Original	144.4	5 th Revised

Issued: December 27, 2006

Effective: February 27, 2007

BY: William A. Haas
Vice President and Deputy General Counsel
One Martha's Way, P.O. Box 3177
Hiawatha, Iowa 52233

Issued under authority of the Public Utilities Commission of Ohio, dated March 16, 2000, in Case No. 99-972-TP-ACE.

4.0 Rate Schedules (cont'd)4.3 Rate Tables (cont'd)4.3.9 Rate Table 9: Directory Assistance Service

	<u>Business</u>	<u>Residential (N)</u>
	<u>Min-Max</u>	<u>Min-Max (N)</u>
Per Call - Local	\$0.20-\$2.30	\$0.20-\$2.30 (N)
Per Call - Non-Local (T)	\$0.20-\$2.30	\$0.20-\$2.30 (N)

Issued: September 8, 2003

Effective: July 30, 2003

BY: William A. Haas
Vice President and Deputy General Counsel
One Martha's Way, P.O. Box 3177
Hiawatha, Iowa 52233

Issued under authority of the Public Utilities Commission of Ohio, dated March 16, 2000, in Case No. 99-972-TP-ACE.

5.0 Rates and Charges - Price List (cont'd)5.3 Rate Tables (cont'd)5.3.9 Rate Table 9: Directory Assistance Service

	<u>Business</u>	<u>Residential</u>	
Local Directory Assistance	\$1.25	\$1.25	(I)(I)
Non-Local Directory Assistance	\$1.99	\$1.99	(I)(I)

Issued: April 8, 2005

Effective: April 8, 2005

BY: David R. Conn
Vice President and Deputy General Counsel
6400 C Street SW, P.O. Box 3177
Cedar Rapids, Iowa 52406

Issued under authority of the Public Utilities Commission of Ohio, dated March 16, 2000, in Case No. 99-972-TP-ACE.

5.0 Rates and Charges - Price List (cont'd)**5.3 Rate Tables (cont'd)****5.3.11 Rate Table 11: Operator Services**• **Intrastate Usage Rates - Business and Residential****Rate Plan 1****Per Minute \$0.36****(I)(T)****Rate Plan 2**

<u>Mileage</u>	<u>Initial Minute</u>	<u>Additional Minute</u>
1 - 10 miles \$0.12	\$0.06	
11 - 22 miles	\$0.16	\$0.10
23 + miles \$0.16	\$0.10	

Rate Plan 3

<u>Mileage</u>	<u>Initial Minute</u>	<u>Additional Minute</u>
1 - 10 miles \$0.12	\$0.06	
11 - 22 miles	\$0.16	\$0.10
23 + miles \$0.16	\$0.10	

Rate Plan 2 and Rate Plan 3 are only available to customers that sign an Operator Services contract with McLeodUSA

• **Additional Charges - Per Request**

	<u>Business</u>	<u>Residential</u>	
Person-to-Person	\$2.75	\$2.75	(R)(R)
Billed to a Third Number	\$2.66	\$2.66	(I)(I)
Collect Calls	\$2.50	\$2.50	(I)(I)
Calling Card Assistance			
Automated Assistance	\$2.75	\$2.75	(I)(I)
Non-Automated Assistance	\$2.50	\$2.50	(I)(I)
Sent-Paid/Operator Assisted	\$2.50	\$2.50	(I)(I)
Busy Line Verification	\$1.20	\$0.95	
Busy Line Verify and Interrupt	\$1.30	\$1.30	

Issued: February 14, 2007

Effective: December 15, 2006

BY: William A. Haas
Vice President and Deputy General Counsel
One Martha's Way, P.O. Box 3177
Hiawatha, Iowa 52233

Issued under authority of the Public Utilities Commission of Ohio, dated March 16, 2000, in Case No. 99-972-TP-ACE.

EXHIBIT B

CHECK SHEET

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

<u>Sheet</u>	<u>Revision</u>	<u>Sheet</u>	<u>Revision</u>	<u>Sheet</u>	<u>Revision</u>
1	1 st Revised	33	1 st Revised	63	1 st Revised
2	51 st Revised*	34	1 st Revised	64	1 st Revised
3	49 th Revised*	35	Original	64.1	Original
4	7 th Revised	36	1 st Revised	65	6 th Revised
5	2 nd Revised	37	Original	65.01	1 st Revised
6	Original	38	2 nd Revised	65.1	1 st Revised
7	Original	39	Original	65.2	Original
8	Original	40	Original	66	4 th Revised
9	Original	41	1 st Revised	67	1 st Revised
10	Original	42	Original	68	Original
11	1 st Revised	43	Original	69	3 rd Revised
12	5 th Revised	44	Original	70	3 rd Revised
13	6 th Revised	45	Original	71	3 rd Revised
14	7 th Revised	46	Original	72	5 th Revised
14.1	2 nd Revised	47	Original	73	Original
15	7 th Revised	48	Original	74	1 st Revised
16	Original	49	Original	75	1 st Revised
17	Original	50	Original	76	2 nd Revised
18	Original	51	3 rd Revised	77	Original
19	Original	52	3 rd Revised	78	Original
20	Original	52.1	1 st Revised	79	1 st Revised
21	Original	52.2	Original	80	2 nd Revised
22	1 st Revised	53	7 th Revised	81	3 rd Revised
23	1 st Revised	53.1	1 st Revised	82	1 st Revised
24	Original	54	2 nd Revised	83	2 nd Revised
25	Original	55	Original	83.1	2 nd Revised
26	Original	56	Original	83.2	2 nd Revised
27	Original	57	1 st Revised	83.3	2 nd Revised
28	Original	58	1 st Revised	83.4	Original
29	Original	59	Original	83.5	Original
30	Original	60	Original	84	3 rd Revised
31	Original	61	Original	84.1	2 nd Revised
32	Original	62	Original	85	Original

Issued: April 2, 2007

Effective: April 12, 2007

BY: William A. Haas
Vice President and Deputy General Counsel
One Martha's Way, P.O. Box 3177
Hiawatha, Iowa 52233

Issued under authority of the Public Utilities Commission of Ohio, dated March 16, 2000, in Case No. 99-972-TP-ACE.

CHECK SHEET (cont'd)

<u>Sheet</u>	<u>Revision</u>	<u>Sheet</u>	<u>Revision</u>	<u>Sheet</u>	<u>Revision</u>
85.1	Original	119	5 th Revised	130.8	Original
86	Original	119.1	1 st Revised	130.9	Original
87	Original	120	3 rd Revised	130.10	Original
88	Original	120.01	Original	130.11	Original
89	Original	120.1	2 nd Revised	130.12	Original
90	1 st Revised	120.2	3 rd Revised	130.13	Original
91	Original	120.3	2 nd Revised	130.14	Original
92	Original	120.3A	1 st Revised	131	Original
93	1 st Revised	120.3B	Original	132	3 rd Revised*
94	Original	120.3C	Original	133	1 st Revised
95	Original	120.3D	Original	133.1	Original
96	Original	120.4	Original	133.2	Original
97	1 st Revised	120.5	1 st Revised	134	4 th Revised*
98	1 st Revised	120.6	Original	135	3 rd Revised
99	1 st Revised	121	4 th Revised	136	Original
100	2 nd Revised	121.1	4 th Revised	137	Original
101	3 rd Revised	121.1A	2 nd Revised	138	Original
102	Original	121.1B	Original	139	Original
103	Original	121.1C	1 st Revised	140	Original
104	Original	121.1D	1 st Revised	140.1	10 th Revised
104.1	Original	122	1 st Revised	140.2	13 th Revised
105	4 th Revised	122.1	2 nd Revised	140.2.1	3 rd Revised
106	3 rd Revised	123	Original	140.3	7 th Revised
106.1	1 st Revised	124	Original	140.4	10 th Revised
107	7 th Revised	125	Original	140.5	7 th Revised
108	9 th Revised	126	Original	140.6	8 th Revised
109	Original	127	Original	140.7	5 th Revised
110	6 th Revised	128	Original	140.8	2 nd Revised
111	6 th Revised	129	Original	140.9	2 nd Revised
112	7 th Revised	130	Original	141	8 th Revised
113	4 th Revised	130.1	1 st Revised	142	6 th Revised
114	1 st Revised	130.2	2 nd Revised	143	8 th Revised
115	Original	130.3	1 st Revised	144	8 th Revised
116	4 th Revised	130.5	Original	144.1	4 th Revised
116.1	1 st Revised	130.6	2 nd Revised	144.2	4 th Revised
117	5 th Revised	130.7	4 th Revised	144.3	5 th Revised
118	5 th Revised	130.7.1	Original	144.4	5 th Revised

Issued: April 2, 2007

Effective: April 12, 2007

BY: William A. Haas
Vice President and Deputy General Counsel
One Martha's Way, P.O. Box 3177
Hiawatha, Iowa 52233

Issued under authority of the Public Utilities Commission of Ohio, dated March 16, 2000, in Case No. 99-972-TP-ACE.

5.0 Rates and Charges - Price List (cont'd)5.3 Rate Tables (cont'd)5.3.9 Rate Table 9: Directory Assistance Service

	<u>Business</u>	<u>Residential</u>	
Local Directory Assistance	\$1.75	\$1.75	(I)(I)
Non-Local Directory Assistance (Intrastate DA)	\$1.99	\$1.99	(T)

Issued: April 2, 2007

Effective: April 12, 2007

BY: William A. Haas
Vice President and Deputy General Counsel
One Martha's Way, P.O. Box 3177
Hiawatha, Iowa 52233

Issued under authority of the Public Utilities Commission of Ohio, dated March 16, 2000, in Case No. 99-972-TP-ACE.

5.0 Rates and Charges - Price List (cont'd)5.3 Rate Tables (cont'd)5.3.11 Rate Table 11: Operator Services• Intrastate Usage Rates - Business and Residential**Rate Plan 1****Per Minute \$0.36****Rate Plan 2**

<u>Mileage</u>	<u>Initial Minute</u>	<u>Additional Minute</u>
1 - 10 miles \$0.12	\$0.06	
11 - 22 miles	\$0.16	\$0.10
23 + miles \$0.16	\$0.10	

Rate Plan 3

<u>Mileage</u>	<u>Initial Minute</u>	<u>Additional Minute</u>
1 - 10 miles \$0.12	\$0.06	
11 - 22 miles	\$0.16	\$0.10
23 + miles \$0.16	\$0.10	

Rate Plan 2 and Rate Plan 3 are only available to customers that sign an Operator Services contract with McLeodUSA

• Additional Charges - Per Request

	<u>Business</u>	<u>Residential</u>
Person-to-Person	\$2.75	\$2.75
Billed to a Third Number	\$2.66	\$2.66
Collect Calls	\$2.50	\$2.50
Calling Card Assistance		
Automated Assistance	\$2.75	\$2.75
Non-Automated Assistance	\$2.50	\$2.50
Sent-Paid/Operator Assisted	\$2.50	\$2.50

(D)
(D)

Issued: April 2, 2007

Effective: April 12, 2007

BY: William A. Haas
Vice President and Deputy General Counsel
One Martha's Way, P.O. Box 3177
Hiawatha, Iowa 52233

EXHIBIT C

McLeodUSA Telecommunications Services, Inc. ("McLeodUSA")

Description:

Removing Busy Line Verify and Busy Line Verify Interrupt:

Busy Line Verify and Busy Line Verify Interrupt are optional features charged on a per use basis. McLeodUSA does not offer these services. Accordingly, these are being removed from the tariff.

Modifying the text for Non-Local Directory Assistance:

Non-Local Directory Assistance is being modified to clarify that this is intrastate DA as opposed to National DA, which is interstate DA. This is just clarification for customers. As an FYI, National DA is addressed in McLeodUSA Interstate Tariff.

Increasing Local Directory Assistance:

McLeodUSA is increasing the Local Directory Assistance for both business and residential customers to \$1.75, which is within the Minimum-Maximum range in our tariff. (See Section 4.3.9, on Sheet No. 98, which is included in Exhibit A for your convenience. Please note that there are no changes being made to this sheet. It is only included for reference.)

Also, McLeodUSA received approval to increase, after providing appropriate customer notice, the Local DA rate from \$0.45 to \$1.25 effective April 8, 2005. However, due to an oversight on our part, McLeodUSA did not implement the Local DA rate increase. Accordingly, the customer notice, included in Exhibit D of this filing), identifies the Local DA increase from \$0.45 to \$1.75 instead of \$1.25 to \$1.75 as it is reflected in the tariff. Though, McLeodUSA is planning to implement the \$1.75 for local calls as of the effective of this tariff, we will not be collecting any missed revenue from the past.

Rationale:

McLeodUSA's rationale for the changes noted above are to help McLeodUSA be competitive within the market place.

EXHIBIT D

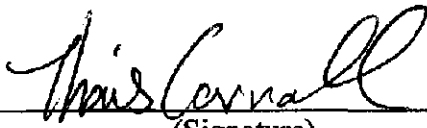
State of Iowa

County of Linn

AFFIDAVIT OF THAIS CARNALL

I, Thais Carnall, being duly sworn on oath, do hereby verify that the attached notice for the proposed Local Directory Assistance rate increase was distributed via bill message beginning on February 16, 2007 to all potentially impacted business and residential customers in the state of Ohio.

Further Affiant sayeth not.


(Signature)

Subscribed and sworn to before me this 13th day of March, 2007.




Notary Public

Bill Message

Effective April 13, 2007, the rate for Local Directory Assistance in Ohio will increase from \$0.45 to \$1.75 per use.