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FILE

12
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2004 JAN -2 PM 2:19

PUCO

December 31, 2003

04-02-TP-ZTA

90-9030-TP-TR7

Public Utilities Commission of Ohio
Attention: Docketing Division
180 East Broad Street
Columbus, OH 43215-3793

Re: Talk America Inc.'s PUCO Tariff No. 1 Application for Tier 2 New End User Services

Dear Commission Secretary:

Enclosed please find an original and ten (10) copies of Talk America Inc.'s Application for Tier 2 New End User Services in its PUCO Tariff No. 1. These revisions add a new residential, switched service offering, Ohio 200 Plan. These are being filed with an Effective date of January 5, 2004. This tariff filing is comprised of the following tariff page revisions:

Tariff Sheet

Cancels Tariff Sheet

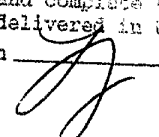
19th Revised Sheet 2 18th Revised Sheet 2
Original 34.0.5
1st Revised Sheet 42.1.3 Original Sheet 42.1.3

Please date-stamp the enclosed duplicate of this transmittal letter and return in the enclosed postage-paid self-addressed stamped envelope. Please feel free to contact me at 202-955-9645 if you have any questions or concerns about this mailing.

Sincerely yours,

Kelly Faul
Sr. Consultant

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
Technician  Date Processed 1-2-04

KDWGP/FAULK/2704.10

The Public Utilities Commission of Ohio
TELECOMMUNICATIONS APPLICATION FORM
(Effective: 6/19/2003)
(Pursuant to Case Nos. 99-998-TP-COI and 99-563-TP-COI)

RECEIVED-DOCKETING DIV
2004 JAN -2 PM 2:19

In the Matter of the Application of New Price List for _____
_ Tier 2 End User Services _____
to _Talk America Inc. PUCO Tariff No. 1 _____

Case No. _____ - _____ **TPUCO**

Name of Registrant(s) _Talk America Inc. _____
Address of Registrant(s) _6805 Route 202, New Hope, PA 18938 _____
Company Web Address _www.talk.com _____
Regulatory Contact Person(s) _Sharon Thomas _____ Phone _407-313-1353 _ Fax _407-658-6312 _____
Regulatory Contact Person's Email Address _sthamas@talk.com _____
Contact Person for Annual Report _Sharon Thomas _____ Phone _407-313-1353 _____
Consumer Contact Information _Customer Service _____ Phone _800-291-9699 _____
Date October 31, 2003 _____ TRF Docket No. _90 _____ - _9030 _____ -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)
- ☒ 18 (ZTA) Tariff Application Involving only Tier 2 Services
- ☒ 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, 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, at a minimum, a pro forma income statement and a balance sheet. If the pro forma income statement is based upon a certain geographical area(s) or information in other jurisdictions, please indicate.
<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), 5.10,16,18(b-c), 20-21]	Specify which notice procedure has been utilized: <input type="checkbox"/> direct mail; <input type="checkbox"/> bill insert; <input type="checkbox"/> bill notation or <input type="checkbox"/> electronic mail. NOTE: Tier 1 price list increases must be within an approved range of rates.
<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.
<input type="checkbox"/>	[1.2.5.9a(v),11-13, 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 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.

- V. 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:

AFFIDAVIT

Minimum Telephone Service Standards

I am an Authorized Agent of the applicant corporation, Talk America Inc., and am authorized to make this statement on its behalf. I attest that these tariffs comply with the Minimum Telephone Service Standards (MTSS) for the state of Ohio. I understand that 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 12-31-03 at Washington, DC
(Date) (Location)

Kelly Faul, The KDW Group 12-31-03
*(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, Kelly Faul 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.

Kelly Faul, The KDW Group 12-31-03
*(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

TALK AMERICA INC.

PUCO Tariff No. 1
Eighteenth Revised Sheet 2
Cancels Seventeenth Revised Sheet 2

CHECK SHEET

All sheets of this tariff 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 of the bottom of this page.

SHEET	REVISION		SHEET	REVISION	
1	Original		33	Original	
2	Eighteenth	*	34	Third	
3	Original		34.0.1	Original	
4	Original		34.0.2	Original	
5	Original		34.0.3	Original	
6	Original		34.0.4	Original	
7	Original		34.1	Original	
8	Original		34.2	Third	*
9	Original		34.2.1	Third	*
10	Original		34.2.2	First	*
11	Original		34.3	Original	
12	Original		34.4	Original	
13	Original		34.5	Original	
14	Original		35	First	
15	Original		36	Original	
16	Original		37	First	
17	Original		38	First	
18	Original		39	First	
18.1	Original		40	Original	
18.2	Original		41	Original	
18.3	Original		42	First	
19	Original		42.1	Third	
20	Original		42.1.1	Second	
21	Original		42.1.2	Original	
22	First		42.1.3	Original	
23	Original		42.2	Original	
24	Original		42.3	Third	*
25	Original		42.3.1	Second	*
26	Original		42.3.2	Original	*
27	Original		42.4	Original	
28	Original		42.5	Original	
29	First		42.6	Original	
30	Original		43	Original	
31	Original		44	Original	
32	Original		45	Original	
			46	Original	

* - indicates those sheets includes with this filing

Issued: December 15, 2003

Effective: December 15, 2003

Issued By: Aloysius T. Lawn, IV, Executive Vice President
6805 Route 202
New Hope, Pennsylvania 18938

OHO0219

SECTION 4 - CURRENT RATES, CON'T.

4.14 Bundled Long Distance Service, Con't.

4.14.11 Bundle No. XIV (Talk Unlimited Plus Plan)

Monthly Long Distance Charge:

Standard Option	\$3.95
Premium Option	\$6.95

Rate Per Minute

InterLATA	\$0.059
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Travel Card

Usage Per Minute See Section 4.18

Service Charge Per Call See Section 4.18

(N)

(N)

4.14.12 Basic Additional Line for Bundled Plans

	<u>InterLATA</u>	<u>IntraLATA</u>
Rate Per Minute	\$0.059	\$0.059

(N)

Travel Card

Usage Per Minute See Section 4.18

Service Charge Per Call See Section 4.18

(N)

Issued: July 2, 2003Effective: July 2, 2003

Issued By: Aloysius T. Lawn, IV, Executive Vice PresidentOHO0219
6805 Route 202
New Hope, Pennsylvania 18938

EXHIBIT B

TALK AMERICA INC.

PUCO Tariff No. 1
Nineteenth Revised Sheet 2
Cancels Eighteenth Revised Sheet 2

CHECK SHEET

All sheets of this tariff 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 of the bottom of this page.

SHEET	REVISION		SHEET	REVISION
1	Original		33	Original
2	Nineteenth	*	34	Third
3	Original		34.0.1	Original
4	Original		34.0.2	Original
5	Original		34.0.3	Original
6	Original		34.0.4	Original
7	Original		34.0.5	Original
8	Original		34.1	Original
9	Original		34.2	Third
10	Original		34.2.1	Third
11	Original		34.2.2	First
12	Original		34.3	Original
13	Original		34.4	Original
14	Original		34.5	Original
15	Original		35	First
16	Original		36	Original
17	Original		37	First
18	Original		38	First
18.1	Original		39	First
18.2	Original		40	Original
18.3	Original		41	Original
19	Original		42	First
20	Original		42.1	Third
21	Original		42.1.1	Second
22	First		42.1.2	Original
23	Original		42.1.3	First
24	Original		42.2	Original
25	Original		42.3	Third
26	Original		42.3.1	Second
27	Original		42.3.2	Original
28	Original		42.4	Original
29	First		42.5	Original
30	Original		42.6	Original
31	Original		43	Original
32	Original		44	Original
			45	Original
			46	Original

* - indicates those sheets includes with this filing

Issued: January 5, 2004

Effective: January 5, 2004

Issued By: Aloysius T. Lawn, IV, Executive Vice President
6805 Route 202
New Hope, Pennsylvania 18938

OHO0219

SECTION 3 - DESCRIPTION OF SERVICE AND MAXIMUM RATES, CON'T.

3.16 Bundled Long Distance Service, con't.

3.16.13 Ohio 200 Plan

This plan consists of a monthly recurring charge and a per minute charge.

(N)
|
(N)

Issued: January 5, 2004

Effective: January 5, 2004

Issued By: Aloysius T. Lawn, IV, Executive Vice President
6805 Route 202
New Hope, Pennsylvania 18938

OHO0219

TALK AMERICA INC.

PUCO Tariff No. 1
First Revised Sheet 42.1.3
Cancels Original Sheet 42.1.3

SECTION 4 - CURRENT RATES, CON'T.

4.14 Bundled Long Distance Service, Con't.

4.14.11 Bundle No. XIV (Talk Unlimited Plus Plan)

Monthly Long Distance Charge:

Standard Option	\$3.95
Premium Option	\$6.95

Rate Per Minute

InterLATA	\$0.059
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Travel Card	
Usage Per Minute	See Section 4.18
Service Charge Per Call	See Section 4.18

4.14.12 Basic Additional Line for Bundled Plans

Rate Per Minute	<u>InterLATA</u>	<u>IntraLATA</u>
	\$0.059	\$0.059

Travel Card	
Usage Per Minute	See Section 4.18
Service Charge Per Call	See Section 4.18

4.14.13 Ohio 200 Plan

Rate Per Minute	<u>InterLATA</u>	<u>IntraLATA</u>	(N)
	\$0.050	\$0.050	

Travel Card			
Usage Per Minute	See Section 4.18		
Service Charge Per Call	See Section 4.18		(N)

Issued: January 5, 2004

Effective: January 5, 2004

Issued By: Aloysius T. Lawn, IV, Executive Vice President
6805 Route 202
New Hope, Pennsylvania 18938

OHO0219