

NE
FILE



Regulatory Department

AT&T Long Distance
5130 Hacienda Dr., 3rd Fl. South
Dublin, CA 94568

07-1087-TP-ZTA
12

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2007 SEP 28 AM 10:40

September 27, 2007

PUCO

Ms. Reneé Jenkins
Director of Administration
Public Utilities Commission of Ohio
180 East Broad Street
Columbus, Ohio 43215-3793

Re: Advice Letter 195 - TRF Docket No. XXX-TP-ZTA
Revisions to PUCO No. 7, Competitive Interexchange Telecommunications Services
SBC Long Distance, LLC, d/b/a SBC Long Distance, d/b/a AT&T Long Distance

Dear Ms. Jenkins:

Enclosed is an original and ten (10) copies of revisions to PUCO No. 7 of SBC Long Distance, LLC d/b/a SBC Long Distance, d/b/a AT&T Long Distance. The following documents are enclosed: (1) Telecommunications Application Form; (2) Exhibit A, Superseded Tariff and Price List Pages; (3) Exhibit B, Issued and Revised Tariff; and (4) Exhibit C, Description and Rationale for Tariff Filing. The tariff pages have an issue date of September 28, 2007 and an effective date of October 1, 2007.

So that our records will be complete, please date-stamp the extra copy of this transmittal letter and return it in the envelope provided. If there are any questions regarding this filing, please contact Joann Rice, SBC Long Distance, LLC, 5130 Hacienda Dr., 3rd Floor, South, Dublin, CA 94568. I can be reached via telephone at (925) 803-6214 or via email at jr2136@att.com.

Thank you for your assistance in this matter.

Sincerely,

Joann Rice
Area, Manager, Regulatory

Enclosures

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.
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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 SBC Long Distance, LLC) Docket No. 07 ¹⁰⁸⁷~~1060~~ -TP- ZTA
Change the terms and conditions and increase rates on several Consumer Plans

Name of Registrant(s) SBC Long Distance, LLC

DBA(s) of Registrant(s) d/b/a SBC Long Distance, d/b/a AT&T Long Distance

Address of Registrant(s) 5130 Hacienda Dr., Room 3S300L, Dublin, CA 94568

Company Web Address www.att.com

Regulatory Contact Person(s) Joann Rice Phone (925) 803-6214 Fax (707) 435-6882

Regulatory Contact Person's Email Address jr2136@att.com

Contact Person for Annual Report Amy Berlin Phone (925) 803-6204

Consumer Contact Information Donna Daniele Phone (925) 803-6222

Date September 27, 2007 TRF Docket No. _____ - _____ CT-TRF or 90 - 9146 - 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 (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)

- X 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)
 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 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 checked="" type="checkbox"/> residence; or <input type="checkbox"/> both. Also indicate whether it is a <input checked="" type="checkbox"/> switched or <input type="checkbox"/> dedicated service. Include this information in either the cover letter or Exhibit C.
<input 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 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 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 has been/will be provided to customers. NOTE: SLF Filings – Do NOT send customer notice until it has been 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 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 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:

Donna Daniele, Associate Director Regulatory, 925-803-6222, 5130 Hacienda Dr., Dublin, CA 94568

Ann Kwong, Project Administrator, 925-803-6206, 5130 Hacienda Dr., Dublin, CA 94568

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:

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

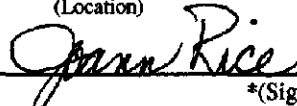
I am an officer of the applicant corporation, SBC Long Distance, LLC d/b/a SBC Long Distance, d/b/a AT&T Long Distance, and am authorized to

(Name of Company)

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 September 27, 2007 at Dublin, CA
(Date) (Location)



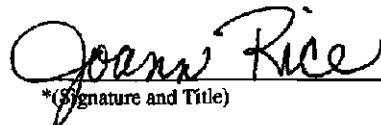
Area Manager 9/27/07

*(Signature and Title) (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, Joann Rice 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.



Area Manager

09/27/2007

*(Signature and Title)

(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.***

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 TARIFF AND PRICE LIST PAGES

SECTION 4 - PRICE LIST

4.4 Outbound Services-Switched Access (continued)

4.4.3 Consumer Outbound Services (continued)

(AE) Nationwide Calling Services, aka JustCallSM (continued) T

.5 Rate Options (continued) T

.1 JustCallSM 60 Preferred¹ T

The MRC is \$2.00 per BTN for a 60 minute block of time as defined in Section 3.4.3 (AE).5.1 of this Tariff. The rate is \$0.07 T
per minute for all outbound intrastate calls completed after the 60
minute block of time has been used.

.m JustCallSM 200 Preferred¹ T

The MRC is \$6.00 per BTN for a 200 minute block of time as defined in Section 3.4.3 (AE).5.m of this Tariff. The rate is T
\$0.07 per minute for all outbound intrastate calls completed after
the 200 minute block of time has been used.

.n JustCallSM 400 Preferred¹ T

The MRC is \$10.00 per BTN for a 400 minute block of time as defined in Section 3.4.3 (AE).5.n of this Tariff. The rate is \$0.07 T
per minute for all outbound intrastate calls completed after the
400 minute block of time has been used.

¹ This Service is no longer available to new Customers or existing Customers at new locations effective January 16, 2006.

EXHIBIT B

ISSUED/REVISED TARIFF AND PRICE LIST PAGES

SECTION 4 - PRICE LIST

4.4 Outbound Services-Switched Access (continued)

4.4.3 Consumer Outbound Services (continued)

(AE) Nationwide Calling Services, aka JustCallSM (continued)

.5 Rate Options (continued)

.l JustCallSM 60 Preferred¹

The MRC is \$3.00 per BTN for a 60 minute block of time as defined in Section 3.4.3 (AE).5.l of this Tariff. The rate is \$0.07 per minute for all outbound intrastate calls completed after the 60 minute block of time has been used. I

.m JustCallSM 200 Preferred¹

The MRC is \$8.00 per BTN for a 200 minute block of time as defined in Section 3.4.3 (AE).5.m of this Tariff. The rate is \$0.07 per minute for all outbound intrastate calls completed after the 200 minute block of time has been used. I

.n JustCallSM 400 Preferred¹

The MRC is \$12.00 per BTN for a 400 minute block of time as defined in Section 3.4.3 (AE).5.n of this Tariff. The rate is \$0.07 per minute for all outbound intrastate calls completed after the 400 minute block of time has been used. I

¹ This Service is no longer available to new Customers or existing Customers at new locations effective January 16, 2006.

EXHIBIT C

DESCRIPTION OF AND RATIONALE FOR PROPOSED TARIFF CHANGES

The proposed tariff revision reflects a change that resulted from detailed analysis and experience in the long distance market place in other states where SBC Long Distance, LLC operates. The changes being made as part of this tariff filing are changes that SBC Long Distance, LLC has recently made to its tariffs in other states where the company operates. These rates are available to Customers that utilize switched access to reach the long distance network. The purpose of this filing is to increase rates on three Consumer calling plans..

EXHIBIT D

CUSTOMER NOTICES

Your Rates, Terms or Services Have Changed:
Effective September 12, 2007, the Just Call 60 Preferred calling plan monthly recurring charge will increase from \$2.00 to \$3.00. The domestic direct-dialed per minute rate will remain \$0.09 for calls beyond the initial 60 minutes. This plan is no longer offered to new customers, but you may keep the plan until it is discontinued entirely or until you move or change your service. If you move or change your service, you must select another long distance price plan. For more information, or to discuss other long distance calling plans, please refer to the phone number on the front of your bill. Thank you for choosing AT&T Long Distance.

Your Rates, Terms or Services Have Changed:
Effective September 12, 2007, the Just Call 200 Preferred calling plan monthly recurring charge will increase from \$6.00 to \$8.00. The domestic direct-dialed per minute rate will remain \$0.09 for calls beyond the initial 200 minutes. This plan is no longer offered to new customers, but you may keep the plan until it is discontinued entirely or until you move or change your service. If you move or change your service, you must select another long distance price plan. For more information, or to discuss other long distance calling plans, please refer to the phone number on the front of your bill. Thank you for choosing AT&T Long Distance.

Your Rates, Terms or Services Have Changed:
Effective September 12, 2007, the Just Call 400 Preferred calling plan monthly recurring charge will increase from \$10.00 to \$12.00. The domestic direct-dialed per minute rate will remain \$0.09 for calls beyond the initial 400 minutes. This plan is no longer offered to new customers, but you may keep the plan until it is discontinued entirely or until you move or change your service. If you move or change your service, you must select another long distance price plan. For more information, or to discuss other long distance calling plans, please refer to the phone number on the front of your bill. Thank you for choosing AT&T Long Distance.

EXHIBIT E
AFFIDAVIT

Customer Notice of Rule Change

I am an officer of the applicant corporation, SBC Long Distance, LLC, and am authorized to make this statement on its behalf. I attest that the customer notices described in Exhibit E of this Application have been provided to Ohio customers as a bill message.

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

Executed on September 27, 2007 at Dublin, California.

_____, Area Manager, Regulatory

Joann Rice