BEFORE THE FLORIDA PUBLIC SERVICE COMMISSION

Initiation of Show Cause Proceeding Against GTE Communications Corporation. for Apparent Violation of Rule 25-4.118, F.A.C., Local, Local Toll, of Toll Provider Selection.	Docket No. 990362-TI Filed: January 9, 2001

SUPPLEMNTAL DIRECT TESTIMONY

OF

R. EARL POUCHER

On Behalf of the Citizens of the State of Florida

DECLASSIFIED
ATR 5-7-01
CONFIDENTIAL

Jack Shreve
Public Counsel

Office of Public Counsel
c/o The Florida Legislature
111 West Madison Street
Room 812
Tallahassee, FL 32399-1400

(850) 488-9330

Attorney for the Citizens
of the State of Florida

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(Vol. 1 of 4)

DOCUMENT NUMBER-DATE
00387 JAN-9 0
FPSC-RECORDS/REPORTING

SUPPLEMENTAL DIRECT TESTIMONY

R. EARL POUCHER

FOR

THE OFFICE OF PUBLIC COUNSEL

BEFORE THE

FLORIDA PUBLIC SERVICE COMMISSION

DOCKET NO. 990362-TL

Q. Please state your name, business address and title.

A. My name is R. Earl Poucher. My business address is 111 West Madison St., Room 812, Tallahassee, Florida 32399-1400. My title is Legislative Analyst.

Q. What is the purpose of your testimony?

A. On Friday, December 15, 2000, I filed testimony in Docket No. 990362-TL relating to the violation of Florida Public Service Commission rules regarding Local, Local Toll or Toll Provider selection by Verizon Inc. . On Friday, December 15, 2000, the same day, Verizon provided additional discovery in this docket that was requested on January 24, 2000 and again on July 14, 2000. The purpose of this testimony is to introduce the evidence and my preliminary analysis of the documents provided by Verizon to supplement the testimony I have already filed.

Q. Please describe the documents provided by Verizon.

A. The documents, which are attached as Exhibit REP-18, include 1526 pages of complaints filed by customers regarding unauthorized switching by Verizon (GTE), and other customer complaints regarding the marketing and billing of Verizon services. The documents include copies of approximately 1500 individual Florida complaints, most of which have apparently been furnished to Verizon by AFNI

Outsourcing (Anderson Financial Network Inc.) in response to our request for discovery.

AFNI is just one of the organizations within Verizon that would have processed slamming complaints. A review of the individual complaints contained in the attachment shows that this form was used by nine customer groups within Verizon, including SITEL, AFNI-Tucson, Thornton, Niagra Falls, Alpharetta, AFNI, BSC, Phonemarts and Repair. Since all of these organizations who receive customer contacts could receive slamming complaints from customers, it is very likely that additional slamming complaints were received by Verizon that are not included in the discovery furnished to the Office of Public Counsel on December 15, 2000. For example, page 1481 of this exhibit shows how AFNI employees filled out the form and identified their work group as the originator. Most of the complaints in this exhibit have, apparently, been originated solely by the AFNI organization.

Also included in the documents furnished by Verizon were complaints involving customers from other jurisdictions. We have excluded those complaints from this exhibit.

Q. When and how did Public counsel request the documents included in Exhibit REP-18?

A. On January 24, 2000, Public Counsel served its First Request for Production of Documents to Verizon that specifically asked for copies of all complaints in the possession of Verizon or its agents regarding the unauthorized switching of subscribers (Exhibit REP-16). Our document request included complaints received

from all sources, including, those complaints received directly from customers that were not referred to regulatory agencies. The date for delivery of those documents was February 24, 2000. Again, on July 14, 2000, Public Counsel reiterated its request for copies of all documents relating to complaints of unauthorized switching by Verizon (Exhibit REP-17). Those documents were due to be furnished to Public Counsel on August 18, 2000. All of the documents furnished by the company on December 15, 2000 were dated during 1998 and 1999. We currently have no knowledge as to the reasons why this discovery was not furnished on a timely basis. On numerous occasions prior to the release of the latest discovery, Public Counsel has expressed the opinion to Verizon that the initial production of documents included only regulatory complaints and the company had failed to provide other documentation of similar complaints handled within the company that did not result in an appeal to a regulatory agency.

Q. What information is contained in these documents?

A. My preliminary review of the documents indicates that there are a total of 1481 individual complaints contained in this additional discovery. Of 1481 complaints, 1370 complaints have been registered by customers indicating that they were switched to GTE without authorization. These 1370 complaints include little, if any investigation by GTE to determine the root cause of the complaint and the unauthorized switch. Sixty eight additional complaints include confirmation that the customer was actually switched without authorization and that the company was at fault. An additional 43 complaints involve billing issues or marketing issues that are not included within our definition of slamming. By review of these documents, it would appear that GTE did little, if any, additional investigation to determine the actual blame for the unauthorized switching of customers other than to identify the

customer's account and take the necessary steps to cease billing for the unauthorized switching.

Exhibit REP-18 shows that other organizations within Verizon utilized the same form and should have been able to be responsive to Public Counsel's requests for discovery. Documentation from those other organizations has not been furnished.

One unique feature of the form used by Verizon to record customer slamming complaints can be seen on the same page number, page 1481, I referred to earlier. It is alarming to see that in providing the most common reasons for complaints, the company included one category for slamming that is labeled as "deceased". Obviously, it must have been common during that time frame for GTE Long Distance to sign up new customers for service that were actually deceased. Public Counsel has separately documented a number of such complaints.

For instance, according to the complaint on page 1481, Sheilia Cramer, a Verizon Customer Service Representative, received a complaint from Manuel Piedra, 305-271-1712 on November 23, 1998. The customer complained of unauthorized switching and the customer asked for a full investigation because the person's name on the bill had been deceased for one year. Likewise, page 66 documents another Verizon slam of a deceased customer.

Also of interest is the complaint recorded on page 188 documenting a slamming complaint, stating that this customer's mother called in and said that a Snyder representative was signing young people up outside of their school and if they would

disconnect their (existing) service they would get $10 to $20 dollars.

Q. What is the relevance of these documents?

A. In my initial testimony, it was my contention that the complaints used by the Florida Public Comission Staff in its processing of the show cause order, were simply the tip of the iceberg of a much larger number of slamming complaints that included forgery and fraud perpetrated on Florida citizens. The additional complaints I am referring to in this part of my testimony were the complaints handled by all Verizon organizations that had responsibilities for customer contacts. In addition to the GTE slamming processed by GTE personnel, there are even more complaints that would have been processed by local exchange companies and long distance companies in Florida who were the victims of slamming activities by Verizon. The data contained in REP Exhibit No. 18 includes the records from just one of many possible sources demonstrating the fact that Verizon's actual rule violations are far greater than the 207 violations that have been presented by Staff in this case.

Switching of subscribers to local, local toll or long distance services from the customer's preferred provider without the customer's authorization is a violation of Commission rules and state law. There should be no distinction regarding a customer's decision to complain to the FPSC or to simply resolve the matter directly with their provider. Indeed, the Commission needs to have some understanding of the extent of the total problem in order to properly gauge the extent of customer abuse that occurred during the time period covered by this docket. This filing provides some, but not all, of the actual customer complaints that are included in the

rest of the iceberg.

Q. Even though you have described your initial review of these complaints as preliminary, are there other conclusions you can draw from the data?

A. Yes, and probably the most significant observation in terms of this docket is that the Verizon organization had early warnings that the process used by its sales agent, Snyder, included fraudulent and improper sales tactics. The contract with Snyder to conduct face-to-face sales in Florida did not start until January 1998. The documents furnished by Verizon on December 15, 2001, include 40 complaints received in February 1998, 55 complaints received in March 1998 and 163 complaints received in April 1998. This volume of complaints gave Verizon an early warning that Snyder was engaging in fraudulent sales tactics in its marketing efforts. Unfortunately, the company failed to take decisive action to stop the practice.

Q. Does this conclude your supplementary testimony?

A. Yes, it does.

INDEX OF EXHIBITS

SUPPLEMENTAL DIRECT TESTIMONY--R.E. POUCHER

DOCKET NO. 990362-TI

EXHIBIT NAME	EXH. NO.	
CITIZENS' FIRST SET OF REQUESTS FOR PRODUCTION OF DOCUMENTS TO GTE	REP-16	_____
CITIZENS' FIFTH SET OF REQUESTS FOR PRODUCTION OF DOCUMENTS TO GTE	REP-17	_____
SLAMMING COMPLAINTS RECEIVED 12/15/2000	REP-18	_____

Exhibit REP-16
Docket No. 990362-TI

CITIZENS' FIRST SET OF REQUESTS FOR PRODUCTION OF DOCUMENTS TO GTE

BEFORE THE FLORIDA PUBLIC SERVICE COMMISSION

Initiation of Show Cause Proceeding Against GTE Communications Corporation for Apparent Violation of Rule 25-4.118, F.A.C., Local, Local Toll, or Toll Provider Selection.	)	Docket 990362-TI Filed: January 24, 2000

CITIZENS' FIRST SET OF REQUESTS FOR PRODUCTION OF DOCUMENTS TO GTE

Pursuant to Section 350.0611(1), Florida Statutes (1999), Rules 25-22.34 and 25.22.35, Florida Administrative Code, and Rule 1.350, Florida Rules of Civil Procedure, Florida's Citizens' ("Citizens"), by and through Jack Shreve, Public Counsel, request GTE Communications Corporation and GTE Service Corporation (collectively "GTE") to produce the following documents for inspection and copying at the Office of Public Counsel, Claude Pepper Building, 111 West Madison Street, Room 812, Tallahassee, Florida 32399-1400, on or before Monday, February 28, 2000, or at such other time and place as may be mutually agreed upon by counsel.

DEFINITIONS

1. The terms "document" or "documents" are meant to have the broadest possible meaning under applicable law and includes, but is not necessarily limited to,

any written, recorded, filmed or graphic matter, whether produced, reproduced, or on paper, e-mail, cards, tapes, film, electronic facsimile, computer storage device or any other media, including, but not limited to, memoranda, notes, minutes, records, photographs, correspondence, telegrams, diaries, bookkeeping entries, financial statements, tax returns, checks, check stubs, reports, studies, charts, graphs, statements, notebooks, handwritten notes, applications, agreements, books, pamphlets, periodicals, appointment calendars, records and recordings of oral conversations, work papers, and notes, any of which are in your possession, custody, or control.

2. The term "referring or relating to" means any oral, graphic, demonstrative, telephonic, verbal, electronic (including e-mail), written or other conveyance of information, including but not limited to conservations, telecommunications, and documents.

3. The term "GTE" encompasses both GTE Communications Corporation (GTECC) and GTE Service Corporation, together with their officers, employees, consultants, agents, representatives, attorneys, and any other person or entity acting on behalf of either GTE Communications Corporation or GTE Service Corporation.

4. As used herein the terms "you," "your," and "company" refer to GTE together with its officers, employees, consultants, agents, representatives, attorneys, and any other person or entity acting on behalf of GTE.

5. Words in the past tense include the present, and words in the present tense include the past. Use of the singular includes the plural, and use of the masculine includes the feminine where appropriate, and vice versa.

INSTRUCTIONS

1 If any document is withheld under any claim of privilege, please furnish a list identifying each document for which privilege is claimed, together with the following information: date, sender, recipients, recipients of copies, subject matter of the document, and the basis upon which such privilege is claimed.

2. These discovery requests are to be answered with reference to all information in your possession, custody or control, or reasonably available to you. The requests are intended to include requests for information which is physically within GTE's possession, custody or control, as well as in possession, custody or control of GTE's agents, attorneys, or other third parties from which such documents may be obtained.

3. If GTE has possession, custody, or control of the originals of the documents requested, please produce the originals or a complete copy of the originals and all copies which are different in any way from the original, whether by interlineation, receipt stamp or notation. If GTE does not have possession, custody, or control of the originals of the documents requested, please produce any copies in the possession, custody, or control, however made, of GTE.

4 Please construe "and" as well as "or" either disjunctively or conjunctively as necessary to bring within the scope of this production of documents any document which might otherwise be construed to be outside the scope.

5. Unless otherwise indicated in the discovery request, please produce only documents created on or after January 1, 1997.

DOCUMENTS REQUESTED

1. Please provide all work papers, correspondence and other documents in your possession, custody or control relating to the slamming complaints included in the PSC Division of Consumer Affairs Special Request Report # 7 (Attachment A).

2. Please provide all work papers, correspondence and other documents in your possession, custody or control relating to complaints you received from January 1,

1997, through the present where the customer complained that they were switched to GTECC as a presubscribed local, local-toll or toll provider without the customer's consent. This request relates to all such complaints you received from any source, including but not limited to complaints received from the Florida Public Service Commission, complaints received from the Federal Communications Commission, complaints received from other government agencies, and complaints you received directly from customers.

3. Please provide all contracts between GTECC and any entity relating to the marketing of local, local-toll or toll services in Florida starting January 1, 1997, to date.

4. Please provide all documents in your possession, custody or control dealing with or mentioning processes or controls to insure that orders for telephone service were properly verified, or that controls were in place to prevent customer slamming. This request includes, but is not limited to all correspondence related to this subject, whether originated or received, including letters, memos, and e-mail.

5. Please provide all reports and studies, formal or informal, originated by the company or its agents or contractors that track or quantify the number and/or type of slamming complaints related to GTECC.

6. Please provide all documents in your possession, custody or control relating to contractual obligations of agents or contractors where a customer's presubscribed interexchange carrier is switched without their consent. This request includes, but is not limited to, all correspondence related to this subject between you and your agents or contractors, whether originated or received, including letters, memos, and e-mail.

7. Please provide all documents in your possession, custody or control relating with the your warm transfer procedures referenced in your November 23, 1999 letter to the Public Service Commission at page 2, paragraph 4.

8. Please provide all documents in your possession, custody or control sent to or received from Snyder Communications Inc., or any affiliate of Snyder Communications, Inc., relating in any manner to marketing of long distance services.

9. Please provide all documents in your possession, custody or control sent to or received from Snyder Communications Inc., or any affiliate of Snyder Communications, Inc., relating in any manner to changing a customer's presubscribed interexchange telecommunications carrier to GTECC without the customer's consent.

Charles J. Beck
Deputy Public Counsel
Fla. Bar No. 217281

Office of Public Counsel
c/o The Florida Legislature
111 W. Madison Street
Room 812
Tallahassee, FL 32399-1400

(850) 488-9330

DOCKET NO. 990362-TI
CERTIFICATE OF SERVICE

I HEREBY CERTIFY that a copy of the foregoing has been furnished by U.S. Mail or hand-delivery to the following parties on this 24th day of January, 2000.

Charles J. Beck

Lee Fordham
Division of Legal Services
Fla. Public Service Commission
2540 Shumard Oak Blvd.
Tallahassee, FL 32399-0850

Kimberly Caswell
GTE Florida Incorporated
P.O. Box 110, FLTC0007
Tampa, FL 33601-0110

D. Bruce May, Jr.
Holland & Knight, LLP
315 South Calhoun Street
P.O. Drawer 810
Tallahassee, FL 32302-0810

Exhibit REP-17
Docket No. 990362-TI

CITIZENS' FIFTH SET OF REQUESTS FOR PRODUCTION OF DOCUMENTS TO GTE

BEFORE THE FLORIDA PUBLIC SERVICE COMMISSION

Initiation of Show Cause Proceeding Against GTE Communications Corporation for Apparent Violation of Rule 25-4.118, F.A.C., Local, Local Toll, or Toll Provider Selection.	)	Docket 990362-TI Filed: July 14, 2000

CITIZENS' FIFTH SET OF REQUESTS FOR PRODUCTION OF DOCUMENTS TO GTE

Pursuant to section 350.0611(1), Florida Statutes (1999), Rules 25-22.34 and 25.22.35, Florida Administrative Code, and Rule 1.350, Florida Rules of Civil Procedure, Florida's Citizens' ("Citizens"), by and through Jack Shreve, Public Counsel, request GTE Communications Corporation, GTE Service Corporation, and GTE Florida Incorporated (collectively "GTE") to produce the following documents for inspection and copying at the Office of Public Counsel, Claude Pepper Building, 111 West Madison Street, Room 812, Tallahassee, Florida 32399-1400, on or before Friday, August 18, 2000, or at such other time and place as may be mutually agreed upon by counsel.

DEFINITIONS

1. The terms "document" or "documents" are meant to have the broadest possible meaning under applicable law and includes, but is not necessarily limited to,

any written, recorded, filmed or graphic matter, whether produced, reproduced, or on paper, e-mail, cards, tapes, film, electronic facsimile, computer storage device or any other media, including, but not limited to, memoranda, notes, minutes, records, photographs, correspondence, telegrams, diaries, bookkeeping entries, financial statements, tax returns, checks, check stubs, reports, studies, charts, graphs, statements, notebooks, handwritten notes, applications, agreements, books, pamphlets, periodicals, appointment calendars, records and recordings of oral conversations, work papers, and notes, any of which are in your possession, custody, or control.

2. The term "referring or relating to" means any oral, graphic, demonstrative, telephonic, verbal, electronic (including e-mail), written or other conveyance of information, including but not limited to conservations, telecommunications, and documents.

3. The term "GTE" encompasses GTE Communications Corporation (GTECC), GTE Service Corporation, and GTE Florida Incorporated, together with their officers, employees, consultants, agents, representatives, attorneys, and any other person or entity acting on behalf of either GTE Communications Corporation, GTE Service Corporation, or GTE Florida Incorporated.

4. As used herein the terms "you," "your," and "company" refer to GTE together with its officers, employees, consultants, agents, representatives, attorneys, and any other person or entity acting on behalf of GTE.

5. Words in the past tense include the present, and words in the present tense include the past. Use of the singular includes the plural, and use of the masculine includes the feminine where appropriate, and vice versa.

INSTRUCTIONS

1 If any document is withheld under any claim of privilege, please furnish a list identifying each document for which privilege is claimed, together with the following information: date, sender, recipients, recipients of copies, subject matter of the document, and the basis upon which such privilege is claimed.

2. These discovery requests are to be answered with reference to all information in your possession, custody or control, or reasonably available to you. The requests are intended to include requests for information which is physically within GTE's possession, custody or control, as well as in possession, custody or control of GTE's agents, attorneys, or other third parties from which such documents may be obtained.

3. If GTE has possession, custody, or control of the originals of the documents requested, please produce the originals or a complete copy of the originals and all copies which are different in any way from the original, whether by interlineation, receipt stamp or notation. If GTE does not have possession, custody, or control of the originals of the documents requested, please produce any copies in the possession, custody, or control, however made, of GTE.

4 Please construe "and" as well as "or" either disjunctively or conjunctively as necessary to bring within the scope of this production of documents any document which might otherwise be construed to be outside the scope.

5. Unless otherwise indicated in the discovery request, please produce only documents created on or after January 1, 1997.

DOCUMENTS REQUESTED

15. Please provide all work papers, correspondence and other documents in your possession, custody or control relating to complaints you received from January 1, 1997, through July 11, 2000, where the customer complained that they were switched to GTECC as a presubscribed local, local-toll or toll provider without the customer's consent. This request relates to all such complaints you received from any source, including but not limited to complaints received from the Florida Public Service

Commission, complaints received from the Federal Communications Commission, complaints received from other government agencies, and complaints you received directly from customers. Documents previously provided in this proceeding need not be provided again.

Charles J. Beck
Deputy Public Counsel
Fla. Bar No. 217281

Office of Public Counsel
c/o The Florida Legislature
111 W. Madison Street
Room 812
Tallahassee, FL 32399-1400

(850) 488-9330

DOCKET NO. 990362-TI
CERTIFICATE OF SERVICE

I HEREBY CERTIFY that a copy of the foregoing has been furnished by U.S. Mail or hand-delivery to the following parties on this 14th day of July, 2000.

Charles J. Beck

Lee Fordham
Division of Legal Services
Fla. Public Service Commission
2540 Shumard Oak Blvd.
Tallahassee, FL 32399-0850

Kimberly Caswell
GTE Florida Incorporated
P.O. Box 110, FLTC0007
Tampa, FL 33601-0110

Exhibit REP-18
Docket No. 990362-TI

SLAMMING COMPLAINTS RECEIVED
12/15/00

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 9-1-98 **Time:** 5:50PM **AM** **PM** **(Circle One)**

CSR Name: Teresa Yates **Badge #:** _____

Customer Name: Philip United **BTN:** 813-972-0900

Address: 15210 Amberly **Apt.#:** _____

City: TAMPA **ST:** FL **ZIP:** 33624 **INF? OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Solicited 8-21-98 - used a key AT&T received call around 9:30 AM Promised by Rep he/she will not be charged more than 10 a month

RESEARCH: (For Customer Service Use Only)

Bill has not yet been issued. New to AT&T Local Svc

RETURN CALL TO CUSTOMER

22912

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

SEP. 2.1998 9:55AM ANDERSON FINANCIAL NO.411 P.1/1

FORM - SNYDER **CUSTOMER COMPLAINT**

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 9-1-98 **Time:** 5:50PM **AM** **PM** (Circle One)

CSR Name: Teresa Yates **Badge #:** _____

Customer Name: Philip United **BTN:** 813-972-0960

Address: 15210 Amberly **Apt.#:** _____

City: TAMPA **ST:** FL **ZIP:** 33647 **INF? OOF?** (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Solicited 8-21-98 - used to buy AT&T received call around 9:30 AM Promised by Rep he would not be charged more than 10 a month

RESEARCH: (For Customer Service Use Only)

Bill has not yet been issued. Refer to ATC Local Svc

RETURN CALL TO CUSTOMER

22913

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

SEP. 2.1998 9:56PM ANDERSON FINANCIAL NO.412 P.1/1

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 11/27/98 TIME 3:22 AM (PM)

CSR NAME Sandra Cabrera BADGE #

CUSTOMER NAME James Basile BTN # (813) 653-2866

ADDRESS 834 Walsingham Way APT # 3

CITY Valrico ST FL ZIP 33594

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)

Cust was contacted by a telemarketer and was quoted 7 (seven) cents a minute 24 hours and one hour of free long distance calling on the weekends, wants the tape to be pulled and a credit on what plan they were put on.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)

1998 - C DMSS-NIO

RETURN CALL TO CUSTOMER

BY WHOM _____ DATE _____ TIME _____

COMMENTS _____

22914

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 11-25-98 **Time:** 16:00 4:00 **AM** (PM) **(Circle One)**

CSR Name: MIKE CRAIN **Badge #:** SENIOR SUPERVISOR

Customer Name: DANIEL OAKES **BTN:** _____

Address: 1028 CANAL ST **Apt.#:** _____

City: RUSKIN **ST:** FL **ZIP:** 33570 (INF?) **OOF?**
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CUSTOMER CALLED AND OFFERED A FLAT RATE OF .7 CENTS ON EASY SAVINGS PLAN WITH THE DOUBLE DISCOUNT GIVEN AFTER THAT. CUSTOMER IS VERY IRATE AND FEELS BETRAYED AND LIED TO. WANTS A CALL BY NEXT MONDAY TO VENT AND FIND OUT HOW TO TAKE THIS HIGHER.

ALSO HAS # 407-784-2952 THAT WAS PROMISED SAME SITUATION.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

22915

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-3-98 Time: 11:30 AM PM (Circle One)

CSR Name: Romelia Ayo Badge #:

Customer Name: Jorge Sosa BTN: (305) 594-4591

Address: 8290 Lake Dr. Apt.#:

City: Miami ST: FL ZIP: 33166 INF? OOP?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer would like to cancel gte bc they mis informed them.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

22916

1 page

(MUST BE FILLED OUT COMPLETELY)

SNY

TODAY'S DATE 2/26/98 TIME 10:13 (AM) PM

CSR NAME Martha Co. Lara BADGE # 407645188

CUSTOMER NAME Sneider Kapur BTN # ↗

ADDRESS 1923 Hammerlin Ave APT #

CITY Orlando ST FL ZIP 32803

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)

Cust was not told the first billing cycle and not told about the .14 cents a min. he was told .10¢ a min. for all calls in the U.S. The rep also quoted I.I.P for international calls and did not mention the 3.00 rate for IDCP. Cust was paying .78¢ a min. with AT&T. Cust thought he was going to be getting the free min. immediately. He wants this please. Also cust was contacting the customer and giving misinformation.

Cust wants someone to contact him to let him know what has been done about this.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)

DMSS → IDCP SNY

EKD 5-5

3100 Intl mins (no Total call)

ordered 2/4/98

2/11/98

RETURN CALL TO CUSTOMER

BY WHOM _____ DATE 3-10-98 TIME _____

COMMENTS Rep has been retraining. Customer very happy to received a Follow-UP Phone Call. Customer Satisfied.

22917

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/30/98 Time: 4:30 AM (PM) (Circle One)

CSR Name: Brande L Badge #: 1635

Customer Name: Jason Mauney Phone: (352) 338-2791

Address: 2601 SW Archer Rd Apt.#:

City: Gainesville ST: FL ZIP: 32608 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer switched to GTELP because a rep. from Snyder offered him 7¢/minute for long-distance calls to another area code within the State of Florida. But then I looked in Solar and there is an order for 41871 Total Call w/ 42244 Free 360 Wekend Min, this is not 7¢/minute.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

22918

DATE TURNED IN: 10/23/98 DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10/23/98 TIME 10:56 AM ✓ PM _____

CSR NAME Melinda Flores BADGE # 88910

CUSTOMER NAME Doris Purdy BTN # 727 784 D511

ADDRESS 45 Katherine Blvd APT # 203

CITY Clearwater STATE FL ZIP CODE 34683

IS RESPONSE NEEDED? YES / NO PROJECT? Long Distance

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer had been called this morning by a Representative and was offering her Long Distance from GTE. Mrs. Purdy wished to switch & she claims that the gentleman (Rep) threatened her that he was going to disconnect her phone if she didn't switch.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Apologized to Customer and was told to fill this form out.

1993 - C

DMSS - N/O

RETURN CALL TO CUSTOMER

COMMENTS

22919

DATE TURNED IN: 7/16/98 TIME COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 7/16 TIME 8:10 AM ✓ PM _____

CSR NAME Natalie Rainey BADGE # 88990

CUSTOMER NAME PENNY RYAN BTN # 941-388-3037

ADDRESS 1700 BEN FRANKLIN DR APT # 11F

CITY SARASOTA STATE FL ZIP CODE 34236

IS RESPONSE NEEDED? (YES) / NO PROJECT? GTELD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

ERIC CARTMAN - OUTBOUND, SAID GTE WAS GOING TO START BILLING HER FOR LD, SHE SAID SHE DIDN'T WANT GTE FOR LD, HAS PIC RESTRICTION ON FILE. HE WAS VERY PERSISTANT, + TOLD HER, QUOTE, "THAT'S THE WAY IT'S GOING TO BE, BITCH," UNQUOTE. SHE HAS HAD PROBLEMS W/ LOCAL SERVICE, AND IS GOING TO FILE COMPLAINT W/ FCC.

DMSS - NO ORDER 1998 = Ø
1997 = Ø

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

TOOK COMPLAINT, SHE SAID SHE WANTS SOMEONE TO CALL HER BACK TO LET HER KNOW WHAT'S BEING DONE TO RESOLVE THIS.

RETURN CALL TO CUSTOMER

COMMENTS

22920

Jun 24 16:12 1998 Page 1

```
SL VIEW 06/24/98 14:11:41   VIEW ORDER - ASOS FORMAT                PAGE   1 +

ORDER NO   I 4712374 1R OF                                  COMP 06 15 98
TELNO  305 852 8738   CKT

     R/C DD:                COEFF :              SUFFIX:
     ITEM #:                WKWITH:              VISIT :
     REMARKS:

01   023; I4712374; 980615; 77GH; 980615; 1R; 852-8738
02   CORRALES, CARLOS F; 88540 US HWY; ;
0202 TAVERNIER; FL; 33070
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY, ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 380; ALT, D; RISK, M
03   SCORE 600; BUREAU CODE, SO; TEI, N
05   42245; GTLDWEWKFREEINTL; ;
09   18882245FWWI; PRO1=WC
05   00493; INTERNATIONAL CALL PLAN II; ;
09   18880493ICP2; PRO1=WC
05   41871; GTELD RES TOTAL CALL; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> _____          WHO IS? _______          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
```

Not Authorized No Credit Yet.

S LAM

Jun 24 16:12 1998 Page 1

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SL VIEW 06/24/98 14:11:41   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO    I 4712374 1R OF                                  COMP 06 15 98
TELNO  305 852 8738   CKT

09   18881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
09   852-8738; ; O-5483; 980615; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS [redacted] ID NA; PTN NA
1101 06/15/98LXW/DMSS/20299927/GTELD OD 06/11 DD 06/26
1400 ORDER COMPLETED CTAXA85U                    T4CLXW1 06 15 98 06.52 9140 ST
1400 TEI CHANGED FROM N TO X                     T4CLXW1 06 15 98 06.51 9140 01
1400 ORDER CREATED CTAXA85U                      T4CLXW1 06 15 98 06.51 9140 ST



0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> ____          WHO IS? _______          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
```

22927

Jun 24 15:34 1998 Page 1

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SL VIEW 06/24/98 13:34:25   VIEW ORDER - ASOS FORMAT                PAGE   1 +

ORDER NO   I 3814461 1R OF                                  COMP 05 07 98
TELNO  407 292 9985   CKT

     R/C DD:                COEFF :              SUFFIX:
     ITEM #:                WKWITH:              VISIT :
     REMARKS:

01   044; I3814461; 980507; 77XX; 980507; 1R; 292-9985
02   TRIEU, HUY Q; 1556 DALY ST; ;
0202 ORLANDO; FL; 32808
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 200; ALT, D; RISK, H
03   SCORE 100; BUREAU CODE, SO; TEI, N
05   43976; LD "ONLY" PIC FEE WAIVER; ;
05   41366; GTELD RES INTERNATIONAL DCP; ;
09   18881366CESP; PRO1=WC
05   42245; GTLDWEWKFREEINTL; ;
09   18882245FWWI; PRO1=WC
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===>            WHO IS?            PAGING KEY
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
```

Not Authorized # 21.42 C1.

Slam

Jun 24 15:34 1998 Page 1

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SL VIEW 06/24/98 13:34:25   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO    I 3814461 1R OF                                  COMP 05 07 98
TELNO  407 292 9985    CKT

05   41851; GTELD RES ESP CHOICE 5-5; ;
09   18881851REPM; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
09   292-9985; ; O-5483; 980507; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS NA; ID NA; PTN NA
1101 05/07/98JDS/DMSS/20218772/GTELD OD 05/03 DD 05/18
1400 ORDER COMPLETED CTAXARA5                 B5MJDS1 05 07 98 10.57 9140 ST
1400 ORDER CREATED CTAXARA5                   B5MJDS1 05 07 98 10.56 9140 ST



0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===>          WHO IS?          PAGING KEY
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
```

To: SMTP[Carole.Bonilla@Snyder.com]
From: Phylis Flowers@NCO.PSF@TXDAL
Cc: Liz Smith@NCO.PSF@TXDAL,Michael Lyons@CO.LDSVCS.4,
SMTP[Andy.Cokas@Snyder.Com],SMTP[Elliot.Glover@Snyder.com],
Xavier Castro@CO.LDSVCS.4
Bcc:
Subject: ESCALATED COMPLAINT FORM - SNYDER
Attachment:
Date: 4/9/98 1:37 PM

**********ESCALATED COMPLAINT FORM**********

Customer: LUISA CABRAL

Telephone Number: 305 262-8236

Address: 411 SW 57 AVE 3, MIAMI, FL 33144

Sale Date: 2/27/98

Problem: Customer stated that they have been slammed to cancel order immediately.

Please provide the following information by: (4/15/98)

Type of sale: Face-to-face _____ Outbound _____

Face-to face:

1) Provide copy of LOA (within 24 hours) fax: 972 887-2443

2) Copy of 3rd party verification tape: (CA & NY) (within 24-48 hours)

3) Sales event and location:

Event:(Full description) i.e. Kroger Grocery Store

Address: 1234 Food
No Where, NY

4) Was follow up call verification done?

5) Has the sales representative received previous complaints?

If yes, how many?

22940

6) Corrective action: (Any immediate available information - we know a final report will be sent with the final outcome.)

Outbound Call

1) Provide copy of third party verification tape (within 24-48 hrs).

3) Send tape to: Phylis Flowers
HQ105A46
8585 N Stemmons Frwy
Dallas, Tx 75247
Any questions call 972 887-2633 (Phylis)

4) 5) Has the sales representative received previous complaints?

If yes, how many?

o

To: smtp[<carole.bonilla@snyder.com>]
From: Marty Maldonado@NCO.PSF@TXDAL
Cc: smtp["Elliot Glover" <elliot.glover@snyder.com>],
SMTP[andy.cokas@snyder.com],Xavier Castro@CO.LDSVCS.4
Bcc:
Subject: Escalated complaint - 3058267543
Attachment:
Date: 4/8/98 8:38 PM

Customer: Magaly Puga

Telephone Number: 3058267543

Address:10090 NW 80 Ct 1453
Hialeah Gardens, FL 33016

Order date: 3/10/98. Customer says she was changed without authorization. Very upset. Threatening legal action.

Please provide the following information by: 04/09/98

Type of sale: Face-to-face _____ Outbound _____

Face-to face:

1) Provide copy of LOA (within 24 hours)

2) Copy of 3rd party verification tape: (CA & NY) (within 24-48 hours)

3) Sales event and location:

Event:(Full description) i.e. Kroger Grocery Store

Address: 1234 Food
No Where, NY

4) Was follow up call verification done?

5) Has the sales representative received previous complaints?

If yes, how many?

22944

6) Corrective action: (Any immediate available information - we know a final report will be sent with the final outcome.)

Outbound Call

1) Provide copy of third party verification tape (within 24-48 hrs).

2) Please provide synopsis of corrective action. (within 3 days)

8585 N Stemmons Frwy
Dallas, Tx 75247

4) 5) Has the sales representative received previous complaints?

If yes, how many?

Thanks,

Marty Maldonado
Administrator-Post Sale Fulfillment
HQI05A41
972-887-6240

To: smtp[<carole.bonilla@snyder.com>]
From: Marty Maldonado@NCO.PSF@TXDAL
Cc: smtp["Elliot Glover" <elliot.glover@snyder.com>],
SMTP[andy.cokas@snyder.com],Xavier Castro@CO.LDSVCS.4
Bcc:
Subject: Escalated complaint - 3055567838
Attachment:
Date: 4/8/98 8:33 PM

Customer: Diego Estit

Telephone Number: 3055567838

Address:6680 W 2 CT 402
Hialeah, FL 33012

Order date: 2/20/98. Customer says he was changed without authorization. Does not even want a long distance carrier

Please provide the following information by: 04/09/98

Type of sale: Face-to-face _____ Outbound _____

Face-to face:

1) Provide copy of LOA (within 24 hours)

2) Copy of 3rd party verification tape: (CA & NY) (within 24-48 hours)

3) Sales event and location:

Event:(Full description) i.e. Kroger Grocery Store

Address: 1234 Food
No Where, NY

4) Was follow up call verification done?

5) Has the sales representative received previous complaints?

If yes, how many?

22948

6) Corrective action: (Any immediate available information - we know a final report will be sent with the final outcome.)

Outbound Call

1) Provide copy of third party verification tape (within 24-48 hrs).

2) Please provide synopsis of corrective action. (within 3 days)

8585 N Stemmons Frwy
Dallas, Tx 75247

4) 5) Has the sales representative received previous complaints?

If yes, how many?

Thanks,

Marty Maldonado
Administrator-Post Sale Fulfillment
HQI05A41
972-887-6240

To: smtp[<carole.bonilla@snyder.com>]
From: Marty Maldonado@NCO.PSF@TXDAL
Cc: smtp["Elliot Glover" <elliot.glover@snyder.com>],
SMTP[andy.cokas@snyder.com],Xavier Castro@CO.LDSVCS.4
Bcc:
Subject: Escalated complaint - 3058600128
Attachment:
Date: 4/8/98 8:23 PM

Customer: J Ballesteves

Telephone Number: 3058600128

Address:528 SW 6 st 5
Miami, FL 33130

Order date: 2/28/98. Customer says he was changed without authorization.

Please provide the following information by: 04/09/98

Type of sale: Face-to-face _____ Outbound _____

Face-to face:

1) Provide copy of LOA (within 24 hours)

2) Copy of 3rd party verification tape: (CA & NY) (within 24-48 hours)

3) Sales event and location:

Event:(Full description) i.e. Kroger Grocery Store

Address: 1234 Food
No Where, NY

4) Was follow up call verification done?

5) Has the sales representative received previous complaints?

22950

If yes, how many?

6) Corrective action: (Any immediate available information - we know a final report will be sent with the final outcome.)

Outbound Call

1) Provide copy of third party verification tape (within 24-48 hrs).

2) Please provide synopsis of corrective action. (within 3 days)

Dallas, Tx 75247

4) 5) Has the sales representative received previous complaints?

If yes, how many?

Thanks,

Marty Maldonado
Administrator-Post Sale Fulfillment
HQI05A41
972-887-6240

Marty Maldonado
Administrator-Post Sale Fulfillment
HQI05A41
972-887-6240

Marty Maldonado
Administrator-Post Sale Fulfillment
HQI05A41
972-887-6240

Marty Maldonado
Administrator-Post Sale Fulfillment
HQI05A41
972-887-6240

To: Xavier Castro@CO.LDSVCS.4
From: Marsha Payne@NCO.PSF@TXDAL
Originated by: Marsha Payne@NCO.PSF@TXDAL
Cc:
Bcc:
Subject: fwd: ESCALATED COMPLAINT FORM - SNYDER
Attachment:
Date: 4/7/98 11:53 AM

PER YOUR REQUEST

Original text
From: Marsha Payne@NCO.PSF@TXDAL, on 3/31/98 3:57 PM:
To: SMTP[[<carole.bonilla@snyder.com>]], SMTP[[<elliot.glover@snyder.com>]]
Cc: SMTP[<Michael.Lyons@psi.gte.com>]

Customer: Armando Fiallo

Telephone Number: 305 649-6103

Address: 3078 SW 6TH ST

Synopsis/Comments: CUSTOMER HAS BEEN CONTACTED REPEATELDLY ABOUT SWITCHING TO GTELD AND WAS SWITCHED W/O AUTHORIZATION. WANTS TO KNOW WHO AUTHORIZED SWITCH

Please provide the following information by: (Date) 04/01/98

Type of sale: Face-to-face _____ Outbound __X_____

Face-to face:

1) Provide copy of LOA (within 24 hours)

2) Copy of 3rd party verification tape: (CA & NY) (within 24-48 hours)

3) Sales event and location:

Event:(Full description) i.e. Kroger Grocery Store

Address: 1234 Food
No Where, NY

22972

4) Was follow up call verification done?

5) Has the sales representative received previous complaints?

6) Corrective action: (Any immediate available information - we know a final report will be sent with the final outcome.)

Outbound Call

1) Provide copy of third party verification tape (within 24-48 hrs).

2) Please provide synopsis of corrective action. (within 3 days)

3) Send tape to: HQI05A42
8585 N Stemmons Frwy
Dallas, Tx 75247

4) 5) Has the sales representative received previous complaints?

If yes, how many?

Thanks,

Marsha

receives, I would also expect a quality check on your end to verify that what he is receiving are complaints and not inquiries (as he has done on this one).

Liz, please ensure that future complaint forms such as the below do not make it to Snyder and the above message is communicated to the customer.

Michael Lyons
972-465-4642
Ethnic Channel Management

From: "George Wolfand" <george.wolfand@snyder.com>, on 4/6/98 12:05 PM:
Michael -- This is interesting.

We seem to have a number of complaints coming in from both the daily customer service side (as we discussed on Friday) and from the Esclation side that may be overstating our problems.

Can you investigate and tell us if we have the right process in place at GTE. As you know, with 3,000+ orders/day the number of VALID inquiries or cancellations into the centers will be substantial. With all of the "negative publicity", I want to make sure that our mutual processes and reporting are being very careful to draw a distinction between inquiries and unauthorized sales.

> ----------
> From: Elliot Glover
> Sent: Monday, April 06, 1998 12:56 PM
> To: Vilma Viola; George Wolfand; Barbara Baker; Mitch Gershman
> Subject: FW: ESCALATED COMPLAINT FORM - SNYDER
>
> After receiving this ESCALATED COMPLAINT , I reviewed the Loa and
> investigated the complaint. Nery Primelles called GTE to cancel the
> order because prior to signing the Loa, she did not discuss switching
> the LDS from AT&T with her husband (Oscar Touza).
> Elizabeth Garivay, said this was an inquiry and not a complaint.
>
> 1) I think we may need to use a different form to identify inquiries?
>
> 2) How many of the past complaints were inquiries?
>
> 3) I suggest that someone from Snyder, review the scripting used at
> these call centers and determine if they are adequate for the type of
> markets we sell to.
>
> 4)Does a dialect difference in language, have any impact on the way a
> complaint or inquiry are translated?
>
> ----------
> From: Elizabeth Garivay[SMTP:elizabeth.garivay@telops.gte.com]
> Sent: Monday, April 06, 1998 9:23 AM
> To: Andy Cokas; Carol Bonilla; Elliot Glover; Elizabeth Garivay
> Cc: Michael Lyons
> Subject: ESCALATED COMPLAINT FORM - SNYDER
>
> Comments: A Representative spoke with Nery Primelles and changed
> long

> Customer: Spoke with Nery Primelles and account under Oscar Touza.
>
> Telephone Number: 305/225-6997
>
> Address: 11234 NW 5 Terr
> Miami, FL 33172
>
> Please provide the following information by: (04-07-98)
>
> Type of sale: Face-to-face _____ Outbound __X___
>
> Face-to face:
>
> 1) Provide copy of LOA (within 24 hours)
>
> 2) Copy of 3rd party verification tape: (CA & NY)
> (within 24-48 hours)
>
> 3) Sales event and location:
>
> Event:(Full description) i.e. Kroger Grocery Store
>
> Address: 1234 Food
> No Where, NY
>
> 4) Was follow up call verification done?
>
> 5) Has the sales representative received previous complaints?
>
> If yes, how many?
>
> 6) Corrective action: (Any immediate available information
> - we know a final report will be sent with the final outcome.)
>
> Outbound Call
>
> 1) Provide copy of third party verification tape
> (within 24-48 hrs).
>
> 2) Please provide synopsis of corrective action. (within 3 days)
>
> 3) Send tape to: HQ105A46
>
> 8585 N Stemmons Frwy
> Dallas, Tx 75247
>
> 4) 5) Has the sales representative received previous complaints?
>

>
>
>
> Thank you,
> Elizabeth Garivay
> Administrator-Customer Relations
> 972-887-2638
>
>
>
> ----------
> From: Elizabeth Garivay[SMTP:elizabeth.garivay@telops.gte.com]
> Sent: Monday, April 06, 1998 9:23 AM
> To: Andy Cokas; Carol Bonilla; Elliot Glover; Elizabeth Garivay
> Cc: Michael Lyons
> Subject: ESCALATED COMPLAINT FORM - SNYDER
>
> Comments: A Representative spoke with Nery Primelles and changed
> long
> distance to GTELD, phone number and bill under husbands name only,
> Oscar
> Touza.
>
> Customer: Spoke with Nery Primelles and account under Oscar Touza.
>
> Telephone Number: 305/225-6997
>
> Address: 11234 NW 5 Terr
> Miami, FL 33172
>
>
> Please provide the following information by: (04-07-98)
>
> Type of sale: Face-to-face _____ Outbound __X____
>
>
> Face-to face:
>
> 1) Provide copy of LOA (within 24 hours)
>
> 2) Copy of 3rd party verification tape: (CA & NY)
> (within 24-48 hours)
>
> 3) Sales event and location:
>
> Event:(Full description) i.e. Kroger Grocery Store
>
> Address: 1234 Food
> No Where, NY
>
> 4) Was follow up call verification done?
>
>
> 5) Has the sales representative received previous complaints?
>
>
> If yes, how many?

> - we know a final report will be sent with the final outcome.)
>
> Outbound Call
>
> 1) Provide copy of third party verification tape
> (within 24-48 hrs).
>
> 2) Please provide synopsis of corrective action. (within 3 days)
>
>
> 3) Send tape to: HQ105A46
>
>
> 8585 N Stemmons Frwy
> Dallas, Tx 75247
>
> 4) 5) Has the sales representative received previous complaints?
>
>
> If yes, how many?
>
>
>
>
>
> Thank you,
> Elizabeth Garivay
> Administrator-Customer Relations
> 972-887-2638
>
>

GTE Long Distance Provider Change Form

NAME First Name: WILMER Last Name: FRESIN

Name on Phone Bill First Name: WILMER Last Name: FRESIN

Service Address: 2123 SW 17 TER Apt. #:

City: MIAMI State: FL Zip: 33145

HOME PHONE NUMBER TO BE CHANGED: 305 - 854 - 9150

Additional Numbers: ___ - ___ - ____ ___ - ___ - ____

___ - ___ - ____

Customer SSN: ___ - ___ - ____

If no Social Security number please provide a driver's license number: F625-220-64-344-0

I affirm that I am authorized to make long distance provider decisions for the above telephone number(s). I understand that there may be a service fee for making this change but that GTE Long Distance will compensate me for all or part of that fee. I further understand that I may designate only one long distance provider as my primary carrier for each of these services per telephone number, and that there may be a fee for changing back to my original provider. GTE Long Distance is a division of GTE Communications Corporation. GTE Communications Corporation uses the facilities of other companies in providing its services.

Customer Signature: Wilmer Fresin Today's Date: 01-05-99

GTE Long Distance Order Form

☒ Yes, switch me to GTE Long Distance Service.
☐ Yes, switch me to Local Toll Service if available in my area.

INTERNATIONAL 200

☐ International Calling Plan ($3 monthly fee)
Country Called: _____
_____
_____
☐ _____

DOMESTIC 201

☒ Easy Savings Plan Double Discount
☐ Total Call
_____
☐ _____

MISCELLANEOUS 400

☐ Calling Card*
_____
☐ Call Me Toll-Free (With Total Call Only)
☐ _____
☐ _____ 600

*Note: You must sign up for GTE Long Distance service in order to be eligible for GTE Long Distance Calling Cards.
Mother's Maiden Name: _____ (To be used for security purposes when requesting changes to your account.)

INTERNAL USE ONLY

QC: _____ Reject Code: _____

REP ID	71210	PROMO	
SUP ID	11413	PROMO	
EVENT ID	01014	PROMO	
VERIFICATION #		DATE	

LANGUAGE PREFERENCE: ENG ☒ MAN ☐ CAN ☐ JPN ☐ KRN ☐ POL ☐ POR ☐ BUS ☐ SPN ☐ TAG ☐ VTN ☐ GUJ ☐

Thank you for selecting GTE Long Distance.
Your services will generally take ten business days to be activated.

22993

LD-FL-1196

1025020570

GTE Long Distance Provider Change Form

NAME: PATRICK OLENSK (First Name / Last Name)

Name on Phone Bill: DAVID OLENSKY (First Name / Last Name)

Service Address: 1050 NE 171 ST Apt. # 5T

City: NMIAMI BEACH State: FL Zip: 33162

HOME PHONE NUMBER TO BE CHANGED: 305 - 770 - 0313

Additional Numbers: ___ - ___ - ____ ___ - ___ - ____
___ - ___ - ____

Customer SSN: ___ - ___ - ____ DECLINE

If no Social Security number please provide a driver's license number: _____

I affirm that I am authorized to make long distance provider decisions for the above telephone number(s). I understand that there may be a service fee for making this change but that GTE Long Distance will compensate me for all or part of that fee. I further understand that I may designate only one long distance provider as my primary carrier for each of these services per telephone number, and that there may be a fee for changing back to my original provider. GTE Long Distance is a division of GTE Communications Corporation. GTE Communications Corporation uses the facilities of other companies in providing its services.

Customer Signature: PATRICK OLENSK Today's Date: 2 / 27 / 98

GTE Long Distance Order Form

☒ Yes, switch me to GTE Long Distance Service.
☐ Yes, switch me to Local Toll Service if available in my area.

INTERNATIONAL 300
☐ International Calling Plan ($3 monthly fee)
Country Called _____
_____
_____
☐ _____

DOMESTIC
☐ Easy Savings Plan 203
_____
☒ Total Call 360
☐ _____

MISCELLANEOUS 400
☐ Calling Card*
_____
☐ Call Me Toll-Free (With Total Call Only)
☐ _____
☐ _____ 600

*Note: You must sign up for GTE Long Distance service in order to be eligible for GTE Long Distance Calling Cards.
Mother's Maiden Name: _____ (To be used for security purposes when requesting changes to your account.)

INTERNAL USE ONLY QC: _____ Reject Code: _____

REP ID	03498	PROMO	
SUP ID	13550	PROMO²	
EVENT ID	00X	PROMO³	
VERIFICATION #		DATE:	

LANGUAGE	ENG	MAN	CAN	JPN	KRN	POL	POR	RUS	SPN	TAG	VTN	GUJ
PREFERENCE	☒	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐

Thank you for selecting GTE Long Distance.
Your services will generally take ten business days to be activated.

22994

GTE Long Distance Provider Change Form

NAME: RUBY (First Name) HART (Last Name)

Name on Phone Bill: SAMIE (First Name) (Last Name)

Service Address: 7010 NW 2 ST Apt. # 318

City: MIAMI State: FL Zip: 33126

HOME PHONE NUMBER TO BE CHANGED: 305 - 651 - 6513

Additional Numbers: ___ - ___ - ____ ___ - ___ - ____ ___ - ___ - ____

Customer SSN: ___ - ___ - ____

If no Social Security number please provide a driver's license number: H-867-892-74-941-1

I affirm that I am authorized to make long distance provider decisions for the above telephone number(s). I understand that there may be a service fee for making this change but that GTE Long Distance will compensate me for all or part of that fee. I further understand that I may designate only one long distance provider as my primary carrier for each of these services per telephone number, and that there may be a fee for changing back to my original provider. GTE Long Distance is a division of GTE Communications Corporation. GTE Communications Corporation uses the facilities of other companies in providing its services.

Customer Signature: [signature] Today's Date: 02-27-98

GTE Long Distance Order Form

☑ Yes, switch me to GTE Long Distance Service.
☑ Yes, switch me to Local Toll Service if available in my area.

INTERNATIONAL 300

☐ International Calling Plan ($3 monthly fee)
Country Called: _____
_____
_____
☐ _____

DOMESTIC 203

☐ Easy Savings Plan
_____
☑ Total Call
360 min = 6 months
☐ _____

MISCELLANEOUS 400

☐ Calling Card*
_____
☐ Call Me Toll-Free (With Total Call Only)
☐ _____ 600
☐ _____

*Note: You must sign up for GTE Long Distance service in order to be eligible for GTE Long Distance Calling Cards.
Mother's Maiden Name: _____ (To be used for security purposes when requesting changes to your account.)

INTERNAL USE ONLY — OC _____ Reject Code: _____

REP ID	10176	PROMO	
SUP ID	04353	PROMO	
EVENT ID	0104	PROMO	
VERIFICATION #		DATE:	

LANGUAGE PREFERENCE	ENG	MAN	CAN	JPN	KRN	POL	POR	RUS	SPN	TAG	VTN	GUJ
	☑	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐

Thank you for selecting GTE Long Distance
Your services will generally take ten business days to be activated.

22995

LD-PL-198

183296150

APR-09-98(THU) 09:25 GTE PSP 972 887 2702 P.002

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SL VIEW 06/01/98 06:47:32   VIEW ORDER - ASOS FORMAT                PAGE   1 +

ORDER NO   I 3614919 1R OF                                  COMP 04 29 98
TELNO  305 759 4845   CKT

     R/C DD:                COEFF :              SUFFIX:
     ITEM #:                WKWITH:              VISIT :
     REMARKS:

01   023; I3614919; 980429; 77GP; 980429; 1R; 759-4845
02   NORTELUS, LINDA M; 185 NW 107 ST; ;
0202 MIAMI SHORES; FL; 33168
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 300; ALT, S; RISK, M
03   SCORE 625; BUREAU CODE, TW; TEI, N
05   43976; LD "ONLY" PIC FEE WAIVER; ;
05   41871; GTELD RES TOTAL CALL; ;
09   18881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   42244; GTLDWEWKFREEDOM; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===>          WHO IS?          PAGING KEY
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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SL VIEW 06/01/98 06:47:32   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO   I 3614919 1R OF                                  COMP 04 29 98
TELNO  305 759 4845   CKT

09   18882244FWWD; PRO1=WC
09   759-4845; ; O-5483; 980429; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS [redacted]; ID NA; PTN NA
1101 04/29/98CXP/DMSS/20202335/GTELD OD 04/18 DD 05/04
1400 ORDER COMPLETED CTAXA85C                    T4CCXP5 04 29 98 15.38 9140 ST
1400 TEI CHANGED FROM N TO X                     T4CCXP5 04 29 98 15.37 9140 01
1400 ORDER CREATED CTAXA85C                      T4CCXP5 04 29 98 15.37 9140 ST



0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===>          WHO IS?          PAGING KEY
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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SL VIEW 06/24/98 07:21:36   VIEW ORDER - ASOS FORMAT                PAGE   1 +

ORDER NO    I 3504228 1R OF                                  COMP 04 25 98
TELNO  954 458 3220   CKT

     R/C DD:                COEFF :              SUFFIX:
     ITEM #:                WKWITH:              VISIT :
     REMARKS:

01   141; I3504228; 980425; 77XX; 980425; 1R; 458-3220
02   ADRIANA M, AZCUARA; 726 SW 7TH AVE; ;
0202 HALLANDALE; FL; 33009
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 200; ALT, D; RISK, H
03   SCORE 100; BUREAU CODE, SO; TEI, N
05   43976; LD "ONLY" PIC FEE WAIVER; ;
05   41871; GTELD RES TOTAL CALL; ;
09   18881871EZ3R; PRO1=BI
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   49979; GTELD1000FREEDOM; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===>          WHO IS?                    PAGING KEY
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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SL VIEW 06/24/98 07:21:36   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO   I 3504228 1R OF                                  COMP 04 25 98
TELNO  954 458 3220   CKT

09   18889979SOTU; PRO1=BI
09   458-3220; ; O-5483; 980425; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS [redacted]; ID NA; PTN NA
1101 04/25/98RXG/DMSS/20182003/GTELD OD 04/19 DD 05/04
1400 ORDER COMPLETED CTAXA86I                  T4CRXG5 04 25 98 09.40 9140 ST
1400 TEI CHANGED FROM N TO X                   T4CRXG5 04 25 98 09.39 9140 01
1400 ORDER CREATED CTAXA86I                    T4CRXG5 04 25 98 09.39 9140 ST


0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> _____        WHO IS? _________        PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE ;
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SL VIEW 06/19/98 09:13:46   VIEW ORDER - ASOS FORMAT              PAGE   1 +

ORDER NO   I 3738216 1R OF                                  COMP 05 05 98
TELNO  407 880 7741   CKT

     R/C DD:                COEFF :              SUFFIX:
     ITEM #:                WKWITH:              VISIT :
     REMARKS:

01   044; I3738216; 980505; 77XX; 980505; 1R; 880-7741
02   CARMON, TOMAS; 1038 ROYAL OAKS DR; ;
0202 APOPKA; FL; 32703
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 200; ALT, D; RISK, H
03   SCORE 100; BUREAU CODE, SO; TEI, N
05   43976; LD "ONLY" PIC FEE WAIVER; ;
05   41871; GTELD RES TOTAL CALL; ;
09   18881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   44086; SPANISH-LANGUAGE PREFERNC; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===>          WHO IS?          PAGING KEY
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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SL VIEW 06/19/98 09:13:46 VIEW ORDER - ASOS FORMAT PAGE 2

ORDER NO I 3738216 1R OF COMP 05 05 98
TELNO 407 880 7741 CKT

05 42244; GTLDWEWKFREEDOM; ;
09 18882244FWWD; PRO1=WC
09 880-7741; ; O-5483; 980505; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS [redacted]; ID NA; PTN NA
1101 05/05/98TXD/DMSS/20212111/GTELD SD 04/30 DD 05/15
1400 ORDER COMPLETED CTAXA860 T4CTXD3 05 05 98 07.16 9140 ST
1400 TEI CHANGED FROM N TO X T4CTXD3 05 05 98 07.15 9140 01
1400 ORDER CREATED CTAXA860 T4CTXD3 05 05 98 07.15 9140 ST

0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> WHO IS? PAGING KEY
PF14=PG FWD PF15=PG BWD PF17=+10 PGS PF18=-10 PGS PF19=LAST PG PF20=PAGE 1

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SL VIEW 06/19/98 10:06:37   VIEW ORDER - ASOS FORMAT                PAGE   1 +

ORDER NO    I 4615933 1R OF                                  COMP 06 10 98
TELNO  305 279 2344    CKT

     R/C DD:                 COEFF :                 SUFFIX:
     ITEM #:                 WKWITH:                 VISIT :
     REMARKS:

01   023; I4615933; 980610; 77XX; 980610; 1R; 279-2344
02   GUILLEN, ADAM; 9835 SW 87 ST; ;
0202 MIAMI; FL; 33173
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 300; ALT, D; RISK, M
03   SCORE 600; BUREAU CODE, SO; TEI, N
05   42245; GTLDWEWKFREEINTL; ;
09   18882245FWWI; PRO1=WC
05   00493; INTERNATIONAL CALL PLAN II; ;
09   18880493ICP2; PRO1=WC
05   41871; GTELD RES TOTAL CALL; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> _____          WHO IS? _________          PAGING KEY ____
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAG
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SL VIEW 06/19/98 10:06:37   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO   I 4615933 1R OF                                  COMP 06 10 98
TELNO  305 279 2344   CKT

09   18881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   44086; SPANISH-LANGUAGE PREFERNC; ;
09   279-2344; ; O-5483; 980610; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS [redacted]; ID NA; PTN NA
1101 06/10/98MXJ/DMSS/20288394/GTELD OD 06/07 DD 06/22
1400 ORDER COMPLETED CTAXA856                    T4CMXJ0 06 10 98 09.49 9140 ST
1400 TEI CHANGED FROM N TO X                     T4CMXJ0 06 10 98 09.47 9140 01
1400 ORDER CREATED CTAXA856                      T4CMXJ0 06 10 98 09.47 9140 ST



0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> _____          WHO IS? _______          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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SL VIEW 06/19/98 11:55:54   VIEW ORDER - ASOS FORMAT                PAGE   1 +

ORDER NO   I 4356778 1R OF                                  COMP 05 30 98
TELNO  305 556 8063   CKT

     R/C DD:                COEFF :              SUFFIX:
     ITEM #:                WKWITH:              VISIT :
     REMARKS:

01   023; I4356778; 980530; 77HD; 980530; 1R; 556-8063
02   GUERRERO, HECTOR; 7481 W 31 AVE; ;
0202 HIALEAH; FL; 33016
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 200; ALT, D; RISK, H
03   SCORE 100; BUREAU CODE, SO; TEI, N
05   41871; GTELD RES TOTAL CALL; ;
09   18881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   44086; SPANISH-LANGUAGE PREFERNC; ;
05   42245; GTLDWEWKFREEINTL; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===>          WHO IS?          PAGING KEY
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE :
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SL VIEW 06/19/98 11:55:54   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO   I 4356778 1R OF                                  COMP 05 30 98
TELNO  305 556 8063   CKT

09   18882245FWWI; PRO1=WC
05   00493; INTERNATIONAL CALL PLAN II; ;
09   18880493ICP2; PRO1=WC
09   556-8063; ; O-5483; 980530; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS [redacted]; ID NA; PTN NA
1101 05/30/98JXK/DMSS/20254068/GTELD OD 05/21 DD 06/08
1400 ORDER COMPLETED CTAXA84C                  T2CJXK2 05 30 98 13.06 9140 ST
1400 TEI CHANGED FROM N TO X                   T2CJXK2 05 30 98 13.05 9140 01
1400 ORDER CREATED CTAXA84C                    T2CJXK2 05 30 98 13.05 9140 ST


0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> ____          WHO IS? _______        PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE
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SL VIEW 06/19/98 13:16:57   VIEW ORDER - ASOS FORMAT                PAGE   1 +

ORDER NO    I 3955938 1R OF                                  COMP 05 13 98
TELNO  305 758 6704    CKT

     R/C DD:                 COEFF :                 SUFFIX:
     ITEM #:                 WKWITH:                 VISIT :
     REMARKS:

01   023; I3955938; 980513; 77XX; 980513; 1R; 758-6704
02   LEON, JAMES; 329 NE 57 ST; ;
0202 MIAMI; FL; 33137
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 200; ALT, D; RISK, H
03   SCORE 100; BUREAU CODE, SO; TEI, N
05   43976; LD "ONLY" PIC FEE WAIVER; ;
05   41871; GTELD RES TOTAL CALL; ;
09   18881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   41366; GTELD RES INTERNATIONAL DCP; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> _____          WHO IS? _______          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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JUN-24-1998 02:28 IN CONTACT 314 332 7835

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SL VIEW 06/24/98 09:57:35 VIEW ORDER - ASOS FORMAT PAGE 1 +

ORDER NO I 4605818 1R OF COMP 06 09 98
TELNO 305 666 2445 CKT

R/C DD: COEFF : SUFFIX:
ITEM #: WKWITH: VISIT :
REMARKS:

01 023; I4605818; 980609; 77EV; 980609; 1R; 666-2445
02 ALTIERY, FRED; 7641 SW 54 CT; ;
0202 MIAMI; FL; 33143
03 B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03 CTX, 0000; TAX, 3; ACCT-LIMIT, 300; ALT, D; RISK, M
03 SCORE 600; BUREAU CODE, SO; TEI, N
05 42245; GTLDWEWKFREEINTL; ;
09 18882245FWWI; PRO1=WC
05 00493; INTERNATIONAL CALL PLAN II; ;
09 18880493ICP2; PRO1=WC
05 41871; GTELD RES TOTAL CALL; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> ____ WHO IS? _____ PAGING KEY ___
PF14=PG FWD PF15=PG BWD PF17=+10 PGS PF18=-10 PGS PF19=LAST PG PF20=PAST

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4.57 CR

23030

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SL VIEW 06/24/98 09:59:23   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO   I 4605818 1R OF                                  COMP 06 09 98
TELNO  305 666 2445   CKT

09   10881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   44086; SPANISH-LANGUAGE PREFERNC; ;
09   666-2445; ; O-5483; 980609; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS [redacted]; ID NA; PTN NA
1101 06/09/98TXT/DMSS/20286755/GTELD OD 06/07 DD 06/22
1400 ORDER COMPLETED CTAXA866                    T4CTXT2 06 09 98 18.36 9140 ST
1400 TEI CHANGED FROM N TO X                     T4CTXT2 06 09 98 18.35 9140 01
1400 ORDER CREATED CTAXA866                      T4CTXT2 06 09 98 18.35 9140 ST



0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===>          WHO IS?          PAGING KEY
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE
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SL VIEW 06/24/98 11:43:57   VIEW ORDER - ASOS FORMAT                PAGE   1 +

ORDER NO   I 4601629 1R OF                                  COMP 06 09 98
TELNO  305 663 1875   CKT

     R/C DD:                COEFF :              SUFFIX:
     ITEM #:                WKWITH:              VISIT :
     REMARKS:

01   023; I4601629; 980609; 77XX; 980609; 1R; 663-1875
02   MORENO, JULIAN A; 5940 SW 46 TERR; ;
0202 MIAMI; FL; 33155
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 300; ALT, D; RISK, M
03   SCORE 600; BUREAU CODE, SO; TEI, N
05   42245; GTLDWEWKFREEINTL; ;
09   18882245FWWI; PRO1=WC
05   00493; INTERNATIONAL CALL PLAN II; ;
09   18880493ICP2; PRO1=WC
05   41871; GTELD RES TOTAL CALL; ;
00051 - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> ____          WHO IS? _______          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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23032

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SL VIEW 06/24/98 11:43:57   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO   I 4601629 1R OF                                  COMP 06 09 98
TELNO  305 663 1875   CKT

09   18881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   44086; SPANISH-LANGUAGE PREFERNC; ;
09   663-1875; ; O-5483; 980609; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS [redacted]; ID NA; PTN NA
1101 06/09/98JXK/DMSS/20286363/GTELD OD 06/07 DD 06/22
1400 ORDER COMPLETED CTAXA84C                    T2CJXK2 06 09 98 17.18 9140 ST
1400 TEI CHANGED FROM N TO X                     T2CJXK2 06 09 98 17.17 9140 01
1400 ORDER CREATED CTAXA84C                      T2CJXK2 06 09 98 17.17 9140 ST



0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> _____          WHO IS? _________          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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SL VIEW 06/24/98 11:53:36   VIEW ORDER - ASOS FORMAT                PAGE   1 +

ORDER NO    I 3779788 1R OF
TELNO  305 931 3723   CKT                                  COMP 05 06 98

     R/C DD:                 COEFF :                 SUFFIX:
     ITEM #:                 WKWITH:                 VISIT :
     REMARKS:

01   023; I3779788; 980506; 77CL; 980506; 1R; 931-3723
02   FRIJA, KEVIN; 3300 NE 192ND ST; ;
0202 MIAMI; FL; 33180
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 200; ALT, D; RISK, H
03   SCORE 100; BUREAU CODE, SO; TEI, N
05   43976; LD "ONLY" PIC FEE WAIVER; ;
05   41871; GTELD RES TOTAL CALL; ;
09   18881871EZ3R; PRO1=BI
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   49979; GTELD1000FREEDOM; ;
00051 - DATA RETRIEVED SUCCESSFULLY
COMMAND ===>          WHO IS?                    PAGING KEY
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE J
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Not Customers SS #
on order.

169.19 cnx

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SL VIEW 06/24/98 11:59:43   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO   I 3779788 1R OF                                  COMP 05 06 98
TELNO  305 931 3723   CKT

09   18889979SOTU; PRO1=BI
09   931-3723; ; O-5483; 980506; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS [redacted]; ID NA; PTN NA
1101 05/06/98TXD/DMSS/20213171/GTELD OD 04/30 DD 05/15
1400 ORDER COMPLETED CTAXA860                  T4CTXD3 05 06 98 10.31 9140 ST
1400 TEI CHANGED FROM N TO X                   T4CTXD3 05 06 98 10.30 9140 01
1400 ORDER CREATED CTAXA860                    T4CTXD3 05 06 98 10.30 9140 ST


0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> _____          WHO IS? _______          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE :
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SL VIEW 06/22/98 10:53:22   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO   I 2854698 1R OF                                  COMP 03 31 98
TELNO  915 533 9193   CKT

05   44708; EASY SAVINGS PLAN TF; ;
09   18884708REPM; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   44086; SPANISH-LANGUAGE PREFERNC; ;
09   533-9193; ; O-5483; 980331; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS NA; ID NA; PTN NA
1101 03/31/98TXD/DMSS/20142840/GTELD CD 03/19 DD 03/26
1400 ORDER COMPLETED CTAXA860                    T4CTXD3 03 31 98 05.41 9140 ST
1400 ORDER CREATED CTAXA860                      T4CTXD3 03 31 98 05.41 9140 ST



0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> _____          WHO IS? _______          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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SL VIEW 06/19/98 10:20:29   VIEW ORDER - ASOS FORMAT                PAGE   1 +

ORDER NO   I 4032336 1R OF                                  COMP 05 15 98
TELNO  954 987 2481   CKT

     R/C DD:                COEFF :              SUFFIX:
     ITEM #:                WKWITH:              VISIT :
     REMARKS:

01   141; I4032336; 980515; 77IH; 980515; 1R; 987-2481
02   FRANK, MARQUINO; 4540 SW 26TH TER; ;
0202 DANIA; FL; 33004
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 200; ALT, D; RISK, H
03   SCORE 100; BUREAU CODE, SO; TEI, N
05   41871; GTELD RES TOTAL CALL; ;
09   18881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   42244; GTLDWEWKFREEDOM; ;
09   18882244FWWD; PRO1=WC
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===>            WHO IS?                  PAGING KEY
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE
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SL VIEW 06/19/98 13:39:48   VIEW ORDER - ASOS FORMAT                PAGE   1 +

ORDER NO   I 4248365 1R OF                                    COMP 05 26 98
TELNO  305 956 2912   CKT

     R/C DD:                COEFF :              SUFFIX:
     ITEM #:                WKWITH:              VISIT :
     REMARKS:

01   023; I4248365; 980526; 77XX; 980526; 1R; 956-2912
02   OLESCO, JOSEPH; 14325 NE 10 AVE; ;
0202 NORTH MIAMI; FL; 33161
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 300; ALT, S; RISK, M
03   SCORE 570; BUREAU CODE, TW; TEI, N
05   41871; GTELD RES TOTAL CALL; ;
09   18881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   41366; GTELD RES INTERNATIONAL DCP; ;
09   18881366CESP; PRO1=WC
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===>          WHO IS?                    PAGING KEY
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE
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SL VIEW 06/19/98 13:39:48   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO   I 4248365 1R OF                                  COMP 05 26 98
TELNO  305 956 2912   CKT

05   42245; GTLDWEWKFREEINTL; ;
09   18882245FWWI; PRO1=WC
09   956-2912; ; O-5483; 980526; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS [redacted]; ID NA; PTN NA
1400 ORDER COMPLETED CTAXA866                T4CTXT2 05 26 98 16.22 9140 ST
1400 ORDER CREATED CTAXA866                  T4CTXT2 05 26 98 16.13 9140 ST



0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> _____          WHO IS? _________          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE
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SL VIEW 06/23/98 10:44:11   VIEW ORDER - ASOS FORMAT                PAGE   1 +

ORDER NO   I 4661462 1R OF                                  COMP 06 11 98
TELNO  305 758 6745   CKT

     R/C DD:              COEFF :              SUFFIX:
     ITEM #:              WKWITH:              VISIT :
     REMARKS:

01   023; I4661462; 980611; 77XX; 980611; 1R; 758-6745
02   ROMELUS, JEAN; 201 NW 91 ST; ;
0202 MIAMI; FL; 33150
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 200; ALT, D; RISK, H
03   SCORE 100; BUREAU CODE, SO; TEI, N
05   41366; GTELD RES INTERNATIONAL DCP; ;
09   18881366CESP; PRO1=WC
05   42245; GTLDWEWKFREEINTL; ;
09   18882245FWWI; PRO1=WC
05   44708; EASY SAVINGS PLAN TF; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===>          WHO IS?                    PAGING KEY
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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Credit 4.34

Slammed

23040

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SL VIEW 06/23/98 10:44:11   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO    I 4661462 1R OF                                  COMP 06 11 98
TELNO  305 758 6745    CKT

09   18884708REPM; PRO1=WC
05   4476219 SNYDER GENERAL IN LANGUAGE; ;
09   758-6745; ; O-5483; 980611; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS NA; ID NA; PTN NA
1101 06/11/98TXT/DMSS/20289570/GTELD OD 06/07 DD 06/22
1400 ORDER COMPLETED CTAXA866                  T4CTXT2 06 11 98 14.57 9140 ST
1400 ORDER CREATED CTAXA866                    T4CTXT2 06 11 98 14.56 9140 ST



0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===>          WHO IS?          PAGING KEY
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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SL VIEW 06/22/98 06:27:59   VIEW ORDER - ASOS FORMAT                PAGE   1 +

ORDER NO   I 3716889 1R OF                                  COMP 05 04 98
TELNO  305 634 6133   CKT

     R/C DD:                COEFF :              SUFFIX:
     ITEM #:                WKWITH:              VISIT :
     REMARKS:

01   023; I3716889; 980504; 77XX; 980504; 1R; 634-6133
02   MARTINEZ, ALICIA MILAGROS; 3281 NW 16 ST; ;
0202 MIAMI; FL; 33125
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 300; ALT, D; RISK, M
03   SCORE 600; BUREAU CODE, TW; TEI, N
05   43976; LD "ONLY" PIC FEE WAIVER; ;
05   41871; GTELD RES TOTAL CALL; ;
09   18881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   44086; SPANISH-LANGUAGE PREFERNC; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===>            WHO IS?                  PAGING KEY
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE
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SCAN

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SL VIEW 06/22/98 06:27:59   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO   I 3716889 1R OF                                  COMP 05 04 98
TELNO  305 634 6133   CKT

05   42245; GTLDWEWKFREEINTL; ;
09   18882245FWWI; PRO1=WC
05   00493; INTERNATIONAL CALL PLAN II; ;
09   18880493ICP2; PRO1=WC
09   634-6133; ; O-5483; 980504; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS [redacted]; ID NA; PTN NA
1101 05/04/98CXP/DMSS/20209800/GTELD OD 04/20 DD 05/05
1400 ORDER COMPLETED CTAXA85C                    T4CCXP5 05 04 98 13.07 9140 ST
1400 TEI CHANGED FROM N TO X                     T4CCXP5 05 04 98 13.06 9140 01
1400 ORDER CREATED CTAXA85C                      T4CCXP5 05 04 98 13.06 9140 ST



0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===>            WHO IS?                  PAGING KEY
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE
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SL VIEW 06/22/98 09:09:35   VIEW ORDER - ASOS FORMAT                PAGE   1 +

ORDER NO   I 3967055 1R OF                                  COMP 05 13 98
TELNO  954 730 9282   CKT

     R/C DD:                COEFF :              SUFFIX:
     ITEM #:                WKWITH:              VISIT :
     REMARKS:

01   141; I3967055; 980513; 77XX; 980513; 1R; 730-9282
02   PIERRE, FELICIE; 5832 NW 23RD ST; ;
0202 LAUDERDALE LA; FL; 33313
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 200; ALT, D; RISK, H
03   SCORE 100; BUREAU CODE, SO; TEI, N
05   43976; LD "ONLY" PIC FEE WAIVER; ;
05   41871; GTELD RES TOTAL CALL; ;
09   18881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   41366; GTELD RES INTERNATIONAL DCP; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> ____          WHO IS? _______          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE
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SL VIEW 06/22/98 09:09:35   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO    I 3967055 1R OF                                  COMP 05 13 98
TELNO  954 730 9282   CKT

09   18881366CESP; PRO1=WC
05   42245; GTLDWEWKFREEINTL; ;
09   18882245FWWI; PRO1=WC
09   730-9282; ; O-5483; 980513; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS [redacted]; ID NA; PTN NA
1101 05/13/98RXG/DMSS/20230529/GTELD OD 05/10 DD 05/26
1400 ORDER COMPLETED CTAXA86I                 T4CRXG5 05 13 98 15.53 9140 ST
1400 TEI CHANGED FROM N TO X                  T4CRXG5 05 13 98 15.51 9140 01
1400 ORDER CREATED CTAXA86I                   T4CRXG5 05 13 98 15.51 9140 ST



0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===>          WHO IS?                  PAGING KEY
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE
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SL VIEW 06/23/98 08:29:56   VIEW ORDER - ASOS FORMAT              PAGE   1 +

ORDER NO   I 4008650 1R OF                                  COMP 05 15 98
TELNO  305 635 3693   CKT

     R/C DD:                 COEFF :              SUFFIX:
     ITEM #:                 WKWITH:              VISIT :
     REMARKS:

01   023; I4008650; 980515; 77XX; 980515; 1R; 635-3693
02   GUERIN, ROBERT; 2550 NW 13 ST; ;
0202 MIAMI; FL; 33125
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY, ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 200; ALT, D; RISK, H
03   SCORE 100; BUREAU CODE, SO; TEI, N
05   43976; LD "ONLY" PIC FEE WAIVER; ;
05   41871; GTELD RES TOTAL CALL; ;
09   18881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   44086; SPANISH-LANGUAGE PREFERNC; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> _____          WHO IS? _______          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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SL VIEW 06/23/98 08:29:56   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO    I 4008650 1R OF                                  COMP 05 15 98
TELNO  305 635 3693    CKT

05    42245; GTLDWEWKFREEINTL; ;
09    18882245FWWI; PRO1=WC
05    00493; INTERNATIONAL CALL PLAN II; ;
09    18880493ICP2; PRO1=WC
09    635-3693; ; O-5483; 980515; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS [redacted]; ID NA; PTN NA
1101 05/15/98MXJ/DMSS/20233792/GTELD OD 05/11 DD 05/27
1400 ORDER COMPLETED CTAXA856                  T4CMXJ0 05 15 98 06.06 9140 ST
1400 TEI CHANGED FROM N TO X                   T4CMXJ0 05 15 98 06.04 9140 01
1400 ORDER CREATED CTAXA856                    T4CMXJ0 05 15 98 06.04 9140 ST


0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> ____          WHO IS? _______          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE J
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SL VIEW 06/22/98 11:52:20   VIEW ORDER - ASOS FORMAT                PAGE   1 +

ORDER NO   I 4356744 1R OF                                  COMP 05 30 98
TELNO  305 554 8124   CKT

     R/C DD:              COEFF :              SUFFIX:
     ITEM #:              WKWITH:              VISIT :
     REMARKS:

01   023; I4356744; 980530; 77CN; 980530; 1R; 554-8124
02   TELLEZ, PEDRO; 9450 SW 34 ST; ;
0202 MIAMI; FL; 33165
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 300; ALT, D; RISK, M
03   SCORE 600; BUREAU CODE, SO; TEI, N
05   41871; GTELD RES TOTAL CALL; ;
09   18881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   44086; SPANISH-LANGUAGE PREFERNC; ;
05   42244; GTLDWEWKFREEDOM; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> ____          WHO IS? _______          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE
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Cust has not had this TN for 10 months

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SL VIEW 06/22/98 11:52:20   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO    I 4356744 1R OF                                  COMP 05 30 98
TELNO  305 554 8124    CKT

09    18882244FWWD; PRO1=WC
09    554-8124; ; O-5483; 980530; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS [redacted]; ID NA; PTN NA
1101 05/30/98TXT/DMSS/20254055/GTELD OD 05/21 DD 06/08
1400 ORDER COMPLETED CTAXA866                  T4CTXT2 05 30 98 13.04 9140 ST
1400 TEI CHANGED FROM N TO X                   T4CTXT2 05 30 98 13.03 9140 01
1400 ORDER CREATED CTAXA866                    T4CTXT2 05 30 98 13.03 9140 ST



0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> ____          WHO IS? ________          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE
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SL VIEW 06/22/98 10:04:20   VIEW ORDER - ASOS FORMAT                PAGE   1 +

ORDER NO   I 4656369 1R OF                                  COMP 06 11 98
TELNO  305 264 3395   CKT

     R/C DD:                COEFF :              SUFFIX:
     ITEM #:                WKWITH:              VISIT :
     REMARKS:

01   023; I4656369; 980611; 77XX; 980611; 1R; 264-3395
02   FERNANDEZ, JORGE; 8140 SW 13 ST; ;
0202 MIAMI; FL; 33144
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 300; ALT, D; RISK, M
03   SCORE 600; BUREAU CODE, SO; TEI, N
05   41871; GTELD RES TOTAL CALL; ;
09   18881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   44086; SPANISH-LANGUAGE PREFERNC; ;
05   42244; GTLDWEWKFREEDOM; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> ____          WHO IS? _______          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE
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SL VIEW 06/22/98 10:04:20   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO   I 4656369 1R OF                                  COMP 06 11 98
TELNO  305 264 3395   CKT

09   18882244FWWD; PRO1=WC
09   264-3395; ; O-5483; 980611; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS [redacted]; ID NA; PTN NA
1101 06/11/98JXK/DMSS/20295722/GTELD OD 05/30 DD 06/15
1400 ORDER COMPLETED CTAXA84C                  T2CJXK2 06 11 98 13.11 9140 ST
1400 TEI CHANGED FROM N TO X                   T2CJXK2 06 11 98 13.10 9140 01
1400 ORDER CREATED CTAXA84C                    T2CJXK2 06 11 98 13.10 9140 ST


0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> ____          WHO IS? _______          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE
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SL VIEW 06/22/98 11:57:28   VIEW ORDER - ASOS FORMAT              PAGE   1 +

ORDER NO    I 3974534 1R OF                                  COMP 05 13 98
TELNO  305 447 9684   CKT

     R/C DD:                 COEFF :                 SUFFIX:
     ITEM #:                 WKWITH:                 VISIT :
     REMARKS:

01   023; I3974534; 980513; 77DC; 980513; 1R; 447-9684
02   GONZALEZ, ALDO; 520 SW 35 AVE; ;
0202 MIAMI; FL; 33135
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 200; ALT, D; RISK, H
03   SCORE 100; BUREAU CODE, SO; TEI, N
05   43976; LD "ONLY" PIC FEE WAIVER; ;
05   41871; GTELD RES TOTAL CALL; ;
09   18881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   44086; SPANISH-LANGUAGE PREFERNC; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===>  ____          WHO IS? ________          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE
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Slam

Ben is Lawyer - this Cust died 4-27-98 —

Lawyer is going to press this issue of SLAMMING to protect Consumers.

23052

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SL VIEW 06/22/98 11:57:28   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO    I 3974534 1R OF                                  COMP 05 13 98
TELNO  305 447 9684    CKT

05   42245; GTLDWEWKFREEINTL; ;
09   18882245FWWI; PRO1=WC
05   00493; INTERNATIONAL CALL PLAN II; ;
09   18880493ICP2; PRO1=WC
09   447-9684; ; O-5483; 980513; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS[redacted] ID NA; PTN NA
1101 05/13/98RXG/DMSS/20231030/GTELD OD 05/10 DD 05/26
1400 ORDER COMPLETED CTAXA86I                 T4CRXG5 05 13 98 19.24 9140 ST
1400 TEI CHANGED FROM N TO X                  T4CRXG5 05 13 98 19.24 9140 01
1400 ORDER CREATED CTAXA86I                   T4CRXG5 05 13 98 19.23 9140 ST



0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> ____          WHO IS? _______          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE
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SL VIEW 06/22/98 11:58:13   VIEW ORDER - ASOS FORMAT              PAGE   1 +

ORDER NO   I 4605743 1R OF                                  COMP 06 10 98
TELNO  305 246 1944   CKT

     R/C DD:                COEFF :              SUFFIX:
     ITEM #:                WKWITH:              VISIT :
     REMARKS:

01   023; I4605743; 980609; 77BJ; 980609; 1R; 246-1944
02   BECERRA, ARMANDO; 30064 SW 154 CT; ;
0202 HOMESTEAD; FL; 33033
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 200; ALT, D; RISK, H
03   SCORE 100; BUREAU CODE, SO; TEI, N
05   00493; INTERNATIONAL CALL PLAN II; ;
09   18880493ICP2
05   41871; GTELD RES TOTAL CALL; ;
09   18881871EZ3R
05   44762; SNYDER GENERAL IN LANGUAGE; ;
00051 - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> ____          WHO IS? _______          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE :
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Cust is deceased

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SL VIEW 06/22/98 11:58:13   VIEW ORDER - ASOS FORMAT              PAGE   2

ORDER NO   I 4605743 1R OF                                  COMP 06 10 98
TELNO  305 246 1944   CKT

05   44086; SPANISH-LANGUAGE PREFERNC; ;
09   246-1944; ; O-5483; 980609; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS [redacted]; ID NA; PTN NA
1101 06/09/98CXP/DMSS/20286737/GTELD SD 06/07 DD 06/22
1400 ORDER COMPLETED CTAXA85C                  T4CCXP5 06 09 98 18.32 9140 ST
1400 TEI CHANGED FROM N TO X                   T4CCXP5 06 09 98 18.31 9140 01
1400 ORDER CREATED CTAXA85C                    T4CCXP5 06 09 98 18.31 9140 ST
```

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0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> _____        WHO IS? _______        PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE
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SL VIEW 07/06/98 07:13:06   VIEW ORDER - ASOS FORMAT                PAGE   1 +

ORDER NO   I 3617793 1R OF                                  COMP 04 29 98
TELNO  305 757 0207   CKT

     R/C DD:                COEFF :              SUFFIX:
     ITEM #:                WKWITH:              VISIT :
     REMARKS:

01   023; I3617793; 980429; 77XX; 980429; 1R; 757-0207
02   LORENTE, CAROLYN; 700 NE 63 ST; ;
0202 MIAMI; FL; 33138
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 300; ALT, D; RISK, M
03   SCORE 600; BUREAU CODE, SO; TEI, N
05   43976; LD "ONLY" PIC FEE WAIVER; ;
05   41871; GTELD RES TOTAL CALL; ;
09   18881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   41366; GTELD RES INTERNATIONAL DCP; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> ____          WHO IS? ________          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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Not Authorized

2.24C1.

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SL VIEW 07/06/98 07:13:06   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO   I 3617793 1R OF                                  COMP 04 29 98
TELNO  305 757 0207   CKT

09   18881366CESP; PRO1=WC
05   42245; GTLDWEWKFREEINTL; ;
09   18882245FWWI; PRO1=WC
09   757-0207; ; O-5483; 980429; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS [redacted]; ID NA; PTN NA
1101 04/29/98LXW/DMSS/20200373/GTELD OD 04/26 DD 05/11
1400 ORDER COMPLETED CTAXA85U                  T4CLXW1 04 29 98 16.35 9140 ST
1400 TEI CHANGED FROM N TO X                   T4CLXW1 04 29 98 16.34 9140 01
1400 ORDER CREATED CTAXA85U                    T4CLXW1 04 29 98 16.34 9140 ST



0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> ____          WHO IS? _______          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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SL VIEW 07/06/98 06:57:00   VIEW ORDER - ASOS FORMAT                PAGE   1 +

ORDER NO   I 4818853 1R OF                                  COMP 06 18 98
TELNO  305 825 1247   CKT

     R/C DD:                COEFF :              SUFFIX:
     ITEM #:                WKWITH:              VISIT :
     REMARKS:

01   023; I4818853; 980618; 77XX; 980618; 1R; 825-1247
02   SOSA, ROSIE; 5561 W 9 AVE; ;
0202 HIALEAH; FL; 33012
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 200; ALT, D; RISK, H
03   SCORE 100; BUREAU CODE, SO; TEI, N
05   42245; GTLDWEWKFREEINTL; ;
09   18882245FWWI; PRO1=WC
05   00493; INTERNATIONAL CALL PLAN II; ;
09   18880493ICP2; PRO1=WC
05   41871; GTELD RES TOTAL CALL; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> ____          WHO IS? _______          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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Not authorized

4.22 CL

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SL VIEW 07/06/98 06:57:00   VIEW ORDER - ASOS FORMAT              PAGE   2

ORDER NO   I 4818853 1R OF                                  COMP 06 18 98
TELNO  305 825 1247   CKT

09   18881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   44086; SPANISH-LANGUAGE PREFERNC; ;
09   825-1247; ; O-5483; 980618; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS[redacted]; ID NA; PTN NA
1101 06/18/98SXJ/DMSS/20311592/GTELD OD 06/08 DD 06/23
1400 ORDER COMPLETED CTAXA86U                    T4CSXJ4 06 18 98 08.28 9140 ST
1400 TEI CHANGED FROM N TO X                     T4CSXJ4 06 18 98 08.27 9140 01
1400 ORDER CREATED CTAXA86U                      T4CSXJ4 06 18 98 08.27 9140 ST



0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> ____          WHO IS? _______          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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SL VIEW 07/06/98 11:56:32   VIEW ORDER - ASOS FORMAT                PAGE   1 +

ORDER NO   I 4147612 1R OF                                  COMP 05 20 98
TELNO  305 556 7927   CKT

     R/C DD:                COEFF :              SUFFIX:
     ITEM #:                WKWITH:              VISIT :
     REMARKS:

01   023; I4147612; 980520; 77XX; 980520; 1R; 556-7927
02   COMPTIS, CARLOS; 9732 NW 127 TER; ;
0202 HIALEAH GARDE; FL; 33018
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 300; ALT, D; RISK, M
03   SCORE 600; BUREAU CODE, SO; TEI, N
05   41871; GTELD RES TOTAL CALL; ;
09   18881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   44086; SPANISH-LANGUAGE PREFERNC; ;
05   42245; GTLDWEWKFREEINTL; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> ____          WHO IS? _________          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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Jul 06 13:56 1998 Page 1

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SL VIEW 07/06/98 11:55:46   VIEW ORDER - ASOS FORMAT              PAGE   2

ORDER NO   I 4384377 1R OF                                  COMP 06 01 98
TELNO  915 598 4562   CKT

11CI EMPL NA; CBR NA
11CJ SS NA; ID NA; PTN NA
1101 06/01/98MXJ/DMSS/20255530/GTELD OD 05/21 DD 06/08
1400 ORDER COMPLETED CTAXA856                  T4CMXJ0 06 01 98 14.03 9140 ST
1400 ORDER CREATED CTAXA856                    T4CMXJ0 06 01 98 14.02 9140 ST



0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> _____ WHO IS? _____ PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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SL VIEW 07/06/98 11:56:32   VIEW ORDER - ASOS FORMAT              PAGE   2

ORDER NO   I 4147612 1R OF                                  COMP 05 20 98
TELNO  305 556 7927   CKT

09   18882245FWWI; PRO1=WC
05   00493; INTERNATIONAL CALL PLAN II; ;
09   18880493ICP2; PRO1=WC
09   556-7927; ; O-5483; 980520; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS [redacted]; ID NA; PTN NA
1101 05/20/98MXJ/DMSS/20244567/GTELD OD 05/17 DD 06/02
1400 ORDER COMPLETED CTAXA856                    T4CMXJ0 05 20 98 17.26 9140 ST
1400 TEI CHANGED FROM N TO X                     T4CMXJ0 05 20 98 17.25 9140 01
1400 ORDER CREATED CTAXA856                      T4CMXJ0 05 20 98 17.25 9140 ST



0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> _____   WHO IS? _____   PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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Jul 06 09:17 1998 Page 1

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SL VIEW 07/06/98 07:17:02   VIEW ORDER - ASOS FORMAT              PAGE   1 +

ORDER NO    I 4356704 1R OF                                  COMP 05 30 98
TELNO  305 863 8836   CKT

     R/C DD:                 COEFF :              SUFFIX:
     ITEM #:                 WKWITH:              VISIT :
     REMARKS:

01   023; I4356704; 980530; 77CT; 980530; 1R; 863-8836
02   ZALDIVAR, ANNA L; 444 E 17 ST; ;
0202 HIALEAH; FL; 33012
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 200; ALT, D; RISK, H
03   SCORE 100; BUREAU CODE, SO; TEI, N
05   44708; EASY SAVINGS PLAN TF; ;
09   18884708REPM; PRO1=D6
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   44086; SPANISH-LANGUAGE PREFERNC; ;
09   863-8836; ; O-5483; 980530; L; TC; LP; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> _____          WHO IS? _________          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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Jul 06 09:17 1998 Page 1

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SL VIEW 07/06/98 07:17:02   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO    I 4356704 1R OF                                  COMP 05 30 98
TELNO  305 863 8836   CKT

11CI EMPL NA; CBR NA
11CJ SS NA; ID NA; PTN NA
1101 05/30/98LXH/DMSS/20254041/GTELD OD 05/21 DD 06/08
1400 ORDER COMPLETED CTAXA84I                  T2CLXH3 05 30 98 13.02 9140 ST
1400 ORDER CREATED CTAXA84I                    T2CLXH3 05 30 98 13.01 9140 ST



0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> ____          WHO IS? _________          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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314 332 7835
IN CONTACT
JUL-21-1998 23:27

MSOS:BVT PASTE(ON)

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SL VIEW 07/15/98 10:43:41   VIEW ORDER - ASOS FORMAT              PAGE   1 +

ORDER NO   I 3874791 1R OF                                    COMP 05 11 98
TELNO  305 885 3577   CKT

     R/C DD:              COEFF :              SUFFIX:
     ITEM #:              WKWITH:              VISIT :
     REMARKS: DMSS

01   023; I3874791; 980511; 77CU; 980511; 1R; 885-3577
02   ALONSO, ROSA; 154 W. 18 ST; ;
0202 HIALEAH; FL; 33010
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 200; ALT, D; RISK, H
03   SCORE 100; BUREAU CODE, SC; TEL, N
05   43976; LD "ONLY" PIC FEE WAIVER; ;
05   41871; GTELD RES TOTAL CALL; ;
09   18881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   44086; SPANISH-LANGUAGE PREFERNC; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> ____          WHO IS? _______          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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NUM

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Exhibit REP-18
Page 78

Adj $20.19

MSOS:BVT PASTE(ON)

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SL VIEW 07/15/98 14:58:09   VIEW ORDER - ASOS FORMAT              PAGE   1 •

ORDER NO  ] 4129784 1R OF                                    COMP 05 20 98
TELNO  305 558 2393   CKT

     R/C DD:              COEFF :              SUFFIX:
     ITEM #:              WKWITH:              VISIT :
     REMARKS:

01   023; I4129784; 980520; 776P; 980520; 1R; 558-2393
02   MENDEZ, ARNALDO; 160 E 55 ST; APT 12;
0202 HIALEAH; FL; 33013
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 300; ALT, D; RISK, N
03   SCORE 600; BUREAU CODE, SO; TEI, N
05   41871; GTELD RES TOTAL CALL; ;
09   10881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   44086; SPANISH-LANGUAGE PREFERWC; ;
05   42245; GTLDWKWKFREEINTL; ;
00051 - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> _          WHO IS? _______          PAGING KEY __
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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JUL-21-1998 23:28 IN CONTACT

Jul 14 12:37 1998 Page 1

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SL VIEW 07/14/98 10:33:43   VIEW ORDER - ASOS FORMAT                PAGE   1 +

ORDER NO   I 4505640 1R OF                                  COMP 06 05 98
TELNO  305 662 4045   CKT

     R/C DD:                COEFF :              SUFFIX:
     ITEM #:                WKWITH:              VISIT :
     REMARKS:

01   023; I4505640; 980605; 77BJ; 980605; 1R; 662-4045
02   SANCHEZ, JORGE; 7424 SW 54 AVE; ;
0202 MIAMI; FL; 33135
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 300; ALT, D; RISK, M
03   SCORE 600; BUREAU CODE, SO; TEI, N
05   41871; GTELD RES TOTAL CALL; ;
09   18881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   44086; SPANISH-LANGUAGE PREFERNC; ;
05   42245; GTLDWEWKFREEINTL; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> ____          WHO IS? ________          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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Jul 14 12:37 1998 Page 1

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SL VIEW 07/14/98 10:33:43   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO   I 4505640 1R OF                                  COMP 06 05 98
TELNO  305 662 4045   CKT

09   18882245FWWI; PRO1=WC
05   00493; INTERNATIONAL CALL PLAN II; ;
09   18880493ICP2; PRO1=WC
09   662-4045; ; O-5483; 980605; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS [redacted]; ID NA; PTN NA
1101 06/05/98TXD/DMSS/20278305/GTELD OD 06/02 DD 06/17
1400 ORDER COMPLETED CTAXA860                    T4CTXD3 06 05 98 10.22 9140 ST
1400 TEI CHANGED FROM N TO X                     T4CTXD3 06 05 98 10.21 9140 01
1400 ORDER CREATED CTAXA860                      T4CTXD3 06 05 98 10.21 9140 ST



0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===>          WHO IS?          PAGING KEY
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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MSOS:BVT PASTE(ON)

SL VIEW 07/16/98 13:49:37   VIEW ORDER - ASOS FORMAT              PAGE   1 •

ORDER NO   1 4152972 1R OF                                    COMP 05 21 98
TELNO  305 221 1456   CKT

     R/C DD:              COEFF :              SUFFIX:
     ITEM #:              WKWITH:              VISIT :
     REMARKS:

01   023; 14152972; 980521; 77XX; 980521; 1R; 221-1456
02   FLACON, SECUNDINO; 9390 W FLAGLER ST; APT 228;
0202 MIAMI; FL; 33174
03   B/C, 10; OCC, 36; DST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 300; ALT, D; RISK, M
03   SCORE 600; BUREAU CODE, 90; TEI, N
05   43976; LD "ONLY" PIC FEE WAIVER; ;  ?
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   44086; SPANISH-LANGUAGE PREFERNC; ;
05   42245; GTLDWENKFREE1NTL; ;
09   18882245FWNI; PRO1=WC
00051 - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> ____          WHO IS? _______          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1

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JUL-28-1998 20:37 IN CONTACT 314 332 7535

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Exhibit REP-18
Page 82

JUL-28-1998 22:37 IN CONTACT 314 332 7835

Adj 60.61

MSOS/BVT PASTE(ON)

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SL VIEW 07/21/98 14:06:58   VIEW ORDER - ASOS FORMAT              PAGE   1 +

ORDER NO   1 3999225 1R OF                                    COMP 05 14 98
TELNO  954 785 2343   CKT

     R/C DD:              COEFF :              SUFFIX:
     ITEM #:              WKWITH:              VISIT :
     REMARKS:

01   141; 13999225; 980514; 778E; 980514; 1R; 785-2343
02   GUERRIER, GUERIEL; 904 SW 10TH DR; ;
0202 POMPANO BEACH; FL; 33060
03   B/C, 10; OCC, 36; DST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 300; ALT, D; RISK, M
03   SCORE 600; BUREAU CODE, SO; TEL, N
05   43976; LD "ONLY" PIC FEE WAIVER; ;
05   41871; GTELD RES TOTAL CALL; ;
09   18881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   42244; GTLDWEWKFREEDOM; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> _____          WHO IS? _______          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1

%   Waiting for Host                                              NUM
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JUL-28-1999 20:38 IN CONTACT 314 332 7835 P.1

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                    MSOS:BVT PASTE(ON)
SL VIEW 07/17/98 15:21:21   VIEW ORDER - ASOS FORMAT              PAGE   1 +

ORDER NO   I 4605551 1R OF                                  COMP 06 10 98
TELNO  305 225 3637   CKT

     R/C OD:              COEFF :              SUFFIX:
     ITEM #:              NKWITH:              VISIT :
     REMARKS:

01   023; I4605551; 980609; 77XX; 980609; 1R; 225-3637
02   ALCALDE, MARY; 11430 SW 47 TER; ;
0202 MIAMI; FL; 33165
03   B/C, 10; OCC, 35; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 300; ALT, D; RISK, M
03   SCORE 600; BUREAU CODE, SO; TEI, M
05   42245; GTLDWEWKFREEINTL; ;
09   18802245FWWI; PRO1=WC
05   00493; INTERNATIONAL CALL PLAN II; ;
09   18800493ICP2; PRO1=WC
05   41871; GTELD RES TOTAL CALL; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> _____          WHO IS? _______          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1

M                                                                  NUM
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SL VIEW 07/29/98 06:13:51   VIEW ORDER - ASOS FORMAT                PAGE   1 +

ORDER NO   I 2991975 1R OF                                  COMP 04 06 98
TELNO  954 985 5629   CKT

     R/C DD:                COEFF :              SUFFIX:
     ITEM #:                WKWITH:              VISIT :
     REMARKS:

01   141; I2991975; 980406; 77XX; 980406; 1R; 985-5629
02   RODRIGUEZ, ELIZABETH; 3113 JOHNSON ST; ;
0202 HOLLYWOOD; FL; 33023
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 200; ALT, D; RISK, H
03   SCORE 100; BUREAU CODE, SO; TEI, N
05   43976; LD "ONLY" PIC FEE WAIVER; ;
05   41871; GTELD RES TOTAL CALL; ;
09   18881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   42244; GTLDWEWKFREEDOM; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===>          WHO IS?          PAGING KEY
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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Jul 29 08:17 1998 Page 1

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SL VIEW 07/29/98 06:13:51   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO   I 2991975 1R OF                                  COMP 04 06 98
TELNO  954 985 5629   CKT

09   18882244FWWD; PRO1=WC
09   985-5629; ; O-5483; 980406; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS[redacted] ID NA; PTN NA
1101 04/06/98RXG/DMSS/20154707/GTELD OD 03/20 DD 03/27
1400 ORDER COMPLETED CTAXA86I                  T4CRXG5 04 06 98 05.31 9140 ST
1400 TEI CHANGED FROM N TO X                   T4CRXG5 04 06 98 05.30 9140 01
1400 ORDER CREATED CTAXA86I                    T4CRXG5 04 06 98 05.30 9140 ST


 DFS064 06:14:28 DESTINATION CAN NOT BE FOUND OR CREATED
COMMAND ===> ____          WHO IS? _______          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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SL VIEW 06/29/98 12:46:24   VIEW ORDER - ASOS FORMAT                PAGE   1 +

ORDER NO   I 2427145 1R OF                                  COMP 03 12 98
TELNO  305 551 7267   CKT

     R/C DD:                COEFF :              SUFFIX:
     ITEM #:                WKWITH:              VISIT :
     REMARKS:

01   023; I2427145; 980312; 77XX; 980312; 1R; 551-7267
02   VALDES, ARMANDO; 3950 SW 130 AVE; ;
0202 MIAMI; FL; 33175
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 200; ALT, D; RISK, H
03   SCORE 100; BUREAU CODE, SO; TEI, N
05   43976; LD "ONLY" PIC FEE WAIVER; ;
05   41871; GTELD RES TOTAL CALL; ;
09   18881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   44086; SPANISH-LANGUAGE PREFERNC; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> ____          WHO IS? ________          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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Jun 29 14:46 1998 Page 1

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SL VIEW 06/29/98 12:46:24   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO   I 2427145 1R OF                                  COMP 03 12 98
TELNO  305 551 7267   CKT

05   41366; GTELD RES INTERNATIONAL DCP; ;
09   18881366CESP; PRO1=WC
05   42245; GTLDWEWKFREEINTL; ;
09   18882245FWWI; PRO1=WC
09   551-7267; ; O-5483; 980312; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS NA; ID NA; PTN NA
1101 03/12/98RXP/DMSS/20111035/GTELD OD 02/28 DD 03/06
1400 ORDER COMPLETED CTAXA840                T2CRXP1 03 12 98 07.08 9140 ST
1400 ORDER CREATED CTAXA840                  T2CRXP1 03 12 98 07.07 9140 ST



0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> _____          WHO IS? _______          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE
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SL VIEW 06/29/98 15:51:55   VIEW ORDER - ASOS FORMAT              PAGE   1 +

ORDER NO   I 4122663 1R OF                                  COMP 05 20 98
TELNO  305 883 8767   CKT

     R/C DD:                COEFF :              SUFFIX:
     ITEM #:                WKWITH:              VISIT :
     REMARKS:

01   023; I4122663; 980520; 77XX; 980520; 1R; 883-8767
02   LOPEZ, FRANCISCO; 1420 E 8 CT; ;
0202 HIALEAH; FL; 33012
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 200; ALT, D; RISK, H
03   SCORE 100; BUREAU CODE, SO; TEI, N
05   44708; EASY SAVINGS PLAN TF; ;
09   18884708REPM; PRO1=D6
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   44086; SPANISH-LANGUAGE PREFERNC; ;
09   883-8767; ; O-5483; 980520; L; TC; LP; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> _____          WHO IS? _________          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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Jun 29 17:52 1998 Page 1

SL VIEW 06/29/98 15:52:01 VIEW ORDER - ASOS FORMAT PAGE 2

ORDER NO I 4122663 1R OF COMP 05 20 98
TELNO 305 883 8767 CKT

11CI EMPL NA; CBR NA
11CJ SS [redacted]; ID NA; PTN NA
1101 05/20/98TXT/DMSS/20242188/GTELD OD 05/17 DD 06/02
1400 ORDER COMPLETED CTAXA866 T4CTXT2 05 20 98 08.26 9140 ST
1400 TEI CHANGED FROM N TO X T4CTXT2 05 20 98 08.25 9140 01
1400 ORDER CREATED CTAXA866 T4CTXT2 05 20 98 08.25 9140 ST

0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> _____ WHO IS? _____ PAGING KEY ___
PF14=PG FWD PF15=PG BWD PF17=+10 PGS PF18=-10 PGS PF19=LAST PG PF20=PAGE 1

Jun 29 17:02 1998 Page 1

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SL VIEW 06/29/98 15:02:01   VIEW ORDER - ASOS FORMAT              PAGE   1 +

ORDER NO    I 4503593 1R OF                                  COMP 06 05 98
TELNO  954 458 8106   CKT

     R/C DD:                COEFF :              SUFFIX:
     ITEM #:                WKWITH:              VISIT :
     REMARKS:

01   141; I4503593; 980605; 77XX; 980605; 1R; 458-8106
02   FALCONE, CARMINE; 1022 NE 25TH AVE; ;
0202 HALLANDALE; FL; 33009
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 200; ALT, D; RISK, H
03   SCORE 100; BUREAU CODE, SO; TEI, N
05   41871; GTELD RES TOTAL CALL; ;
09   18881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   42244; GTLDWEWKFREEDOM; ;
09   18882244FWWD; PRO1=WC
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> _____          WHO IS? _________          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE
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Jun 29 17:02 1998 Page 1

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SL VIEW 06/29/98 15:02:06   VIEW ORDER - ASOS FORMAT              PAGE   2

ORDER NO   I 4503593 1R OF                                  COMP 06 05 98
TELNO  954 458 8106   CKT

09   458-8106; ; O-5483; 980605; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS NA; ID NA; PTN NA
1101 06/05/98TXT/DMSS/20278010/GTELD OD 06/02 DD 06/17
1400 ORDER COMPLETED CTAXA866                  T4CTXT2 06 05 98 09.35 9140 ST
1400 ORDER CREATED CTAXA866                    T4CTXT2 06 05 98 09.33 9140 ST



0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> _____          WHO IS? _________          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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Jun 26 18:23 1998 Page 1

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SL VIEW 06/26/98 16:20:05   VIEW ORDER - ASOS FORMAT                PAGE   1 +

ORDER NO   I 4397620 1R OF                                  COMP 06 01 98
TELNO  305 541 4346   CKT

     R/C DD:              COEFF :              SUFFIX:
     ITEM #:              WKWITH:              VISIT :
     REMARKS:

01   023; I4397620; 980601; 77EK; 980601; 1R; 541-4346
02   CALVO, ANA; 3298 NW 13 TER; ;
0202 MIAMI; FL; 33163
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 200; ALT, D; RISK, H
03   SCORE 100; BUREAU CODE, SO; TEI, N
05   41871; GTELD RES TOTAL CALL; ;
09   18881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   44086; SPANISH-LANGUAGE PREFERNC; ;
05   42245; GTLDWEWKFREEINTL; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> _____          WHO IS? _________          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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CI #5.84

Jun 26 18:23 1998 Page 1

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SL VIEW 06/26/98 16:20:05   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO    I 4397620 1R OF                                  COMP 06 01 98
TELNO  305 541 4346    CKT

09    18882245FWWI; PRO1=WC
05    00493; INTERNATIONAL CALL PLAN II; ;
09    18880493ICP2; PRO1=WC
09    541-4346; ; O-5483; 980601; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS [redacted]; ID NA; PTN NA
1101 06/01/98LXW/DMSS/20271505/GTELD OD 05/22 DD 06/09
1400 ORDER COMPLETED CTAXA85U                    T4CLXW1 06 01 98 18.41 9140 ST
1400 TEI CHANGED FROM N TO X                     T4CLXW1 06 01 98 18.40 9140 01
1400 ORDER CREATED CTAXA85U                      T4CLXW1 06 01 98 18.40 9140 ST



0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> _____          WHO IS? _________          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE
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23120

Jun 29 10:55 1998 Page 1

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SL VIEW 06/29/98 08:54:48   VIEW ORDER - ASOS FORMAT                PAGE   1 +

ORDER NO   I 4749767 1R OF                                  COMP 06 16 98
TELNO  305 552 5547   CKT

     R/C DD:                COEFF :              SUFFIX:
     ITEM #:                WKWITH:              VISIT :
     REMARKS:

01   023; I4749767; 980615; 77XX; 980615; 1R; 552-5547
02   MON, MODESTO; 11225 SW 3 ST; ;
0202 MIAMI; FL; 33174
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 300; ALT, D; RISK, M
03   SCORE 600; BUREAU CODE, SO; TEI, N
05   42245; GTLDWEWKFREEINTL; ;
09   18882245FWWI; PRO1=WC
05   00493; INTERNATIONAL CALL PLAN II; ;
09   18880493ICP2; PRO1=WC
05   41871; GTELD RES TOTAL CALL; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> _____          WHO IS? _________          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 3
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SL VIEW 06/25/98 16:10:32   VIEW ORDER - ASOS FORMAT              PAGE   1 +

ORDER NO   I 4362722 1R OF                                  COMP 06 01 98
TELNO  305 882 1644   CKT

     R/C DD:              COEFF :              SUFFIX:
     ITEM #:              WKWITH:              VISIT :
     REMARKS:

01   023; I4362722; 980601; 77XX; 980601; 1R; 882-1644
02   DIAZ, IRENE; 950 W 3 AVE; ;
0202 HIALEAH; FL; 33010
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 300; ALT, D; RISK, M
03   SCORE 600; BUREAU CODE, SO; TEI, N
05   41871; GTELD RES TOTAL CALL; ;
09   18881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   44086; SPANISH-LANGUAGE PREFERNC; ;
05   42245; GTLDWEWKFREEINTL; ;
00051 - DATA RETRIEVED SUCCESSFULLY
COMMAND ===>              WHO IS?                    PAGING KEY
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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& 14,50

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SL VIEW 06/25/98 16:10:32   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO    I 4362722 1R OF                                  COMP 06 01 98
TELNO  305 882 1644   CKT

09   18882245FWWI; PRO1=WC
05   00493; INTERNATIONAL CALL PLAN II; ;
09   18880493ICP2; PRO1=WC
09   882-1644; ; O-5483; 980601; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS [redacted]; ID NA; PTN NA
1101 06/01/98TXT/DMSS/20255117/GTELD OD 05/21 DD 06/08
1400 ORDER COMPLETED CTAXA866                    T4CTXT2 06 01 98 07.33 9140 ST
1400 TEI CHANGED FROM N TO X                     T4CTXT2 06 01 98 07.32 9140 01
1400 ORDER CREATED CTAXA866                      T4CTXT2 06 01 98 07.32 9140 ST



0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===>          WHO IS?                  PAGING KEY
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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Type of Complaint:	Vr	nding:	Unauthorized Changes	9/12/98	

Status	BTN	Date of TPV	Process History	Investigation Results
Closed	718-237-2113	F	No response to verification letter, order submitted, order accepted, order cancelled.	Fraudulent LOA; Representative have been terminated on 9/8.
Closed	718-627-6527	F	QOC confirmed; order accepted; order rejected.	Fraudulent LOA; Representative have been terminated on 9/18.
Closed	954-457-4201	F	QOC confirmed; order accepted; order rejected.	Fraudulent LOA; Reprsentative was terminated 9/10.
Closed	718-493-0790	F	QOC confirmed; order accepted; order rejected.	Fraudulent LOA; Representative was terminated 9/18.
Open	313-393-3831	F	Social sercurity verified; order was accepted.	LOA exists, but customer hasn't/won't review it; Representative terminated 9/14.
Open	718-445-5527	F	Order sent without confirmation; order accepted; order rejected.	Representative terminated on 9/14.
Open	305-947-8003	F	No response to verification letter, order submitted, order accepted, order cancelled.	Representative terminated on 9/14.

Type of Complaint:	V.	nding:	Unauthorized Changes	9/19/98	
Status	**BTN**	**Date of TPV**	**Process History**	**Investigation Results**	
Open	954-921-7282	F	QOC confirmed; order submitted; order accepted; order cancelled.		
Open	773-846-8314	F	QOC confirmed; order submitted; order accepted		
Open	305-551-8372	F	QOC confirmed 8-31; accepted 9-11; cancelled 9-21; Also already submitted 3 different times to Snyder on 8-11,9-17 and 9-24.		
Open	305-232-4378	F	QOC confirmed; order submitted; order accepted; order cancelled.		
Open	301-384-7828	8/17/98 O	QOC confirmed; order submitted; order accepted; order cancelled.		
Open	718-604-8110	F	1/21/98 Order submitted, 1/26/98 Order verified, 1/29/98 Cancelled, 3/20/98 Order accepted, and 5/19/98 Order rejected.		
Open	305-852-9599	F	No response to Verification Letter; order submitted; order accepted; order cancelled (WTN not found).		
Open	305-893-6768	F	NOL not responded to; order submitted; order accepted; order cancelled by customer.		
Open	718-377-8356	F	QOC confirmed; order submitted; order accepted; order cancelled.		
Open	954-764-8956	F	No response to Verification letter; order submitted; order accepted; order cancelled by customer.		
Open	941-924-2848	F	QOC confirmed; order submitted; order accepted; order cancelled.		
Open	954-456-0751	F	No response to Verification Letter, order accepted, order cancelled.		
Open	313-491-2791	F	SS# verified, order accepted.		

Type of Complaint:	uthorized Changes	Week Ending:	10/9/98		
Status	**BTN**	**Date of TPV**	**Process History**	**City,State**	**Investigation Results**
Open	718/446-0690		NOT A SNYDER SALE		
Open	305/274-3415	F	Sent verification letter on 9/25; letter was disputed on 10/5.	Miami, FL	
Open	941/955-8065	F	Social security verified, verification letter sent; no response to verification letter; order submitted to GTE on 10/14.	Sarasota, FL	
Open	212/877-6712	F	No response to verification letter; order submitted on 9/9; order accepted 9/17; order cancelled on 9/24.	New York, New York	
Open	954/431-1059	F	Sent verification letter on 9/25; letter was disputed on 10/7.	Miramar, FL	
Open	941/923-2051	F	Sent verification letter on 9/29; letter was disputed on 10/5.	Sarasota, FL	
Open	407/889-5087	F	No QOC; order submitted on 3/4; accepted 3/5; cancelled on 3/16.	Apopka, FL	
Open	305/652-6072	F	QOC confirmed; order accepted on 9/17; order cancelled 10/2.	Miami, FL	
Open	501/664-1471	9/15/98 O	Order accepted on 9/21.	Little Rock, AR	
Open	305/666-4320	F	Sent verification letter on 9/30; letter was disputed on 10/5.	Miami, FL	
Open	202/244-6222	F	QOC confirmed; order accepted on 9/23; order cancelled 10/5.	Washington DC	
Open	561/495-8427	F	No response to verification letter; order submitted on 6/23; order accepted 6/29;.	Delray Beach, FL	
Open	718/746-7945	F	No response to verification letter; order submitted on 9/17; order accepted 9/24; order cancelled on 9/28.	Whitestone, NY	

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Type of Complaint:	ek Ending:	Unauthorized Changes	10/9/98		
Status	**BTN**	**TPV**	**Process History**	**City,State**	**Investigation Results**
Open	516/333-0663	F	QOC confirmed; order accepted on 9/21; order cancelled 10/8.	Westbury,NY	
Open	305/823-7338	F	No response to verification letter; order submitted on 6/25; order accepted 7/22; order cancelled on 10/13.	Hialeah,FL	
Open	909/468-9640	F 4/26/98	Order accepted 5/4;Order canceled 5/18	Rowland Heights, CA	
Open	516/661-6221	F	QOC confirmed; order accepted on 9/28; order cancelled 10/13.	North Babylon, NY	
Open	561/683-6509	F	QOC confirmed; order accepted on 9/21; order cancelled 10/9.	West Palm Beach, FL	
Open	718/241-1081	F	No verification; order submitted 2/16; accepted 4/20.	Brooklyn, NY	
Open	305/651-8319	F	No response to verification letter; order submitted; pic restricted.	N. Miami, FL	
Open	305/666-4320	F	**SEE ABOVE - DUPLICATE**		
Open	305/232-3746	F	QOC confirmed; order accepted on 9/28; order cancelled 10/5.	Miami, FL	
Open	954/921-2226	F	QOC confirmed; order accepted on 7/15; order cancelled 9/14.	Dania, FL	
Open	407/348-2049	F	QOC confirmed; order accepted on 9/28; order cancelled 10/9.	Kissimmiee, FL	
Open	708/681-3269	F	QOC confirmed; order accepted on 10/5.	Maywood, IL	
Open	718/824-5358	F	No response to verification letter; order submitted on 8/20; order accepted 8/31; order cancelled on 9/28.	Bronx, NY	
Open	718/383-9280	F	QOC confirmed; order accepted on 10/1; order cancelled 10/13.	Brooklyn, NY	
Open	305/231-8128	F	QOC confirmed; order accepted on 10/2; order cancelled 10/13.	Miami, FL	
Open	718/965-1777	F	No response to verification letter; order submitted on 8/18; pic restrict.	Brooklyn, NY	
Open	714/821-9289	F 8/8/98	Accepted 8/19.	Cypress, CA	

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Type of Complaint:	Unauthorized Changes	Week Ending:	10/16/98		
Status	**BTN**	**Date of TPV**	**Process History**	**City,State**	**Investigation Results**
Open	313/861-7865	F	Verification sent 9/16 ; No reponse;Order submitted 9/16; Accepted 9/22	Detroit, MI.	
Open	407/788-6709	F	Verification letter disputed. ;Cancelled 10/19	Altamonte Springs , FL	
Open	718/643-0878		Not a Snyder sale.		
Open	305/819-6733	F	Order cancelled 10/19	Miami, Fl	
Open	718/454-6604	F	Verification letter disputed. ;Cancelled 10/15	Flushing, NY	
Open	716/235-5646	O 7/11/98	Order submitted 7/13; Pending	Rochester, NY	
Open	305/252-8729	F		Miami, Fl	
Open	513/793-7349	O 9/23/98	Order submitted 9/23; Accepted 9/30; Cancelled 10/8.	Cincinnati, OH	
Open	407/332-9469	F	Verification sent 9/29 , No reponse;Order submitted 9/29; Accepted 10/5	Longwood, FL	
Open	305/756-9429	F	Verification sent 9/16 , No reponse;Order submitted 9/16; Accepted 9/24; Cancelled 10/13	Miami, Fl	
Open	305/663-2659	F	Order submitted by 11 sales reps; SSN verification 7/15; Submitted 7/15; Accepted 7/22; Cancelled 7/30.	Miami, Fl	
Open	305/661-7021	F	QOC confirmed 9/4; Submitted 9/4; Accepted 9/17.	Miami, Fl	
Open	407/321-1053	F	QOC confirmed 9/24; Submitted 9/24; Accepted 10/2; Cancelled 10/13	Lake Mary, FL	

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Type of Complaint:	Unauthorized Changes	Week Ending:	10/16/98		
Status	**8 313/272-9308**				**Investigation Results**
Open	305/255-5771	F	QOC confirmed 8/28; Submitted 8/28; Accepted 9/8; Cancelled 10/2.	Miami, FL	
Open	305/827-1690	F	QOC confirmed 8/19; Submitted 8/19; Accepted 8/31; Cancelled 9/8.	Hialeah, FL	
Open	305/758-4023	F	QOC confirmed 8/2; Submitted 8/2; Accepted 10/8; Cancelled 10/13.	Miami Shores, FL	
Open	407/344-3997	F	Verification sent 9/1 , No reponse;Order submitted 9/1; Accepted 9/15; Cancelled	Kissimmee, FL	
Open	716/334-5675	O 8/25/98	Order submitted 8/26; Accepted 9/2	Rochester, NY	
Open	305/947-5842	F	Order submitted by 3 sales reps; Verification sent 8/21, No response; Order submitted 8/21; Accepted 8/31	Miami, FL	
Open	954/922-1071	F	Verification sent 9/9 , No reponse;Order submitted 9/9; Cancelled 9/16.	Hollywood, FL	
Open	407/277-7222	F	Order submitted by 2 sales reps;QOC confirmed10/2; Submitted 10/2; Accepted 10/8; Cancelled 10/16.	Orlando, FL	

Type of Complaint:	Week Ending:	Unauthorized Changes	10/23/98		
Status	**BTN**	**Date of TPV**	**Process History**	**City,State**	**Investigation Results**
Open	313-862-9012	F	Verification letter disputed.	Detroit, MI	
Open	954-722-6824	F	No response to verification letter; order accepted on 10/14; order cancelled on 10/16.	Tamarec, FL	
Open	941-358-9055	F	QOC confirmed; order rejected because WTN ineligible for subscription	Sarasota, FL	
Open	718-782-9521	F	Verification letter disputed.	Brooklyn, NY	
Open	305-220-3104	F	Order placed 3 times; 1 time the order was confirmed; the 2nd time the customer stated that he does not remember the order when call from QOC. The 3rd time Snyder did not proceed because it was a duplicate order.	Miami, FL	
Open	415-673-0930	8/27/98 O	Order submitted on 9/3 and cancelled on 9/14.	San Francisco, CA	
Open	941-351-9203	F	Verification letter disputed.	Sarasota, FL	
Open	214-327-4015	F	QOC confirmed; order accepted and then cancelled.	Dallas, TX	
Open	718-768-9812	F	QOC confirmed; order accepted and then cancelled.	Brooklyn, NY	
Open	941-383-4086	F	QOC confirmed; order accepted and then cancelled.	Saracota, FL	
Open	305-442-4224	F	QOC confirmed; order cancelled because of Pic restrict.	Miami, FL	
Open	718-875-4796	F	QOC confirmed; order cancelled because of Pic restrict.	Brooklyn, NY	

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Open	212-427-5018		QOC confirmed; order acce and then cancelled.	New York, NY	
Status	**BTN**	**Date of TPV**	**Process History**	**City,State**	**Investigation Results**
Open	610-449-6051	O 7/15/98	Order accepted 7/30 and cancelled 9/18.	Haverton, PA	
Open	718-643-0626	F	QOC confirmed; order accepted 10/8.	Brooklyn, NY	
Open	305-854-7469	F	QOC confirmed; order accepted and then cancelled.	Miami, FL	
Open	305-264-5435	F	QOC confirmed; order accepted and then cancelled.	Miami, FL	
Open	708-799-2444	F	Social Security number verified, order accepted on 10/15/98.	Homewood, IL	
Open	830-278-8414	O 6/18/98	Order reject because of Pic Restrict.	Uvadale, TX	
Open	718-854-4591	F	QOC confirmed; order accepted and then cancelled.	Brooklyn, NY	
Open	305-227-6698	F	Order submitted by 10 different sales reps; verification letter disputed.	Miami, FL	
Open	561-369-4714	F	No response to verification letter; order accepted on 8/27; order cancelled on 9/28.	Boynton, FL	
Open	972-276-7023	O 3/3/98	Order accepted 3/9; order cancelled 9/11.	Garland, TX	
Open	713-729-0623	F	QOC confirmed, order accepted; order cancelled.	Houston, TX	
Open	305-893-9872	F	No response to verification letter; order accepted on 7/15; order cancelled on 8/24.	Miami, FL	
Open	718-456-2412	F	QOC confirmed,. Order accepted; order cancelled.	Brooklyn, NY	

Type of Complaint	Unauthorized Charges	Week Ending:	~~11/8/98~~ 10-30-98		
Status	**BTN**	**Date of TPV**	**Process History**	**City,State**	**Investigation Results**
Open	305-233-4284	F	QOC Confirmed 9/17; Submitted 9/17; Accepted 9/24; Canceled through LEC 10/9	Miami, Fl	
Open	407-679-7326	F	QOC Confirmed 10/2; Submitted 10/2; Accepted 10/7; Canceled, pic dispute 10/29	Orlando, FL	
Open	909-587-0061	8/6/98 F	Order submitted 8/13; Accepted 8/17; Canceled 9/28	Temecula, CA	
Open	407-332-6895	F	QOC Confirmed 9/15; Submitted 9/15; Accepted 9/21; Canceled 9/30	Longwood, FL	
Open	972-552-9161	F	SSN verified 10/9; Submitted 10/9; Accepted 10/19; canceled 10/2	Forney, TX	
Open	212-974-0650	F	Sent to dialer for OBV 10/6; Hold OV C3 waiting update10/16; Canceled, disputed sale 10/19	New York, NY	
Open	954-923-8345	F	QOC confirmed 7/13; Submitted 7/14; Accepted 7/22	Hollywood, FL	
Open	954-962-4279	F	VL sent, no response 8/11; Submitted 8/11; Accepted 8/19; Canceled 10/5	Hollywood, FL	
Open	626-403-1856	5/25/98 F	Order submitted 6/3; Accepted 6/10; Canceled 10/29	S. Pasadena, CA	
Open	305-893-9867	F	QOC Confirmed 10/2; Submitted 10/2; Accepted 10/8; Canceled 10/15	N. Miami Beach, FL	
Open	718-230-4037	F	QOC confirmed 9/21; Submitted 9/21; Accepted 9/28; Canceled 10/13	Brooklyn, NY	
Open	718-386-2636	F	QOC Confirmed 3/31; Submitted 3/31; Accepted 4/10	Ridgewood, NY	
Open	305-258-5715	F	VL sent, no response 10/6; Submitted 10/6; Canceled, pic restrict. 10/13	Homestead, FL	
Open	305-595-6623	F	QOC Confirmed 9/11; Submitted 9/11; Accepted 9/21; Canceled 10/30	Miami, FL	
Open	313-259-1050	F	VL sent, no response 10/7; Submitted 10/7; Pending 10/8	Detroit, MI	

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Type of Complaint	Unauthorized Submission	Week endind:	11/6/98		
Status			**Process History**		**Investigation Results**
Open	305-251-5206	F	QOC Confirmed 9/10; Submitted 9/10; Accepted 9/21; Canceled 10/2	Miami, Fl	
Open	305-378-6710	F	QOC confirmed 8/5; Submitted 8/5, 8/17, 8/26; Accepted 9/23; Canceled 9/11, 9/21, 9/23,	Miami, Fl	
Open	305-235-0765	F	QOC confirmed 9/18; Ready to send 9/21; Submitted 9/21; Accepted 9/28; Canceled, no fault pic 9/29	Miami, Fl	
Open	954-428-7735	F	QOC confirmed 10/21; Submitted 10/21; Accepted 11/2; Canceled 11/4	Deerfield Beach, FL	
Open	212-838-5856	F	VL sent, no response 9/17; Submitted 9/17;Canceled, pic restrict 9/24	New York, NY	
Open	305-279-4062	F	QOC confirmed 9/4; Submitted 9/4; Accepted 9/17; Canceled, 9/21, 9/23,	Miami, Fl	
Open	941-262-8715	F	VL sent, no response 10/6; Submitted 10/6;Accepted 10/13; Canceled 10/26	Naples, FL	
Open	954-525-9617	F	VL sent, no response 10/7; Submitted 10/7; Accepted 10/13; Canceled 11/2	Ft. Lauderdale, FL	
Open	941-353-3025	F	QOC Confirmed 8/18; Submitted 8/18; Accepted 8/25; Canceled 9/8	Naples, FL	
Open	305-388-6469	F	QOC confirmed 10/14; Submitted 10/14; Accepted 10/20; Canceled 10/28	Miami, Fl	
Open	941-388-2265	F	QOC Confirmed 10/19; Submitted 10/19; Accepted 10/22; Canceled 10/30	Sarasota, FL	
Open	313-925-7147	F	QOC confirmed 9/28; Submitted 9/28; Accepted 10/5;	Detroit, MI	
Open	305-248-7815	F	VL sent, no response 9/17; Submitted 9/17; Canceled, pic restricted 9/22	Homestead, FL	
Open	305-253-8031	F	QOC confirmed 9/2; Submitted 9/2; Accepted 9/15; Canceled 10/16	Miami, Fl	
Open	305-634-5024		NOT A SNYDER SALE		

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Type of Complaint:	unauthorized switch	Week Ending:	~~11/13/98~~ 11-6-98		
Status	BTN	TPV Date	Process History	City,State	Investigation Results
Open	305-598-8731	F	Verification sent 10/16, No response; Order submitted 10/16; Accepted 10/22; Cancelled 11/9.	Miami, FL	
Open	941-493-5672	F	QOC confirmed 10/21; Submitted 10/21; Accepted 10/23.	Venice, FL	
Open	941-346-0312	F	Verification sent 10/21, No response; Order submitted 10/21; WTN ineligible for subscription 10/23	Sarasota, FL	
Open	212-268-5829	F	QOC not contacted 3/9; Order submitted 3/9; Accepted 3/25	New York, NY	
Open	954-721-7817	F	QOC confirmed 9/18; Order submitted 9/21; Accepted 9/28; Canceled 11/4.	Cooper City, FL	
Open	305-445-8675	F	Verification sent 9/1, No response; Order submitted 9/1; Accepted 9/16; Canceled 10/9.	Miami, FL	
Open	561-852-7858	F	QOC confirmed 9/4; Order submitted 9/4; Accepted 9/17; Canceled 9/28.	Highland Beach, FL	
Open	954-961-9717	F	Canceled 9/10, previously submitted to GTE.	Pembroke Park, FL	
Open	305-251-3259	F	Verification sent 10/7, No response; Order submitted 10/7; Accepted 10/13.	Miami, FL	
Open	915-591-9947	F	Verification sent 8/14, No response; Order submitted 8/4; Accepted 8/19; Canceled 9/8, 9/21, 9/23.	El Paso, TX	
Open	509-467-3174	F	SSN verified 9/18; Order submitted 9/18; Accepted 9/28; Canceled 11/9	Spokane, WA	
Open	305-757-4453	F	Verification sent 9/10, No response; Order submitted 9/10; Accepted 9/21; Cancelled 10/19.	Miami, FL	
Open	323-664-4658		NOT A SNYDER SALE		
Open	718-243-0725	F	Verification letter sent on 9/8, no response; Order submitted 9/24; Pic restricted, canceled 10/1.	Brooklyn, NY	

Complaint Type: Unauthorized Switch Week Ending: 11/13/98

Status	BTN	TPV Date	Process History	City, State	Investigation Results
Open	206-624-8903	F	SSN verified 8/17; Order submitted 8/17; Accepted 8/27; Canceled 110/26.	Seattle, WA	
Open	941-793-7920	F	QOC confirmed 10/21; Order submitted 10/21; Accepted 10/28; Canceled 11/2.	Naples, FL	
Open	305-242-9618	F	Verification letter sent on 9/15, no response; Order submitted 10/2; Accepted 10/7; Canceled10/19.	Homestead, FL	
Open	954-730-0342	F	Verification letter sent on 6/12; VL disputed sale, canceled 6/22.	Lauderdale Lake, FL	
Open	561-547-3460	F	QOC confirmed 10/27; Submitted 10/27; Accepted 11/5; Canceled 11/9.	Lake Worth, FL	
Open	561-582-2038	F	QOC confirmed 9/4; Order submitted 9/4; Accepted 9/17; Canceled 9/23.	West Palm Beach, FL	
Open	305-821-5684	F	QOC confirmed 10/23; Submitted 10/23; Accepted 10/28; Canceled 11/6.	Hialeah, FL	
Open	718-377-2915	F	NOT A SNYDER SALE		
Open	941-921-5253	F	QOC confirmed 10/16; Order submitted 10/16; Pending 10/19.	Sarasota, FL	
Open	718-998-2664	F	Order submitted by 3 different reps; Verification letter sent on 5/29, no response; Order submitted 6/15; Accepted 6/22; Canceled 7/9.	Brooklyn, NY	
Open	407-282-1608	F	Verification letter sent on 9/28, no response; Order submitted 10/14; Accepted 10/21; Canceled 10/23.	Orlando, FL	
Open	718-439-1038	F	QOC confirmed 9/14; INTRAlata PIC required; Order submitted 9/16; Accepted 9/24; Canceled 10/13.	Brooklyn, NY	
Open	941-753-9482	F	Order submitted by 2 different reps; QOC confirmed 9/28; Order submitted 9/28; Accepted 9/30; Canceled 10/23.	Bradenton, FL	

Complaint Type:	Unauthorized Switch	Week Ending: 11/13/98			
Status	**BTN**	**TPV Date**	**Process History**	**City, State**	**Investigation Results**
Open	305-387-3431	F	QOC confirmed 9/10; Submitted 9/10; Accepted 9/21; Canceled 10/19.	Miami, FL	
Open	305-557-5219	F	Verification letter sent on 8/18, no response; Order submitted 9/4; Accepted 9/16; Canceled11/9.	Hialeah, FL	
Open	305-446-0649	F	QOC confirmed 9/14; Order submitted 9/14; Pic restricted, canceled 9/21.	Miami, FL	
Open	212-663-5772	F	QOC not contacted 3/5; Order submitted 3/5; Accepted 3/30; Canceled 4/15.	New York, NY	
Open	305-223-3646	F	Verification letter sent on 8/3, no response; Order submitted 8/19; Accepted 8/27; Canceled 11/6.	Miami, FL	
Open	303-429-3532	O 3/2/98	Ready to send 3/3; Order submitted 3/3; Accepted 3/25.	Westminster, CO	
Open	954-566-6098	F	Order submitted by 3 different reps; QOC confirmed 10/15; Order submitted 10/15; Accepted 10/20.	Wilton Manors, FL	
Open	954-721-5023	F	QOC confirmed 6/17; Order submitted 6/17; Accepted 6/25; Canceled 8/24.	Tamarac, FL	
Open	305-685-6017	F	QOC confirmed 10/23; Submitted 10/23; Accepted 10/28; Canceled 11/06.	N. Miami Beach, FL	
Open	904-756-8153	F	Verification letter sent 10/16; VL process customer order 10/22; Order submitted 10/22; Accepted 10/28; Canceled 11/4.	Port Orange, FL	
Open	904-304-2626	F	QOC confirmed 10/27; Submitted 10/27; Canceled 11/06.	Port Orange, FL	
Open	561-694-2518	F	Order submitted by 2 different reps; QOC confirmed 9/14; Order submitted 9/14; Accepted 9/21; Canceled 10/13.	Juno Beach, FL	
Open	305-256-3969	F	QOC confirmed 10/20; Submitted 10/20; Accepted 10/28; Canceled 11/9.	Miami, FL	
Open	305-635-6229	F	Order submitted by 2 different reps; QOC confirmed 10/8; Order submitted 10/8; Accepted 10/14; Canceled 11/4.	Miami, FL	
Open	718-627-1603	F	Verification letter sent on 8/10, no response; Order submitted 8/25; Accepted 9/1.	Brooklyn, NY	

Type of Complaint:	Unauthorized Switch	Week Ending:	11/14/98		
Status	BTN	Date of TPV	Process History	City, State	Investigation Results
Open	941/753-2067	F	QOC confirmed 10/21; Submitted 10/21; Accepted 10/23; Canceled 11/2.	Bradenton, FL	
Open	954/938-8458	F	Sent to dialer for OBV 4/17; Canceled, VL disputed sale 10/6	Ft. Lauderdale, FL	
Open	941/727-8579	F	Verification sent 9/29, No reponse;Order submitted 10/15; Accepted 10/19; Canceled 10/21.	Braden River, FL	
Open	561/274-6621	F	Verification sent 8/11, No reponse;Order submitted 8/27; Accepted 9/8; Canceled 9/23.	Delray Beach, FL	
Closed	718/499-5721	F	Sent to dialer for OBV 10/23; Canceled 10/29.	Brooklyn, NY	Fraudulent LOA. Customer had a PIC restrict which kept the order from processing
Open	717/854-2513	~~F~~	NOT A SNYDER SALE		
Open	561/391-1906	F	Verification sent 10/14;Canceled,VL disputed 10/30.	Boca Raton, FL	
Open	212/924-5449	F	Verification sent 9/17, No reponse;Order submitted 10/5; Accepted 10/13; Canceled 10/16.	New York, NY	
Open	718/385-9057	F	QOC confirmed 10/19; Submitted 10/19; Accepted 10/28; Canceled 11/12.	Brooklyn, NY	
Open	718/253-1313	F	QOC confirmed 9/16; Submitted 9/16; Accepted 9/24.	Brooklyn, NY	
Open	305/221-7213	F	QOC confirmed 6/23; Submitted 6/23; Accepted 6/29; Canceled 7/13.	Miami, FL	
Open	305/545-7420	O 8/3/98	Order submitted 8/4; accepted 8/17; Canceled 10/13.	Miami, FL	

Type Of Complaint:	Unauthorized Switch	Week Ending:	11/14/98		
Status	BTN	Date Of TPV	Process History	City, State	Investigation Results
Open	313/883-8483		NOT A SNYDER SALE		
Open	718/698-3730		QOC confirmed 10/2; Submitted 10/2; Accepted 10/8; Canceled 11/16.	Staten Island, NY	
Open	305/251-3050		Verification sent 7/24, No reponse;Order submitted 8/11; Accepted 8/19; Canceled 9/14.	Miami, FL	
Open	941/513-1864		NOT A SNYDER SALE		
Open	941/366-6120		Verification letter sent 10/16; Canceled, VL disputed sale 10/26.	Sarasota, FL	
Open	407/344-9588		Verification sent 9/2, No reponse;Order submitted 9/21; Accepted 9/28; Canceled 11/11.	Kissimmee, FL	
Open	941/387-4377		QOC confirmed 9/4; Submitted 9/4; Accepted 9/8; Canceled 9/18.	Longboat Key, FL	

Type of Complaint:	Jnauthorized Switch	Week Ending:	11/21/98		
Status	**BTN**	**Date of TPV**	**Process History**	**City, State**	**Investigation Results**
Open	407/671-0093	F	QOC confirmed 9/10; Submitted 9/10; Accepted 9/18; Canceled 10/8, Pic dispute.	Winter Park, FL	
Open	425/788-1528	F	Sent to dialer for OBV 9/23 & 9/24; Canceled, VL disputed sale 10/20.	Woodinville, WA	
Open	305/596-5450	F	Verification sent 8/13, No response; Order submitted 8/31;Pic restricted, Canceled 9/11.	Miami, FL	
Open	941/925-7113	F	Order submitted by 2 reps; Verification letter sent 10/9; Canceled 10/19, VL disputed sale.	Sarasota, FL	
Closed	954/726-5424	F	Verification letter sent 8/20; Canceled 8/25, VL disputed sale.	N Lauderdale, FL	
Open	516/889-5996	F	QOC confirmed 10/28; Submitted 10/28; Accepted 11/6; Canceled 11/16.	Long Beach, NY	
Open	781/648-4878	F	Verification sent 11/10;Canceled,VL disputed 11/16.	Arlington, MA	
Open	253/847-6385	O 8/19/98	Order submitted 8/20; Accepted 8/3; Canceled 11/30, Pic dispute.	Spanaway, WA	
Open	626/448-2272	F 10/24/98	Spin Phone Number 10/28; Submitted 10/30; Accepted 11/5; Canceled 11/18, Pic dispute.	El Monte, CA	
Open	954/923-7281	F	Verification sent 8/31, No response; Order submitted 9/16; Accepted 9/23; Canceled 10/21.	Hollywood, FL	
Open	561/392-8897	F	QOC confirmed 9/15 & 9/17; Submitted 9/17; Accepted 9/22; Canceled 10/8, Pic dispute.	Boca Raton, FL	
Open	305/324-6777	F	Order submitted by 2 reps; Verification letter sent 8/17, no response; Submitted 9/2; Accepted 9/15; Canceled 9/24.	Miami, FL	
Open	509/235-1321	O 5/14/98	Order submitted 5/15; Canceled 6/22, no confirmation from RPMS.	Cheney, WA	
Open	954/456-1264	F	Order Submitted by 2 reps; Verification sent 6/4, No response; Order submitted 6/19; On Hold 6/22, DMSS sale level errors; Submitted 6/24; Accepted 7/7; Canceled 10/23.	Hallandale,FL	

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Type Of Complaint:	Jnauthorized Switch	Week Ending:	11/21/98		
Status	**BTN**	**Date Of TPV**	**Process History**	**City, State**	**Investigation Results**
Open	502/651-4992	10/27/98 O	Order submitted 10/28; Accepted 10/30.	Glasgow, KY	
Open	561/833-7721	F	QOC confirmed 9/25; Submitted 9/25; Accepted 10/5; Canceled 10/13, Pic dispute.	West Palm Beach, FL	
Open	305/251-4966	F	QOC confirmed 9/17; Submitted 9/17; Accepted 9/25; Canceled 10/30.	Miami, FL	
Open	305/665-4938	F	QOC confirmed 10/20; Submitted 10/20; Accepted 10/28; Canceled 11/6, no fault Pic.	Coral Gables, FL	
Open	954/456-4241	F	QOC confirmed 10/21; Submitted 10/21; Accepted 11/2; Canceled 11/16.	Hallandale,FL	
Open	202/546-0097	F	QOC not contacted 2/23; Submitted 2/23; Canceled 3/18.	Washington, DC	
Open	915/592-4405	F	QOC not contacted 2/20; Submitted 2/20; Accepted 3/11; Canceled 3/30.	El Paso, TX	
Open	954/781-5760	F	Verification sent 8/19, No response; Order submitted 9/8; Accepted 9/17; Canceled 11/9, Pic dispute.	Pompano Beach, FL	
Open	313/873-6793	F	Verification letter sent 8/14; Canceled 8/20, VL disputed sale.	Detroit, MI	
Open	217/529-0223	5/12/98 O	Order submitted 5/13; Canceled 5/21, Pic restricted.	Springfield, IL	
Open	915/751-7227	F	QOC not contacted 2/20; Submitted 2/20; Accepted 3/11; Canceled 4/6.	El Paso, TX	
Open	360/699-1965	F	SSN verified; Order submitted 11/20; Pending 11/23.	Vancouver, WA	
Open	212/988-9850	F	Sent to dialer for OBV 11/18 & 11/20;Canceled 11/23.	New York, NY	
Open	561/852-2391	F	Verification sent 9/1, No response; Order submitted 9/17; Canceled 9/22, Pic restricted.	Boca Raton, FL	

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Type of Complaint:	Jnauthorized Switch	Week Ending:	11/28/98		
Status	**BTN**	**Date of TPV**	**Process History**	**City, State**	**Investigation Results**
Open	650/355-7455	11/6/98 F	Spin Phone Number 11/11; Submitted 11/13; Canceled 11/30, Pic dispute.	Pacifica, CA	
Open	941/387-9381	F	Sent to dialer for OBV 9/29 & 9/30; Canceled, VL disputed sale 10/22.	Longboat Key, FL	
Open	313/372-4346	F	Verification sent 9/1, No response; Order submitted 9/17; Accepted 9/24.	Detroit, MI	
Open	561/790-1380	F	QOC confirmed 9/15; Submitted 9/15; Accepted 9/21; Canceled 9/25, no fault Pic.	West Palm Beach, FL	
Closed	305/412-1164	F	QOC confirmed 10/29; Submitted 10/29; Accepted 11/4; Canceled 11/12, Pic dispute.	Miami, FL	
Open	718/987-5090	F	QOC confirmed 10/2; Submitted 10/2; Accepted 10/8; Canceled 11/24.	Staten Island, NY	
Open	561/642-4162		NOT A SNYDER SALE		
Open	407/671-0093	F	QOC confirmed 9/10; Submitted 9/10; Accepted 9/18; Canceled 10/8, Pic dispute.	Winter Park, FL	
Open	718/951-8560	F	QOC confirmed 10/21; Submitted 10/21; Accepted 11/2; Canceled 11/30.	Brooklyn, NY	
Open	718/367-4097	F	Order submitted by 3 reps; QOC confirmed 9/11; Submitted 9/11; Accepted 9/21.	Bronx, NY	
Open	718/648-2484	F	Order submitted by 2 reps; QOC confirmed 9/25; Submitted 9/25; Accepted 10/5; Canceled 10/13.	Brooklyn, NY	
Open	718/256-9360	F	Verification sent 9/22, No response; Order submitted 10/8; Accepted 10/15.	Brooklyn, NY	
Open	305/891-5386	F	Order submitted by 2 reps; Verification letter sent 5/18, no response; Submitted 6/8; accepted 6/18; Canceled 6/29.	Miami, FL	
Open	212/866-1225	F	QOC confirmed 11/5; Submitted 11/5; Accepted 11/12; Canceled 11/30.	New York, NY	

Complaint Type:	Inauthorized Switch	Week Ending:	12/5/98		
Status	**BTN**	**TPV Date**	**Process History**	**City,State**	**Investigation Results**
Open	253/852-6092	F	Verification sent 11/24; Order submitted 11/25; Accepted 12/1; Cancelled 12/7.	Kent, WA	
Open	305/408-4634	F	QOC confirmed 8/27; Submitted 8/27; Accepted 9/3; Canceled 9/21.	Miami, FL	
Open	718/761-1112	F	QOC confirmed 11/18; Order submitted 11/18; Accepted 11/30; Canceled 12/7.	Staten Island, NY	
Open	954-966-7463	F	QOC confirmed 11/2; Submitted 11/2; Canceled 11/9, Pic restricted.	Pembroke Park, FL	
Open	212/888-6069	F	QOC confirmed 10/12; Order submitted 10/12; Canceled 11/20, WTN ineligible - Toll Restrict.	New York, NY	
Open	904/672-9167	F	Verification letter sent 10/23, No response; Order submitted 11/10; Accepted 11/16; Canceled 12/7, Pic dispute.	Ormond Beach, FL	
Open	718/474-2947	F	QOC confirmed 11/23; Order submitted 11/23; Accepted 11/30; Canceled 12/3.	Queens, NY	
Open	941/377-8842	F	QOC confirmed 10/2; Submitted 10/2; Accepted 10/5; Canceled 12/4.	Sarasota, FL	
Open	212/666-7036	F	QOC confirmed 9/30; Order submitted 9/30; Accepted 10/8; Canceled 1/7.	New York, NY	
Open	941/379-5043	F	QOC confirmed 9/10; Submitted 9/10; Accepted 9/14; Canceled 9/22.	Sarasota, FL	
Open	516/354-4711	F	QOC confirmed 10/12; Order submitted 10/12; Accepted 10/20.	Elmont, NY	
Open	410/465-1826	F	Spin Phone Number 8/31; Submitted 9/2; Accepted 9/15; Canceled 10/13.	Ellicott, MD	
Open	561/790-1380	F	QOC confirmed 9/15; Order submitted 9/15; Accepted 9/21; Canceled 9/25, no fault Pic.	West Palm Beach, FL	
Open	954/720-8435	F	SSN not matched - 3 day QOC 9/21; Sent verification letter 9/21; Canceled 10/2, VL disputed sale.	Tamarac, FL	

Compiaint Type:	Inauthorized Switch	Week Ending: 12/5/98			
Status	**BTN**	**TPV Date**	**Process History**	**City, State**	**Investigation Results**
Open	718/276-5560	F	Order submitted by 2 sales reps; Verification letter sent on 8/14, no response; Order submitted 9/1; Accepted 9/15; Canceled 10/13.	Rosedale, NY	
Open	305/279-2590	F	Order submitted by 2 sales reps; QOC confirmed 9/25; Order submitted 9/25; Accepted 10/2; Canceled 11/17.	Miami, FL	
Open	305/864-7429	F	Verification letter sent on 4/3; VL verified 4/21; Order submitted 4/21; Accepted 5/6; Canceled 5/27.	Miami Beach, FL	
Open	773/278-1817	F	QOC confirmed 11/4; Order submitted 11/4; Canceled 11/10, Pic restricted.	Chicago, IL	
Open	941/365-3165	F	QOC confirmed 7/6; Submitted 7/6; Accepted 7/9.	Sarasota, FL	
Open	941/358-8817	F	QOC confirmed 10/26; Order submitted 10/26; Accepted 10/28; Canceled 11/11.	Sarasota, FL	
Open	305/274-1402	F	Order submitted by 5 sales reps; QOC confirmed 8/10; Submitted 8/10; Accepted 8/17; Canceled 11/30.	Miami, FL	
Open	954/968-6797	F	QOC confirmed 11/11; Order submitted 11/11; Accepted 11/18; Canceled 12/7.	Pompano Beach, FL	
Open	305/893-6305	F	QOC confirmed10/16; Submitted 10/16; Accepted 10/23; Canceled 10/28, no fault Pic.	N. Bay Village, FL	
Open	305/385-1837	F	Order submitted by 2 different reps; QOC confirmed 9/4; Order submitted 9/4; Accepted 9/17; Canceled 11/9.	Miami, FL	
Open	305/871-4577	F	QOC confirmed11/5; Submitted 11/5; Accepted 11/11; Canceled 11/19, no fault Pic.	Miami, FL	
Open	212/966-2405	10/20/98	Order submitted 10/21; Accepted 11/2; Canceled 12/1.	New York, NY	
Open	718/258-2249	F	QOC confirmed8/27; Submitted 8/27; Accepted 9/8; Canceled 10/13.	Brooklyn, NY	

Complain: Type:	Inauthorized Switch	Week Ending:	12/5/98		
Status	BTN	TPV Date	Process History	City, State	Investigation Results
Open	305/892-9937	F	QOC confirmed 10/16; Submitted 10/16; Accepted 10/23; Canceled 11/13.	Miami, FL	
Open	956/581-8083	7/28/98 O	Order submitted 7/29 & 8/6; Accepted 8/12; Canceled 8/19.	Mission, TX	
Open	214/339-7605	F	QOC confirmed 10/5; Order submitted 10/5; Accepted 10/13.	Dallas, TX	
Open	305/669-4400	F	Order submitted by 2 sales reps; QOC confirmed 9/17; Order submitted 9/17; Accepted 9/24; Canceled 10/13.	Miami, FL	
Open	305/598-5774	F	Verification letter sent on7/7, no response; Order submitted 7/23; Accepted 7/30; Canceled 8/27.	Miami, FL	
Open	941/923-9228	F	Verification letter sent on 9/22, no response; Order submitted 10/8; Accepted 10/13; Canceled 11/19.	Sarasota, FL	
Open	915/598-4939	F	QOC confirmed 8/18; Order submitted 8/18; Accepted 8/26; Canceled 11/16.	El Paso, TX	
Open	727/734-8804		NOT A SNYDER SALE		
Open	281/240-5510		NOT A SNYDER SALE		

Type of Complaint:	Jnauthorized Switch	Week Ending:	12/12/98		
Status	BTN	TPV Date	Process History	City,State	Investigation Results
Open	516-242-6840	F	QOC confirmed 10/30; Submitted 10/30; Accepted 11/6; Cancelled 12/14.	Deer Park, NY	
Open	908-766-6489	F	QOC confirmed 11/20; Submitted 11/20; Accepted 12/4.	Bernardsville, NJ	
Open	212-288-2306	F	QOC confirmed 11/25; Submitted 11/25; Accepted 12/1; Cancelled 12/8.	Manhattan, NY	
Open	305-945-1370	F	Verification letter sent 9/21, No response; Order submitted 10/7; Accepted 10/13; Cancelled 10/29.	N. Miami Beach, Fl	
Open	305-856-0178	F	Verification letter sent 9/25 , No response; Order submitted 10/13; Accepted 10/20; Canceled 12/14, no fault PIC	Miami, Fl	
Open	562-862-5441	O 11/16/98	Order submitted 11/17; Accepted 11/19.	Downey, CA	
Open	212-243-8731	F	Verification letter sent 9/21 , No response; Order submitted 10/7; Accepted 10/15; Canceled 12/15.	Manhattan, NY	
Open	248-375-5959	O 2/9/98	Order submitted 2/10; Accepted 2/23.	Rochester Hill, MI	
Open	305-559-8689	F	Verification letter sent 8/27 , No response; Order submitted 9/14; Accepted 9/21; Canceled 10/13.	Miami, Fl	
Open	641-925-9077		NOT A SNYDER SALE		
Open	305-259-7913	F	QOC confirmed 10/15; Submitted 10/15; Accepted 10/20; Cancelled 10/29.	Miami, Fl	
Open	773-821-7842	F	Order submitted by 2 sales reps; QOC confirmed 11/20; Submitted 11/20; Accepted 12/7.	Chicago, IL	
Open	718-760-3360	O 10/23/98	Order submitted 10/26; Accepted 11/4.	Flushing, NY	

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Type of Complaint:	Unauthorized Switch	Week Ending:	12/12/98		
Status	**BTN**	**TPV Date**	**Process History**	**City,State**	**Investigation Results**
Open	561-968-2134	F	Verification letter sent 8/18; Canceled 8/24 & 9/8, VL disputed sale.	Lake Worth, FL	
Open	847-395-3346	F	QOC confirmed 11/13; Submitted 11/13; Accepted 11/24.	Antioch, IL	
Open	305-682-1555	F	Verification letter sent 9/25, No response; Order submitted 10/13; Accepted 10/20; Cancelled 10/28.	Miami, FL	
Open	718-698-6985	F	QOC confirmed 10/7; Submitted 10/7; Accepted 10/15; Cancelled 11/4.	Staten Island, NY	
Open	313-532-1469	F	Verification letter sent 7/15, No response; Order submitted 7/31; Accepted 8/7.	Detroit, MI	
Open	718-434-3728	F	Verification letter sent 9/24, no response; Order submitted 10/12; Canceled 11/4.	Brooklyn, NY	
Open	718-284-1867	F	Order submitted by 2 sales reps; QOC confirmed 9/15 & 9/17; Submitted 9/18; Accepted 9/28; Cancelled 11/4.	Brooklyn, NY	
Open	718-287-3843	F	Sent to dialer for OBV 1/29; Submitted 2/3; Canceled 2/13, PIC restricted at customer's request.	Brooklyn, NY	

Type of Complaint:	Unauthorized Switch	Week Ending:	12/19/98		
Status	BTN	Date of TPV	Process History	City, State	Investigation Results
Open	602/276-8870	10/21/98 O	Order submitted 10/22; Canceled 10/29, Pic restricted.	Phoenix, AZ	
Open	301/926-9461	F	QOC confirmed 11/20; Submitted 1/20; Accepted 12/4; Canceled 12/21.	Rockville, MD	
Open	956/631-9673	F	SSN verified 12/10; Submitted 12/12; Accepted 12/17; Canceled 12/21.	Mc Allen, TX	
Open	212/744-6629	F	QOC confirmed 11/23; Submitted 11/23; Accepted 11/30; Canceled 12/21.	Manhattan, NY	
Closed	407/422-0034	F	Verification letter sent 10/6, No response; Order submitted 10/22; Accepted 10/28; Canceled 11/30, no fault Pic.	Orlando, FL	
Open	313/834-6547	F	Verification letter sent 7/1, No response; Order submitted 7/15; Accepted 7/21.	Detroit, MI	
Open	718/462-8516	F	Order submitted by 9 different reps; Sent to dialer for OBV 1/28; Order submitted 2/3; Accepted 2/13.	Brooklyn, NY	
Open	831/442-2319	F 10/3/98	Order submitted 10/13; Canceled 10/28.	Salinas, Ca	
Open	954/942-4789	F	Verification letter sent 7/6, No response; Order submitted 7/22; Canceled 7/30, Pic restricted at customer's request.	Pompano Beach, FL	
Open	954/581-5465	F	QOC confirmed 10/28; Submitted 10/28; Accepted 11/5; Canceled 11/19, Pic dispute.	Plantation, FL	
Open	718/625-6897	F	QOC confirmed 10/12; Submitted 10/12; Canceled 10/20, Pic restricted at customer's request.	Brooklyn, NY	
Open	954/458-9794	F	QOC confirmed 9/14; Submitted 9/14; Accepted 9/21; Canceled 10/1, no fault Pic.	Pembroke Pines, FL	
Open	305/823-6715	F	Order submitted by 2 reps; QOC confirmed 10/27; Submitted 10/27; Canceled 11/4, Pic restricted at customer's request.	Hialeah, FL	

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Type Of Complaint:	Unauthorized Switch	Week Ending:	12/19/98		
Status	BTN	TPV Date	Process History	City, State	Investigation Results
Open	718/448-2261	F	QOC confirmed 11/5; Submitted 11/5; Accepted 11/12; Canceled 12/21.	Staten Island, NY	
Open	847/310-8601	2/6/98 O	Order submitted 2/9; Canceled 3/24, no Confirmation from RPMS.	Hoffman Estate, IL	
Open	212/580-8071	F	QOC confirmed 11/3; Submitted 11/3; Accepted 11/10.	New York, NY	
Open	954/978-2270	F	QOC confirmed 11/13; Submitted 1/13; Accepted 11/23; Canceled 11/30.	Margate, FL	
Open	305/932-4990	F	Order submitted by 2 reps; Verification letter sent 9/8, No response; Order submitted 9/24; Accepted 10/1; Canceled 12/11, no	Aventura, FL	
Open	305/826-8183	F	QOC confirmed 9/16; Submitted 9/16; Accepted 9/24; Canceled 11/23, Pic dispute.	Hialeah, FL	
Open	305/558-8226	F	QOC confirmed 10/16; Submitted 10/16; Accepted 10/22; Canceled 12/7.	Hialeah, FL	
Open	212/249-3501	F	QOC confirmed 11/13; Submitted 11/13; Accepted 11/18; Canceled 12/11.	Manhattan, NY	
Open	941/498-0061	F	QOC confirmed 10/15; Submitted 10/15; Accepted 10/23; Canceled 12/16, Pic	Bonita Springs, FL	
Open	954/968-3262	F	Order submitted by 2 reps; Verification letter sent 10/5, No response; Order submitted 10/21; Accepted 11/2; Canceled 12/17.	Ft. Lauderdale, FL	
Open	305/947-5529	F	Order submitted by 3 reps; Verification letter sent 9/15, No response; Order submitted 10/2; Accepted 10/8; Canceled 12/4.	Miami, FL	
Open	305/936-1413	F	Previously submitted to GTE 9/9; Canceled 10/20, VL disputed sale.	Miami, FL	
Open	718/892-2537	F	Sent to dialer for OBV 1/27; Order submitted 1/30; Canceled 2/10, Pic restricted at customer's request.	Bronx, NY	

Type of Complaint:	Unauthorized Changes	Week Ending:	12/26/98		
Status	**BTN**	**Date of TPV**	**Process History**	**City, State**	**Investigation Results**
Open	323/656-2928	12/1/98 F	SPIN PHONE NUMBER; Order submitted 12/9; Accepted 12/16; Canceled 12/28.	Los Angeles, CA	
Open	956-399-4938	F	SSN verified 12/29; Cancelled 12/29, sale canceled by customer.	San Benito, TX	
Open	210/333-4347	F	SSN verified 9/9; Order submitted 9/9; Accepted 9/17.	San Antonio, TX	
Open	407/292-6768	F	QOC confirmed 11/2; Order submitted 11/2; Accepted 11/9; Canceled 11/16.	Ocoee, FL	
Open	941/992-5901	F	QOC confirmed 10/15; Order submitted 10/15; Canceled 10/23.	Bonita Springs, FL	
Open	718/802-0272	F	QOC confirmed 10/22; Order submitted 10/22; Canceled 10/29, Pic restricted at customer's request.	Brooklyn, NY	
Open	941/646-7043	12/3/98 O	Order submitted 12/4; Accepted 12/7; Canceled 12/21.	Lakeland, FL	

Type of Complaint:	Unauthorized Changes	Week Ending:	1/2/99		
Status	BTN	Date of TPV	Process History	City,State	Investigation Results
Open	941/642-6236	F	QOC confirmed 12/1; Order submitted 12/1; Accepted 12/7; Canceled 12/11.	Marco Island, FL	
Open	718/729-6571	F	Verification letter sent 9/1, no response; Order submitted 9/17; Accepted 9/24; Cancelled 11/17.	Sunnyside, NY	
Open	305/595-1012	F	Order submitted by 2 reps; QOC confirmed 8/25; Order submitted 8/25; Accepted 8/31; Canceled 9/21.	Miami, FL	
Open	908/464-3056	F	QOC confirmed 10/21; Order submitted 10/21; Accepted 11/2; Canceled 11/30, Pic dispute.	Berkeley Height, NJ	
Open	209/467-3326	10/19/98 F	SPIN PHONE NUMBER 10/26; Order submitted 10/28; Accepted 11/5.	Stockton, CA	
Open	305/258-2540	F	Verification letter sent 9/25, no response; Order submitted 10/13; Cancelled 10/20, pic restricted at customer's request.	Homestead, FL	
Open	941/922-9187	F	Verification letter sent 9/14, no response; Order submitted 9/30; Cancelled 10/2, BTN not found.	Sarasota, FL	
Open	305/227-2184	F	Order submitted by 12 reps; Verification letter sent 8/3, no response; Order submitted 8/19; Accepted 8/27; Canceled 9/24, pic dispute.	Miami, FL	
Open	313/835-1966	F	Verification letter sent 6/10, no response; Order submitted 6/24; Accepted 6/30.	Detroit, MI	
Open	561/588-2920	F	Verification letter sent 9/16, no response; Order submitted 10/5; Accepted 10/13; Canceled 12/18, no fault pic.	Lake Worth, FL	
Open	212/242-5424	F	Order submitted by 2 reps; QOC confirmed 10/30; Order submitted 10/30; Accepted 11/6; Canceled 11/16.	Manhattan, NY	
Open	718/979-2136	F	Order submitted by 2 reps; QOC confirmed 11/5; Order submitted 11/5; Accepted 11/12; Canceled 12/3.	Staten Island, NY	
Open	212/744-6629	F	QOC confirmed 11/23; Order submitted 11/23; Accepted 11/30; Canceled 12/21.	Manhattan, NY	

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Type of Complaint:	Unauthorized Switch	Week Ending:	1/9/99			
Status	**BTN**	**Sales Channel**	**Date of TPV**	**Process History**	**City, State**	**Investigation Results**
Open	414/671-1591	F		Verification letter sent 11/16; Canceled 11/20, VL disputed sale.	Milwaukee, WI	
Open	954/522-3462	F		QOC confirmed 12/21; Submitted 12/21; Accepted 12/30; Canceled 1/4/99.	Ft. Lauderdale, FL	
Open	212/249-5215	F		Sent to dialer for OBV 12/24; Canceled 12/29, customer does not remember order.	New York, NY	
Open	305/666-0994	F		QOC confirmed 11/19; Submitted 11/19; Accepted 11/24.	Miami, FL	
Closed	305/387-7846	O	9/14/98	Order submitted 9/15; Accepted 9/21; Canceled 10/19.	Miami, FL	
Open	212/781-6164	F		QOC confirmed 12/2; Submitted 12/2; Accepted 12/10; Canceled 12/18.	New York, NY	
Open	407/292-4477	F		Verification letter sent 10/19, no response; Order submitted 11/4; Accepted 11/9; Canceled 12/7.	Orlando, Fl	
Open	954/969-0319	F		QOC confirmed 10/30; Submitted 10/30; Accepted 11/5.	Margate, FL	
Open	408/436-1658	F	11/30/98	SPIN PHONE NUMBER 12/3; Order submitted 12/7; Accepted 12/14.	San Jose, CA	
Open	305/947-5869	F		Verification letter sent 9/2, no response; Order submitted 9/21; Canceled 9/28, pic restricted at customer's request.	N. Miami, FL	
Open	305/226-9912	F		QOC confirmed 10/27; Submitted 10/27; Accepted 11/4.	Miami, FL	
Open	305/267-1323	F		QOC confirmed 9/10; Submitted 9/10; Accepted 9/21; Canceled 10/23, no fault Pic.	Coral Gables, FL	
Open	732/549-3819	O	8/3/98	Order submitted 8/4; Accepted 8/10.	Edison, NJ	

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Type Of Complaint:	Unauthorized Switch	Week Ending:	1/9/99			
Status	BTN	Sales Channel	TPV	Process History	City, State	Investigation Results
Open	818/834-2612	F		California order, TPV required; Sent to dialer for CA. TPV 1/14/99.	Pacoima, CA	
Open	407/679-6343	F		QOC confirmed 12/18; Submitted 12/18; Accepted 12/28; Canceled 12/31.	Winter Park, FL	
Open	408/263-7122	F	1/11/98	SPIN PHONE NUMBER 11/17; Order submitted 11/19; Accepted 11/30; Canceled 12/17, pic dispute.	San Jose, CA	
Open	954/724-4246	F		Order submitted by 2 reps; QOC confirmed 9/8; Submitted 9/8; Accepted 9/17; Canceled 9/18, pic dispute.	Ft. Lauderdale, FL	
Open	305/682-8639	F		QOC confirmed 10/16; Submitted 10/16; Accepted 10/23; Canceled 1/11/99, pic dispute.	Miami, Fl	
Open	908/227-0571			NOT A SNYDER SALE		
Open	508/994-2933	F		Verification letter sent 9/24, no response; Order submitted 10/12; Canceled 11/16, no confirmation from RPMS; Canceled 11/17, pic restricted.	New Bedford, MA	
Open	305/758-1901	F		Verification letter sent 5/26; Canceled 6/1, VL disputed sale.	Miami, Fl	
Open	954/456-7695	F		Verification letter sent 6/11, no response; Order submitted 6/26; Accepted 7/7; Canceled 7/24.	Hallandale, FL	
Open	718/268-4607	F		QOC confirmed 6/22; Submitted 6/22; Accepted 6/29; Canceled 1/11/99.	Forest Hills, NY	
Open	914/949-1568	F		QOC confirmed 11/16; Submitted 11/16; Accepted 11/30.	White Plains, NY	
Open	305/638-4292	F		Verification letter sent 10/5, no response; Order submitted 10/21; Accepted 11/2; Canceled 11/16, pic dispute.	Miami, Fl	

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Type of Complaint:	Unauthorized Switch	Week Ending:	1/16/99			
Status	BTN	Sales Channel	Date of TPV	Process History	City, State	Investigation Results
Open	561/747-5377	F		Verification letter sent 9/25, no response; Submitted 10/13; Accepted 10/20; Canceled 11/2.	Jupiter, FL	
Open	718/265-5783	F		QOC confirmed 12/23; Submitted 12/23; Accepted 12/30; Canceled 1/14/99.	Brooklyn, NY	
Open	954/428-7807	F		Verification letter sent 9/24, no response; Submitted 10/13; Accepted 10/20; Canceled 11/9.	Hillsboro Beach, FL	
Open	305/757-7883	F		Verification letter sent 9/25; Canceled 10/2, VL disputed sale.	Miami, FL	
Closed	360/695-2141	F		SSN verified 11/11; Submitted 11/11; Accepted 1/19; Canceled 12/1, pic dispute.	Vancouver, WA	
Open	425/742-2889	F		Sale canceled by customer on 1/15/99	Edmonds, WA	
Open	210/545-2297	F		QOC confirmed 12/31; Submitted 12/31; Accepted 1/11/99; Canceled 1/15/99.	San Antonio, TX	
Open	831/449-4504	F	12/21/98	SPIN PHONE NUMBER 12/28; Order submitted 12/30; Accepted 1/6/99; Canceled 1/14/99.	Salinas, CA	
Open	212/799-1695	F		QOC confirmed 12/16; Submitted 12/16; Accepted 12/23; Canceled 1/11/99.	Manhattan, NY	
Open	212/717-4469	F		Verification letter sent 9/9, no response; Order submitted 9/24; Accepted 10/1; Canceled 10/1, pic restricted at customer's request; Canceled again on 1/11/99.	New York, NY	
Open	305/273-7833	F		Order submitted by 2 reps; QOC confirmed 9/17; Submitted 9/17; Accepted 9/25; Canceled 10/5.	Miami, FL	
Open	305/947-2945	F		QOC confirmed 11/2; Submitted 11/2; Accepted 11/9; Canceled 11/30, pic dispute.	N. Miami, FL	
Open	941/927-7235	F		Verification letter sent 10/16, no response; Submitted 11/3; Accepted 11/9; Canceled 12/8.	Sarasota, FL	
Open	301/218-8867	F		QOC confirmed 12/17; Submitted 12/17; Accepted 12/23; Canceled 1/15/99.	Bowie, MD	
Open	302/539-6580	F		QOC confirmed 10/19; Submitted 10/19; Accepted 10/28; Canceled 11/11.	Dover, DE	

Type Of Complaint:	Unauthorized Switch	Week Ending:	1/16/99			
Status	BTN	Sales channel	TPV	Process History	City, State	Investigation Results
Open	305/226-8999	F		Verification letter sent 8/25, no response; Order submitted 9/10; Canceled 9/18, pic restricted at customer's request.	Miami, Fl	
Open	212/285-1244	F		QOC confirmed 12/1; Submitted 12/1; Canceled 12/8, pic restricted at customer's request.	New York, NY	
Open	206/878-3461	F		SSN verified 4/7; Submitted 4/7; Accepted 4/16; Canceled 12/31.	Des Moines, WA	
Open	718/253-0166	F		QOC confirmed 12/16; Submitted 12/16; Accepted 12/23; Canceled 1/18/99.	Brooklyn, NY	
Open	954/925-2191	F		Verification letter sent 10/5, no response; Order submitted 10/21; Accepted 10/22; Canceled 12/31.	Hollywood, FL	
Open	305/932-2492	F		QOC confirmed 12/16; Submitted 12/16; Accepted 12/21; Canceled 1/15/99.	Miami, Fl	
Open	561/622-5564	F		QOC confirmed 10/20; Submitted 10/20; Accepted 10/28; Canceled 11/30.	Palm Beach, FL	
Open	305/271-0192	F		QOC confirmed 8/26; Submitted 8/26; Accepted 9/4; Canceled 9/24, pic dispute.	Miami, Fl	
Open	305/891-6739	F		QOC confirmed 10/22; Submitted 10/22; Accepted 10/28; Canceled 12/11, pic dispute.	N. Miami, FL	
Open	850/697-2082	O	12/24/98	Order submitted 12/28.	Carrabelle, FL	
Open	954/722-4857	F		QOC confirmed 11/11; Submitted 11/11; Accepted 11/18; Canceled 11/23, pic dispute.	N. Lauderdale, FL	
Open	954/938-0365	F		QOC confirmed 10/19; Submitted 10/19; Accepted 10/23; Canceled 1/8/99.	Ft. Lauderdale, FL	
Open	407/299-1180	F		QOC confirmed 9/17; On hold waiting authorization 9/18; Submitted 9/21; Accepted 9/28; Canceled 11/16.	Orlando, FL	
Open	305/557-1285	F		QOC confirmed 9/4; Submitted 9/4; Accepted 9/17; Canceled 9/28.	Hialeah Gardens, FL	

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Type of Complaint:	Unauthorized Switch	Week Ending:	1/23/99			
Status	BTN	Sales Channel	Date of TPV	Process History	City, State	Investigation Results
Open	718/627-1603	F		Verification letter sent 8/10, no response; Submitted 8/25; Accepted 9/1; Canceled 1/18.	Brooklyn, NY	
Open	407/249-5977	F		Verification letter sent 10/6, no response; Submitted 10/22; Accepted 10/28; Canceled 11/9, no fault pic.	Orlando, FL	
Open	954/741-0293	F		Verification letter sent 9/14, no response; Submitted 9/30; Accepted 10/5; Canceled 11/2.	Sunrise, FL	
Open	305/653-2358	F		Verification letter sent 6/29, no response; Submitted 7/14; Accepted 7/22.	Miami, FL	
Closed	254/666-5301	O	11/2/98	Order submitted 11/3; Canceled 11/9, pic restricted at customer's request.	Woodway, TX	
Open	305/758-9030	F		QOC confirmed 1/4/99; Submitted 1/4/99; Accepted 1/11/99; Canceled 1/25/99.	Miami, FL	
Open	408/293-1283	F	12/11/98	SPIN PHONE NUMBER 12/29; Order submitted 12/31; Accepted 1/8/99; Canceled 1/26/99, pic dispute.	San Jose, CA	
Open	718/815-0367	F		QOC confirmed 11/5; Submitted 11/5; Accepted 11/12; Canceled 12/7.	Staten Island, NY	
Open	212/283-6826	F		Verification letter sent 5/4;Order submitted 5/22; Canceled 6/12, pic restricted at customer's request.	New York, NY	
Open	408/259-5172	F	10/27/98	SPIN PHONE NUMBER 11/3; Order submitted 11/5; Accepted 11/11; Canceled 1/4/99.	San Jose, CA	
Open	305/596-6931	F		QOC confirmed 11/19; Submitted 11/19; Accepted 11/24; Canceled 12/17.	Miami, FL	
Open	401/728-8649	F		Verification letter sent 10/22, no response; Submitted 11/9; Canceled 11/16, pic restricted at customer's request.	Pawtucket, RI	
Open	718/857-6561	F		Order submitted by 8 sales reps; QOC confirmed 8/18; Submitted 8/18; Accepted 8/28; Canceled 9/28.	Brooklyn, NY	
Open	310/214-6930	F	11/19/98	Order submitted by 2 sales reps; SPIN PHONE NUMBER 11/25; Order submitted 12/1; Accepted 12/3.	Torrance, CA	

Type Of Complaint:	Unauthorized Switch	Week Ending:	1/23/99			
Status	BTN	Sales Channel	Date of TPV	Process History	City, State	Investigation Results
Open	516/698-3134	F		QOC confirmed 12/14; Submitted 12/14; Accepted 12/21; Canceled 1/7/99.	Centereach, NY	
Open	718/876-9523	F		QOC confirmed 10/6; Submitted 10/6; Accepted 10/13; Canceled 10/22.	Staten Island, NY	
Open	615/292-4671	O	12/9/98	Order submitted 12/10; Canceled 12/15.	Nashville, TN	
Open	718/979-1486	F		QOC confirmed 11/2; Submitted 11/2; Accepted 11/10; Canceled 12/7.	Staten Island, NY	
Open	305/274-6699	F		QOC confirmed 9/17; Submitted 9/17; Accepted 9/25; Canceled 11/30, no fault pic.	Miami, Fl	
Open	773/762-3910	F		QOC confirmed 10/16; Submitted 10/16; Accepted 10/23.	Chicago, IL	
Open	718/856-7324	F		QOC confirmed 10/20; Submitted 10/20; Accepted 10/28; Canceled 11/30.	Brooklyn, NY	
Open	847/473-0968	F		Verification letter sent 4/20;Order submitted 5/12; Canceled 5/20, pic restricted at customer's request.	N. Chicago, IL	
Open	212/242-6817	F		QOC confirmed 9/28; Submitted 9/28; Canceled 10/5, pic restricted at customer's request.	New York, NY	
Open	305/829-1130	F		Order submitted by 2 sales reps; QOC confirmed 8/26; Submitted 8/26; Accepted 9/4; Canceled 9/11, pic dispute.	Miami, Fl	
Open	718/251-4906	F		QOC confirmed 12/29; Submitted 12/29; Accepted 1/5/99; Canceled 1/11/99.	Brooklyn, NY	

Type of Complaint:	nauthorized Switch	Week Ending:	1/30/99				
Status	BTN	Sales Channel	TPV Date	Process History	City, State	Regulatory Agency	Date Received
Open	305/255-2351	F		QOC confirmed 8/3; Submitted 8/3; Accepted 8/17; Canceled 8/24.	Miami, FL	New York PUC complaint	1/27/99
Open	305/662-2017	F		Verification letter sent 9/23, no response; Order submitted 10/9; Accepted 10/14; Canceled 10/28.	Miami, FL	Florida Dept. of Consumer Services Complaint	1/28/99
Open	415/831-5309			NOT A SNYDER SALE		Executive complaint	1/26/99
Open	773/275-7095	F		Verification letter sent 10/23, no response; Order submitted 11/10; Accepted 11/16.	Chicago, IL	Executive complaint	1/28/99
Closed	617/522-9095	F		QOC confirmed 1/8/99; Submitted 1/8/99; Canceled 1/18/99, pic restricted at customer's request.	Jamaica Plain, MA	Executive complaint	1/25/99
Open	212/744-7158	F		QOC confirmed 10/20; Submitted 10/28; Accepted 11/6; Canceled 11/6, pic restricted at customer's request.	New York, NY	Executive complaint	1/26/99
Open	407/354-3709	F		Verification letter sent 6/30, no response; Order submitted 7/14; Accepted 7/22; Canceled 8/6, pic dispute.	Orlando, Fl	Executive complaint	1/28/99
Open	407/344-3751	F		Verification letter sent 8/25, no response; Order submitted 9/10; Canceled 9/18, WTN not found.	Kissimmee, FL	Executive complaint	1/27/99
Open	212/598-5832	F		QOC confirmed 10/20; Submitted 10/20; Accepted 10/28; Canceled 2/1/99.	New York, NY	Executive complaint	1/25/99
Open	214/637-6515	F		Sent to dialer for OBV 1/27/99; Canceled 1/29/99, customer changed their mind.	Dallas, TX	Executive complaint	1/25/99
Open	407/574-8879	F		QOC confirmed 9/11; Submitted 9/11; Accepted 9/21; Canceled 9/28, no fault pic.	Deltona, FL	Florida PSC complaint	1/26/99
Open	616/957-2374	F	12/11/98	SPIN PHONE NUMBER 12/16; Order submitted 12/18; Canceled 12/28, pic restricted at customer's request.	Grand Rapids, MI	Michigan PSC complaint	1/25/99
Open	212/732-9083	F		QOC confirmed 12/9; Submitted 12/9; Accepted 12/17; Canceled 12/28.	Manhattan, NY	New York PUC complaint	1/27/99
Open	305/233-1550	F		QOC confirmed 10/30; Submitted 10/30; Accepted 11/5; Canceled 12/14.	Miami, FL	Florida Dept. of Consumer Services Complaint	1/27/99
Open	305/255-2351	F		QOC confirmed 8/3; Submitted 8/3; Accepted 8/17; Canceled 8/24.	Miami, FL	Florida PSC complaint	1/26/99

Type Of Complaint:	nauthorized Switch	Week Ending:	1/30/99				
Status	BTN	Sales Channel	TPV	Process History	City, State	Regulatory Agency	Date Received
Open	718/934-2726	F		QOC confirmed 9/30; Submitted 9/30; Accepted 10/8; Canceled 10/22.	Brooklyn, NY	New York PUC complaint	1/28/99
Open	508/995-2199	F		SSN verified 10/15; Order submitted 10/15; Accepted 10/26; Canceled 11/16.	Acushnet, MA	FCC complaint	1/26/99
Open	908/464-3056	F		QOC confirmed 10/21; Submitted 10/21; Accepted 11/2; Canceled 11/30, pic dispute.	Berkeley Heights, NJ	FCC complaint	1/26/99
Open	610/975-9593	O	8/20/98	Order submitted 8/21; Accepted 8/31; Canceled 11/5.	Wayne, PA	Pennsylvania PUC complaint	1/25/99
Open	617/547-4581	F		QOC confirmed 11/20; Submitted 11/20; Accepted 12/7; Canceled 12/14.	Cambridge, MA	FCC complaint	1/26/99
Open	954/426-5284	F		QOC confirmed 12/30; Submitted 12/30; Accepted 1/4/99; Canceled 1/28/99, no fault pic.	Deerfield Beach, FL	Florida PSC complaint	1/25/99
Open	626/403-1856	F	5/25/98	SPIN PHONE NUMBER 6/1; Order submitted 6/3; Accepted 6/10; Canceled 10/29.	S Pasadena, CA	FCC complaint	1/26/99
Open	212/744-5265	F		QOC confirmed 10/5; Submitted 10/5; Accepted 10/13; Canceled 10/22.	New York, NY	FCC complaint	1/26/99
Open	561/968-2134	F		Verification letter sent 8/18; Canceled 8/24, VL disputed.	Lake Worth, FL	Florida PSC complaint	1/25/99
Open	517/482-0899	O	8/28/98	Order submitted 8/31; Accepted 9/8.	Lansing, MI	Michigan PUC complaint	1/27/99
Open	915/872-1981			NOT A SNYDER SALE		Texas PUC complaint	1/28/99
Open	954/436-9756	F		QOC confirmed 11/18; Submitted 11/18; Accepted 11/25; Canceled 1/14/99, pic dispute.	Miramar, FL	Florida PSC complaint	1/27/99
Open	305/552-5060	F		QOC confirmed 9/10; Submitted 9/10; Accepted 9/21; Canceled 11/17.	Miami, FL	Florida PSC complaint	1/26/99
Open	305/255-5537	F		QOC confirmed 8/24; Submitted 8/24; Accepted 8/31; Canceled 11/2, no fault pic.	Miami, FL	Florida PSC complaint	1/28/99
Open	561/734-3726	F		Verification letter sent 9/4, no response; Order submitted 9/22; Canceled 9/28, pic restricted at customer's request.	Boyton Beach, FL	Florida PSC complaint	1/27/99
Open	954/730-3153	F		QOC confirmed 12/14; Submitted 12/14; Accepted 12/21; Canceled 1/25, pic dispute.	Oakland Park, FL	Florida PSC complaint	1/25/99
Open	941/695-4897	F		QOC confirmed 10/27; Submitted 10/27; Accepted 11/4; Canceled 12/4, pic dispute.	Everglades City, FL	Florida PSC complaint	1/25/99

Type of Compla.....	Unauthorized Switch	Week Ending:	2/6/98				
Status	**BTN**	**Sales Channel**	**TPV Date**	**Process History**	**City, State**	**Regulatory Agency**	**Date Received**
Open	954/987-6888	F		Verification letter sent 8/21, no response; Order submitted 9/9; Accepted 9/17; Canceled 10/5.	Miramar, FL	Florida executive complaint	2/2/99
Open	718/646-8599	F		QOC confirmed 12/24; Order submitted 12/24; Accepted 1/5; Canceled 1/14.	Brooklyn, NY	New York executive complaint	2/2/99
Open	212/674-6925	F		Verification letter sent 9/8, no response; Order submitted 9/24; Accepted 10/1; Canceled 10/5.	New York, NY	New York executive complaint	2/4/99
Open	508/996-6920	F		Verification letter sent 10/23, no response; Order submitted 11/10; Accepted 11/16.	N. Dartmouth, MA	Massachusetts executive complaint	2/4/99
Closed	202/234-8088	F		Verification letter sent 8/5, no response; Order submitted 8/21; Accepted 8/31.	Washington, DC	Wash., DC FCC complaint	2/2/99
Open	516/758-4313	F		QOC confirmed 12/10; Order submitted 12/10; Accepted 12/17; Canceled 12/28.	Medford, NY	New York FCC complaint	2/2/99
Open	602/705-8417	O	6/26/98	Order submitted 6/29; Canceled 12/18.	Tempe, AZ	Arizona executive complaint	2/2/99
Open	206/722-1756	F		Verification letter sent 10/14, no response; Order submitted 10/30; Accepted 11/9; Canceled 1/4, pic dispute.	Seattle, WA	Washington executive complaint	2/2/99
Open	305/559-5408	F		Verification letter sent 10/5, no response; Order submitted 10/21; Accepted 11/2; Canceled 11/13.	Miami, FL	Florida executive complaint	2/3/99
Open	212/628-3819	F		QOC confirmed 10/19; Order submitted 10/19; Accepted 10/28; Canceled 11/17.	New York, NY	Florida PUC complaint	2/1/99
Open	305/669-6188	F		QOC confirmed 10/23; Order submitted 10/23; Accepted 10/28; Canceled 11/9.	Miami, FL	Florida PUC complaint	2/3/99

Type C Compl.	Unauthorized Switch	Week Ending:	2/6/98				
Status	**BTN**	**Sales Channel**	**TPV**	**Process History**	**City, State**	**Regulatory Agency**	**Date Received**
Open	305/932-3881	F		QOC confirmed 9/14; Order submitted 9/14; Accepted 9/21; Canceled 10/26.	Miami, FL	Florida PUC complaint	2/4/99
Open	773/925-5406	F		SSN verified 7/21; Order submitted 7/21; Accepted 7/30.	Chicago, IL	Illinois PUC complaint	2/5/99
Open	212/781-6164	F		QOC confirmed 12/2; Order submitted 12/2; Accepted 12/10; Canceled 12/18.	New York, NY	New York FCC complaint	2/2/99
Open	941/732-1497	F		QOC confirmed 11/17; Order submitted 11/17; Accepted 11/23; Canceled 11/30.	Naples, FL	Florida PUC complaint	2/4/99
Open	305/541-3513	F		QOC confirmed 10/20; Order submitted 10/20; Accepted 10/28; Canceled 12/11.	Miami, FL	Florida PUC complaint	2/1/99
Open	425/290-6520	O	1/12/99	Order submitted 1/13/99; Accepted 1/15; Canceled 2/1/99.	Mukilteo, WA	Washington PUC complaint	2/1/99
Open	954/721-8827	F		Verification letter sent 10/21, no response; Order submitted 11/6; Canceled 11/11, conflict WTN or other LD company.	Tamarac, FL	Florida PUC complaint	2/3/99
Open	718/763-0149	F		Verification letter sent 9/15, no response; Order submitted 10/2; Canceled 10/8, pic restricted at customer's request.	Brooklyn, NY	New York PUC complaint	2/5/99
Open	559/896-4415			NOT A SNYDER SALE		California PUC complaint	2/5/99
Open	408/259-3841	F	10/12/98	SPIN PHONE NUMBER 10/14; Order submitted 10/16; Canceled 10/22, pic restricted at customer's request.	San Jose, CA	California PUC complaint	2/5/99
Open	954/430-3062	F		Order submitted by 2 reps; Verification letter sent 5/18, no response; Order submitted 6/8; Accepted 6/18; Rejected 6/29; Canceled 8/25, previously submitted to GTE.	Pembroke Pines, FL	Florida PUC complaint	2/4/99
Open	305/225-5712			NOT A SNYDER SALE		Florida PUC complaint	2/4/99

Type Of Complaint:	Unauthorized Switch	Week Ending:	2/20/99				
Status	BTN	Sales Channel	Date of TPV	Process History	City, State	Regulatory Agency	Date Received
Open	916/497-0978	F	11/24/98	Order submitted by 2 reps; SPIN PHONE NUMBER 11/30; Submitted 12/2; Accepted 12/9; Canceled 12/14.	Sacramento, CA	Executive Complaint	2/17/99
Open	510/791-6289	O	12/19/98	Order Submitted 12/21; Accepted 12/30; Canceled 2/5/99.	Fremont, CA	Executive Complaint	2/17/99
Open	914/834-0783	F		QOC confirmed 11/12; Submitted 11/12; Accepted 11/18; Canceled 1/4/99.	Larchmont, NY	Executive Complaint	2/16/99
Open	847/692-7383	F		SSN verified 11/20; Submitted 11/20; Canceled 12/7, pic restricted at customer's request.	Niles, IL	Executive Complaint	2/17/99
Closed	408/747-1840	O	8/31/98	Order submitted 9/1; Accepted 9/15.	Sunnyvale, CA	Executive Complaint	2/16/99
Open	408/253-5592	O	10/26/98	Order Submitted 10/27; Accepted 11/5; Canceled 11/16, pic dispute.	San Jose, CA	Executive Complaint	2/18/99
Open	401/274-6906	F		SPIN PHONE NUMBER 2/5/99; Sale canceled by customer 2/9/99.	Providence, RI	Executive Complaint	2/18/99
Open	718/857-6561	F		QOC confirmed 8/18; Submitted 8/18; Accepted 8/28; Canceled 9/28.	Brooklyn, NY	PUC complaint	2/16/99
Open	415/731-2409	F	10/5/98	SPIN PHONE NUMBER 10/13; Order submitted 10/15; Accepted 10/22; Canceled 10/28.	San Francisco, CA	PUC complaint	2/16/99
Open	305/228-0887	F		QOC confirmed 11/12; Submitted 11/12; Accepted 11/30; Canceled 12/11.	Miami, FL	PUC complaint	2/16/99
Open	305/667-4231	F		QOC confirmed 10/22; Submitted 10/22; Accepted 10/28.	Miami, FL	PUC complaint	2/18/99
Open	305/558-9502	F		QOC confirmed 10/20; Submitted 10/20; Canceled 10/27, pic restricted at customer's request.	Hialeah, FL	PUC complaint	2/16/99
Open	773/281-7529	F		QOC confirmed 8/18; Submitted 8/18; Accepted 8/26.	Chicago, IL	Attorney General	2/16/99

Type Of Complaint:	Unauthorized Switch	Week Ending:	2/20/99				
Status	**BTN**	**Sales Channel**	**Date of TPV**	**Process History**	**City, State**	**Regulatory Agency**	**Date Received**
Open	608/838-4772			NOT A SNYDER SALE		PUC complaint	2/16/99
Open	718/941-7961	F		QOC confirmed 9/11; Submitted 9/11; Accepted 9/21; Canceled 12/18.	Brooklyn, NY	PUC complaint	2/16/99
Open	954/966-1531	F		QOC confirmed 12/2; Submitted 12/2; Accepted 12/9; Canceled 12/11, no fault pic.	Pembroke Pines, FL	PUC complaint	2/18/99
Open	305/274-1736	F		Order submitted by 2 reps; QOC confirmed 8/27; Submitted 8/27; Accepted 9/8; Canceled 10/30, no fault pic.	Miami, Fl	PUC complaint	2/19/99
Open	914/741-2080	F		QOC confirmed 12/23; Submitted 12/23; Accepted 12/31; Canceled 1/21/99.	Thornwood, NY	PUC complaint	2/16/99
Open	732/422-2651	O	2/9/99	Order Submitted 2/3/99; Canceled 2/8/99, pic resricted at customer's request; Accepted 2/9/99, unknown accept code from GTE.	Kendall Park, NJ	Executive complaint	2/17/99

Type Of Complaint:	Unauthorized Switch	Week Ending:	2/27/99					
Status	**BTN**	**Sales Channel**	**Date of TPV**	**Process History**	**City, State**	**Regulatory Agency**	**Date of Sale**	**Date Received**
Open	408/226-2915	F	11/11/98	SPIN PHONE NUMBER 11/17; Submitted 11/19; Accepted 11/30; Canceled 2/8/99.	San Jose, CA	Executive complaint	11/11/98	2/23/99
Open	401/728-8649	F		Verification letter sent 10/22, no response; SPIN PHONE NUMBER 11/5; Order Submitted 11/9; Canceled 11/16, pic restricted at customer's request.	Pawtucket, RI	FCC complaint	10/15/98	2/24/99
Open	305/666-8810	F		Order submitted by 2 reps; QOC confirmed 9/11; Submitted 9/11; Accepted 9/21; Canceled 12/3.	Miami, FL	Executive complaint	8/5/98	2/25/99
Open	408/245-6335	F	1/27/99	SPIN PHONE NUMBER 2/3/99; Order submitted 2/5/99; Accepted 2/12/99; Canceled 2/25/99.	Sunnyvale, CA	Executive complaint	1/27/99	2/23/99
Closed	305/554-1424	F		Order submitted by 2 reps; Verification letter sent 7/24, no response; SPIN PHONE NUMBER 8/7; Order submitted 8/11; Accepted 8/19; Canceled 9/28.	Miami, FL	Executive complaint	7/18/98	2/23/99
Open	714/963-7081	O	2/9/99	Order Submitted 2/10/99; Accepted 2/11/99.	Fountain Valley, CA	Executive complaint	2/9/99	2/24/99
Open	619/470-6983	F	2/7/99	SPIN PHONE NUMBER 2/10/99; Submitted 2/12/99; Accepted 2/22/99; Canceled 2/24/99; Accepted 2/25/99, GTELD initiated order confirmed.	National City, CA	Executive complaint	2/7/99	2/25/99
Open	212/535-9638	F		QOC confirmed 12/30; Submitted 12/30; Accepted 1/7/99; Canceled 3/1/99.	Manhattan, NY	Executive complaint	12/11/98	2/24/99
Open	954/525-6555	F		Order submitted by 2 reps; Sent to dialer for OBV 2/11/98; QOC not contacted 2/20/98; Submitted 2/20/98; Accepted 3/9/98; Canceled 2/1/99.	Fort Lauderdale, FL	Executive complaint	2/6/98	2/26/99
Open	831/583-0557	F	11/14/98	QOC confirmed 11/19; Submitted 11/19; Accepted 11/30; Canceled 1/8/99.	Seaside, CA	Executive complaint	11/14/98	2/24/99
Open	516/897-0228	F		QOC confirmed 12/16; Submitted 12/16; Accepted 12/23; Canceled 1/11/99.	Long Beach, NY	PUC complaint	10/28/98	2/23/99
Open	516/378-2149	F		QOC confirmed 12/18; Submitted 12/18; Accepted 12/29; Canceled 1/11/99.	Merrick, NY	FCC complaint	10/30/98	2/25/99
Open	253/952-3324	F		CA. Order, TPV required 3/3/99; Sent to dialer for Ca. TPV 3/3/99.	Tacoma, WA	PUC complaint	2/25/99	2/25/99
Open	718/338-7398	F		Verification letter sent 4/20; VL verified 5/11; Order submitted 5/12; Accepted 5/20; Canceled 1/4/99.	Brooklyn, NY	FCC complaint	4/9/98	2/25/99
Open	206/324-6164	F		SSN verified 10/9; Submitted 10/9; Accepted 10/16; Canceled 2/10/99.	Seattle, WA	PUC complaint	9/29/98	2/22/99

Type Of Complaint:	Unauthorized Switch	Week Ending:	2/27/99					
Status	BTN	Sales Channel	Date of TPV	Process History	City, State	Regulatory Agency	Date of Sale	Date Received
Open	305/919-8893	F		QOC confirmed 11/18; Submitted 11/18; Accepted 11/25; Canceled 12/17.	Miami, FL	PSC complaint	10/24/98	2/22/99
Open	305/931-5031	F		Verification letter sent 4/20; VL verified 5/11; Order submitted 5/12; Canceled 5/21, pic restricted at customer's request.	Miami, Fl	FCC complaint	4/7/98	2/26/99
Open	718/447-6083	F		QOC confirmed 9/17; Submitted 9/17; Accepted 9/28; Canceled 1/11/99.	Staten Island, NY	FCC complaint	8/13/98	2/24/99
Open	954/964-2982	F		Verification letter sent 6/8, no response; Order Submitted 6/23; Canceled 6/29, WTN not found.	Hollywood, FL	FCC complaint	5/27/98	2/24/99
Open	212/744-7158	F		QOC confirmed 10/28; Submitted 10/28; Accepted 11/6; Canceled 11/6, pic restricted at customer's request.	New York, NY	FCC complaint	9/20/98	2/23/99
Open	954/428-9742	F		QOC confirmed 11/16; Submitted 11/16; Accepted 11/23; Canceled 1/4/99, pic dispute.	Fort Lauderdale, FL	FCC complaint	10/18/98	2/24/99
Open	407/345-8789	F		QOC confirmed 10/23; Submitted 10/23; Accepted 10/29; Canceled 11/9.	Orlando, FL	FCC complaint	10/7/98	2/26/99
Open	202/832-5562	F		SSN verified 6/12; Order submitted 6/12; Accepted 6/25; Canceled 7/24.	Washington, DC	FCC complaint	6/6/98	2/24/99
Open	508/336-5323	F		SSN verified 1/5/99; Order submitted 1/5/99; Canceled 1/11/99, pic restricted at customer's request.	Seekonk, MA	FCC complaint	12/28/98	2/24/99
Open	817/923-4174	F		Verification letter sent 5/18, no response; Order Submitted 6/8; Canceled 6/15, pic restricted at customer's request.	Fort Worth, TX	PSC complaint	5/3/98	2/25/99
Open	504/878-4517	O	8/31/98	Order submitted 9/1; Accepted 9/15.	Loranger, LA	FCC complaint	8/31/98	2/24/99
Open	305/385-1702	F		Verification letter sent 9/21, no response; SPIN PHONE NUMBER 10/5; Order Submitted 10/7; Accepted 10/13; Canceled 10/2.	Miami, FL	PSC complaint	9/12/98	2/22/99
Open	718/387-3831	F		QOC confirmed 12/24; Submitted 12/24; Accepted 1/5/99; Canceled 2/8/99.	Brooklyn, NY	PUC complaint	12/9/98	2/22/99
Open	305/672-0079	F		Verification letter sent 7/1, no response; Order Submitted 7/15; Accepted 7/22; Canceled 8/7.	Miami Beach, FL	FCC complaint	6/22/98	2/25/99
Open	407/277-8204	F		QOC confirmed 11/16; Submitted 11/16; Accepted 11/23; Canceled 1/4/99, no fault pic.	Orlando, FL	FCC complaint	10/29/98	2/25/99

Type Of Complaint:	Unauthorized Switch	Week Ending:	2/27/99					
Status	BTN	Sales Channel	Date of TPV	Process History	City, State	Regulatory Agency	Date of Sale	Date Received
Open	516/485-9709	F		QOC confirmed 12/22; Submitted 12/22; Canceled 12/29, pic restricted at customer's request.	W. Hempstead, NY	FCC complaint	11/14/98	2/24/99
Open	407/856-8290	F		QOC confirmed 11/24; Submitted 11/24; Accepted 11/30; Canceled 12/10.	Orlando, FL	FCC complaint	11/11/98	2/24/99
Open	561/391-6257	F		Verification letter sent 9/18, no response; SPIN PHONE NUMBER 10/2; Order Submitted 10/8; Accepted 10/13; Canceled 3/1/99, pic dispute.	Boca Raton, FL	PSC complaint	9/12/98	2/25/99
Open	561/368-5760	F		QOC confirmed 10/19; Submitted 10/19; Accepted 10/26; Canceled 11/6, pic dispute.	Boca Raton, FL	FCC complaint	10/8/98	2/23/99
Open	561/364-8499	F		Verification letter sent 9/4, no response; SPIN PHONE NUMBER 9/18; Order Submitted 9/22; Accepted 9/30; Canceled 11/13, no fault pic.	Boyton Beach, FL	PSC complaint	8/28/98	2/22/99
Open	301/229-8465	O	7/21/98	Order submitted 7/22; Accepted 7/30.	Bethesda, MD	PUC complaint	7/21/98	2/26/99
Open	718/453-6464	F		QOC confirmed 9/14; Submitted 9/16; Accepted 9/24; Canceled 10/23.	Brooklyn, NY	FCC complaint	8/23/98	2/24/99
Open	305/556-7269	F		QOC confirmed 8/24; Submitted 8/24; Accepted 8/31; Canceled 11/9, no fault pic.	Hialeah, FL	FCC complaint	8/3/98	2/24/99
Open	407/333-4791	F		QOC confirmed 10/6; Submitted 10/6; Accepted 10/14; Canceled 10/23.	Longwood, FL	PSC complaint	9/27/98	2/22/99
Open	305/255-5098	F		Verification letter sent 8/12, no response; SPIN PHONE NUMBER 8/26; Order Submitted 8/28; Accepted 9/8; Canceled 10/8.	Miami, FL	FCC complaint	8/4/98	2/24/99
Open	941/793-6063	F		QOC confirmed 10/16; Submitted 10/16; Accepted 10/23; Canceled 11/16.	Naples, FL	FCC complaint	8/19/98	2/23/99
Open	617/720-1530	F		QOC confirmed 11/18; Submitted 11/18; Canceled 11/30, pic restricted at customer's request.	Boston, MA	FCC complaint	10/30/98	2/24/99

Type Of Complaint:	Unauthorized Switch	Week Ending:	3/2/99					
Status	BTN	Sales Channel	Date of TPV	Process History	City, State	Regulatory Agency	Date of Sale	Date Received
Open	305-940-3897	F		Verification letter sent 8/17, no response; SPIN PHONE NUMBER 8/31; Order Submitted 9/2; Accepted 9/15.	Miami, Fl	Executive complaint	8/6/98	3/2/99
Open	213-385-4121	F	12/30/98	SPIN PHONE NUMBER 1/4/99; Order submitted 1/6/99; Accepted 1/13/99; Canceled 3/8/99.	Los Angeles, CA	Executive complaint	12/30/98	3/2/99
Open	908-766-0418	F		QOC confirmed 11/17; Submitted 11/17; Accepted 11/23; Canceled 12/7, pic dispute.	Basking Ridge, NJ	Executive complaint	10/30/98	3/5/99
Open	323-291-6997			NOT A SNYDER SALE		Executive complaint		3/3/99
Closed	401/765-1454	F		3 day QOC 1/22/99; Order submitted 1/27/99; Accepted 2/1/99; Canceled 2/22/99.	Woonsocket, RI	Executive complaint	1/19/99	3/3/99
Open	770/458-2260	O	11/4/98	Order Submitted 11/5; Accepted 11/12; Canceled 12/23.	Chamblee, GA	Executive complaint	11/4/98	3/3/99
Open	703-321-7562	F	1/2/99	QOC confirmed 1/8/99; Submitted 1/8/99; Accepted 1/18/99; Canceled 3/3/99, pic dispute.	Springfield, VA	Executive complaint	1/2/99	3/2/99
Open	401-274-6906	F		SPIN PHONE NUMBER 2/5/99; Order canceled by customer 2/9/99.	Providence, RI	Rhode Island Attorney General	1/29/99	3/5/99
Open	305-248-7117	F		Verification letter sent 7/20, no response; SPIN PHONE NUMBER 8/3; Order Submitted 8/5, 8/17 & 8/26; Accepted 9/3; Canceled 10/2, pic dispute.	Homestead, FL	Florida PSC	7/13/98	3/1/99
Open	562-431-7358	F	12/2/98	SPIN PHONE NUMBER 1/4/99; Order submitted 1/6/99; Accepted 1/8/99; Canceled 1/20/99.	Los Alamitos, CA	California PUC	12/28/98	3/2/99
Open	212-861-5312	F		QOC confirmed 1/6/99; Submitted 1/6/99; Accepted 1/13/99; Canceled 1/25/99.	New York, NY	New York PUC	12/23/98	3/2/99
Open	718-381-2411	F		QOC confirmed 11/9; Submitted 11/9; Accepted 11/16.	Brooklyn, NY	New York PUC	10/27/98	3/2/99
Open	305-829-3218	O	11/25/98	Order submitted 11/30; Accepted 12/7; Canceled 1/8/99.	Hialeah, FL	Florida - PSC	11/25/98	3/4/99
Open	920-361-3812	O	3/26/98	Order submitted 3/27/98; Accepted 4/6/98.	Berlin, WI	Wisconsin - PSC	3/26/98	3/3/99
Open	707-464-2527			NOT A SNYDER SALE		California - PUC		3/2/99
Open	248-589-4873	O	12/12/98	SSN verified 10/9; Submitted 10/9; Accepted 10/16; Canceled 2/10/99.	Madison Heights, MI	Michigan - PSC	12/12/98	3/5/99
Open	212-874-1557	F		Sent to dialer for OBV 10/14 & 10/15; Canceled 10/22, disputed sale.	New York, NY	New York - PUC	10/5/98	3/3/99
Open	714-776-6328	F	10/24/98	SPIN PHONE NUMBER 12/30; Order submitted 1/4/99; Accepted 1/11/99.	Anaheim, CA	California - PUC	10/24/98	3/2/99
Open	212-327-1047	F		Order submitted by 2 reps; Verification letter sent 9/8, no response; Canceled 9/15, VL disputed sale.	New York, NY	New York - FCC	8/25/98	3/2/99
Open	206-324-1433	F		Verification letter sent 4/3; VL verified 4/21; Order Submitted 4/21; Accepted 5/5; Canceled 6/8, pic dispute.	Seattle, WA	Washington - FCC	3/27/98	3/2/99
Open	626-351-6224	O	2/6/99	Order submittd 2/8/99; Accepted 2/10/99	Pasadena, CA	Snyder - California	2/6/99	3/5/99

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SL VIEW 06/03/98 10:15:15 VIEW ORDER - ASOS FORMAT PAGE 1 +

ORDER NO I 4121741 1R OF COMP 05 20 98
TELNO 954 581 3618 CKT

R/C DD: COEFF : SUFFIX:
ITEM #: WKWITH: VISIT :
REMARKS:

01 141; I4121741; 980520; 77MJ; 980520; 1R; 581-3618
02 WILKINS, LAZARD; 1030 NW 23 WAY; ;
0202 FORT LAUDERDA; FL; 33311
03 B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03 CTX, 0000; TAX, 3; ACCT-LIMIT, 200; ALT, D; RISK, H
03 SCORE 100; BUREAU CODE, SO; TEI, N
05 41871; GTELD RES TOTAL CALL; ;
09 18881871EZ3R; PRO1=WC
05 44762; SNYDER GENERAL IN LANGUAGE; ;
05 42244; GTLDWEWKFREEDOM; ;
09 18882244FWWD; PRO1=WC
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> WHO IS? PAGING KEY
PF14=PG FWD PF15=PG BWD PF17=+10 PGS PF18=-10 PGS PF19=LAST PG PF20=PAGE 1

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SL VIEW 06/03/98 10:15:15   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO   I 4121741 1R OF                                  COMP 05 20 98
TELNO  954 581 3618   CKT

09   581-3618; ; O-5483; 980520; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS [redacted]; ID NA; PTN NA
1101 05/20/98RXP/DMSS/20242533/GTELD OD 05/17 DD 06/02
1400 ORDER COMPLETED CTAXA840                  T2CRXP1 05 20 98 07.57 9140 ST
1400 TEI CHANGED FROM N TO X                   T2CRXP1 05 20 98 07.56 9140 01
1400 ORDER CREATED CTAXA840                    T2CRXP1 05 20 98 07.56 9140 ST


0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> ____          WHO IS? ________          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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SL VIEW 06/03/98 09:54:36   VIEW ORDER - ASOS FORMAT                PAGE   1 +

ORDER NO   I 3986510 1R OF                                  COMP 05 14 98
TELNO  718 592 7567   CKT

     R/C DD:                COEFF :              SUFFIX:
     ITEM #:                WKWITH:              VISIT :
     REMARKS:

01   105; I3986510; 980514; 77XX; 980514; 1R; 592-7567
02   GIACCIO, JOHN; 108 5245 AVE; ;
0202 CORONA; NY; 11368
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 300; ALT, D; RISK, M
03   SCORE 600; BUREAU CODE, SO; TEI, N
05   43976; LD "ONLY" PIC FEE WAIVER; ;
05   44708; EASY SAVINGS PLAN TF; ;
09   18884708REPM; PRO1=D6
05   44762; SNYDER GENERAL IN LANGUAGE; ;
09   592-7567; ; O-5483; 980514; L; TC; LP; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===>          WHO IS?                    PAGING KEY
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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SLAM!

This cust is deaf & only uses phone to contact sister if he needs her - totally unable to have Authorized any Change ——

23212

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SL VIEW 06/03/98 09:54:36   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO    I 3986510 1R OF                                  COMP 05 14 98
TELNO  718 592 7567   CKT

11CI EMPL NA; CBR NA
11CJ SS [redacted]; ID NA; PTN NA
1101 05/14/98LXW/DMSS/20232058/GTELD OD 05/10 DD 05/26
1400 ORDER COMPLETED CTAXA85U                  T4CLXW1 05 14 98 11.01 9140 ST
1400 TEI CHANGED FROM N TO X                   T4CLXW1 05 14 98 11.00 9140 01
1400 ORDER CREATED CTAXA85U                    T4CLXW1 05 14 98 11.00 9140 ST


0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> ____          WHO IS? _______        PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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SL VIEW 06/03/98 08:31:40   VIEW ORDER - ASOS FORMAT                PAGE   1 +

ORDER NO   I 3946102 1R OF                                  COMP 05 13 98
TELNO  305 888 5348   CKT

     R/C DD:                COEFF :              SUFFIX:
     ITEM #:                WKWITH:              VISIT :
     REMARKS:

01   023; I3946102; 980513; 77XX; 980513; 1R; 888-5348
02   QUESADA, JESUS; 359 W 12TH ST; ;
0202 HIALEAH; FL; 33012
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 300; ALT, D; RISK, M
03   SCORE 600; BUREAU CODE, SO; TEI, N
05   43976; LD "ONLY" PIC FEE WAIVER; ;
05   41871; GTELD RES TOTAL CALL; ;
09   18881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   42244; GTLDWEWKFREEDOM; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===>          WHO IS? _______      PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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SLAM

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SL VIEW 06/03/98 08:31:40   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO   I 3946102 1R OF                                  COMP 05 13 98
TELNO  305 888 5348   CKT

09   18882244FWWD; PRO1=WC
09   888-5348; ; O-5483; 980513; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS[redacted] ID NA; PTN NA
1101 05/13/98TXT/DMSS/20227150/GTELD OD 05/10 DD 05/26
1400 ORDER COMPLETED CTAXA866                  T4CTXT2 05 13 98 07.53 9140 ST
1400 TEI CHANGED FROM N TO X                   T4CTXT2 05 13 98 07.52 9140 01
1400 ORDER CREATED CTAXA866                    T4CTXT2 05 13 98 07.52 9140 ST



0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===>          WHO IS?          PAGING KEY
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
```

| August 4th | !!!!

Al Disco Super Center	972-562-8633	8/5/98	88274	cust prom. no monthly charge for 800# - 3 months			
Albarran, Pedro	407-847-8647	8/5/98	119511	cust was **SLAMMED** to GTE w/o authorization			
Bailey, Kathy	808-871-6036	8/5/98	119725	cust was treated very rudely by representative			
Brooks, Joy	512-756-8036	8/5/98	120236	cust was offered a rate of 10.5c by GTE rep.			
Carol, Ahmad & Mary	630-355-2684	8/5/98	119000	cust was cursed at by GTE representative, : - (			
Castillo, Linda	562-925-0143	7/30/98	87711	cust hasn't rec. LD service or 800#, why not?			
Hocking, Robert E.	918-254-8711	8/5/98	88116	cust was told CC rates 35c with **NO** surcharge!			
Moran, Donna	810-727-3232	8/5/98	87064	cust told their current AT&T rates were going up			
Queen, Phyllis	606-928-6688	7/27/98	88966	cust was offered 14c min LD calls and CC calls			
Randal, Bill	817-488-3903	8/4/98	87244	cust was **SLAMMED** to GTE w/o authorization			
Rao, Malla	301-330-6157	8/5/98	87664	cust prom 360 min both domestic & Int'l + disc.			
Sajko, Colletta	503-667-3091	8/4/98	119144	cust told she could keep her 12c min with GTE			
Sawtooth's - J. Burrell	208-788-5346	8/5/98	87959	cust was **SLAMMED** to GTE w/o authorization			
Simon, Marcy	561-368-5313	8/5/98	87141	cust was **SLAMMED** to GTE thanks to **SNYDER**			
Vargas, Johnny Sr.	941-648-0956	8/5/98	no info	cust was **SLAMMED** to GTE w/o authorization			
Vinuela, Mr.	305-823-5221	8/5/98	142181	cust was **SLAMMED** to GTE w/o authorization			
Willis, Herman	903-885-2800	8/5/98	87963	cust was lied to by Seneca a GTE representative			
Withrow, James	517-279-9411	8/5/98	120460	cust prom. 12c min w/no MRC 24 hours/7 days			
18							
August 7th	!!!!

| !!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!! | TELEPHONE # | DATE | BADGE # | !!!!!!!!!!!!!!!!!!!!

| August 18th | !!!!

| !!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!! | TELEPHONE # | DATE | BADGE # | !!!!!!!!!!!!!!!!!!!!

Davis, Mrs. Joe	573-874-3849	8/21/98	7401	cust was quoted calling card rate of 14c flat!			
Eslick, Carolyn	501-982-8342	8/21/98	119930	cust rec. letter adding SmartRing w/out permission			
Fassbender, Kevin	805-948-3528	8/20/98	142600	cust was treated very rudely by representative			
Framoth, Steve	612-483-1977	8/19/98	7565	cust was **SLAMMED** to GTE w/o authorization			
Gaarden, Richard	814-398-4926	8/21/98	87129	cust was treated very rudely by representative			
Garvin, Lucille	760-366-7904	8/20/98	88332	cust was quoted 10c flat rate on Total Call Plan			
Hazel, Jim	618-723-2096	8/21/98	87730	cust wanted to keep OCP with G.T.E. L.D., not!			
Hebert, Nichole	209-435-1754	8/21/98	120220	cust was **SLAMMED** to GTE thanks to **SNYDER**			
Jones, Angela	718-771-3327	8/20/98	120504	cust was **SLAMMED** to GTE w/o authorization			
Kravetz, Mr.	561-582-6038	8/21/98	Janet	cust rec letter of request to change carrier, upset			
Kumbalek, Micheal	708-333-4355	8/21/98	119814	cust was **SLAMMED** to GTE w/o authorization			
Latorri, Philip	608-254-4526	8/21/98	119370	cust acct. shows MCI when it sh be AT&T, UTP!			
Leach, Gregg & Donna	918-258-1944	8/21/98	87911	cust had to order Flex Pkg twice & is not happy			
Lorenz, Jerry	573-546-7511	8/21/98	120504	cust was quoted 10c min 24/7, upset will change			
Martin, Thomas	718-259-6242	7/30/98	88515	cust was **SLAMMED** to GTE thanks to **SNYDER**			
Meyer, Richard	616-651-3461	8/20/98	8005	cust was offered a 20% discount on Total Call Plan			
Moss, Robert	703-368-1696	8/21/98	87423	cust was quoted 46 or 48c min to Korea, upset!			
Patel, Bharat	630-515-9107	8/22/98	119503	cust was treated very rudely by representative			
Patel, Dilip	508-230-9621	8/21/98	142600	cust was treated very rudely by representative			
Preble, Eleanor	813-893-5037	8/24/98	7367	cust rec. card stating 333 free **w/end** mins. ?			
Roach, Matilda	940-591-8922	8/20/98	87112	cust wants to make sure our reps know our plans			
Romanelli, Armando	815-894-2530	8/24/98	87401	cust rec. card stating 333 free **w/end** mins. ?			
Smith, Clyde	409-741-2929	8/20/98	119205	cust was quoted 7c flat rate & 360 free mins.			
Torres, Salvador M.	818-896-0945	8/20/98	88332	cust found letter on his door to switch to G.T.E. ?			
Vasquez, Antonio	305-620-8760	8/20/98	120332	cust was **SLAMMED** to GTE w/o authorization			
Welsh, Jonathan	941-858-0507	8/22/98	119880	cust upset because he was misquoted rates ESP			
36							

23236

| August 11th | !!!!

Glassberg, Robert	310-839-8107	8/12/98	87047	cust asks why we can't provide TCP on ForeX line			
Helke, Shirley	608-655-4762	8/11/98	87923	cust prom. 4 services for $7.95, wants tape pulled			
Hu, Bo	610-446-2904	8/11/98	119144	cust was quoted 7c min 24/7 on ESP, pull tape			
Jo, Margaret	626-446-9115	8/10/98	119144	cust was offered 38 or 39c calls to Hong Kong, Intl			
Long, Donald & Patty	815-673-1642	8/12/98	87423	cust was told wrong info about her call services			
Lopez, Legina	305-598-5082	8/11/98	87911	cust was **SLAMMED** to GTE thanks to **SNYDER**			
Maubach, Thomas	309-364-3456	8/11/98	87959	cust didn't order IWMC or smart pak			
McCauley, M.J.	309-928-9206	8/10/98	11944	cust not getting amount promise for call services			
Monterroso, Vivian	310-412-0685	8/11/98	no info	cust was treated very rudely by a representative			
Morales, Marilyn	305-673-4668	8/11/98	87959	cust was **SLAMMED** to GTE w/o authorization			
Rumiez, Anthony	616-637-4514	8/11/98	9757	cust was switched from ESP to TC, who, when?			
Tompkins, Amy	972-315-2585	8/11/98	119966	cust misinformed about 360 free weekend min.			
15							
August 14th	!!!!

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SL VIEW 06/25/98 07:44:51   VIEW ORDER - ASOS FORMAT              PAGE   1 +

ORDER NO   I 3742145 1R OF                                  COMP 05 05 98
TELNO  305 688 6242   CKT

     R/C DD:                COEFF :              SUFFIX:
     ITEM #:                WKWITH:              VISIT :
     REMARKS:

01   023; I3742145; 980505; 77XX; 980505; 1R; 688-6242
02   CROMARTIE, RACHEL; 2000 NW 152ND TER; ;
0202 MIAMI; FL; 33169
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 200; ALT, D; RISK, H
03   SCORE 100; BUREAU CODE, SO; TEI, N
05   43976; LD "ONLY" PIC FEE WAIVER; ;
05   41871; GTELD RES TOTAL CALL; ;
09   18881871EZ3R; PRO1=BI
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   49979; GTELD1000FREEDOM; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> ____          WHO IS? _______          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE
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Not Authorized No. Credit.

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SL VIEW 06/25/98 07:44:51   VIEW ORDER - ASOS FORMAT                PAGE  2

ORDER NO    I 3742145 1R OF                                  COMP 05 05 98
TELNO  305 688 6242    CKT

09    18889979SOTU; PRO1=BI
09    688-6242; ; O-5483; 980505; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS NA; ID NA; PTN NA
1101 05/05/98RXG/DMSS/20212242/GTELD OD 04/30 DD 05/15
1400 ORDER COMPLETED CTAXA86I                  T4CRXG5 05 05 98 09.11 9140 ST
1400 ORDER CREATED CTAXA86I                    T4CRXG5 05 05 98 09.09 9140 ST



0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> ____          WHO IS? ________          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE
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May 29 13:22 1998 Page 1

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SL VIEW 05/29/98 11:22:23   VIEW ORDER - ASOS FORMAT                PAGE   1 +

ORDER NO    I 3506314 1R OF                                  COMP 04 25 98
TELNO  954 523 5125   CKT

     R/C DD:                COEFF :              SUFFIX:
     ITEM #:                WKWITH:              VISIT :
     REMARKS:

01   141; I3506314; 980425; 77GB; 980425; 1R; 523-5125
02   PAUL, GEORGE; 209 NW 17 ST; ;
0202 FORT LAUDERDA; FL; 33311
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 200; ALT, D; RISK, H
03   SCORE 100; BUREAU CODE, SO; TEI, N
05   43976; LD "ONLY" PIC FEE WAIVER; ;
05   41871; GTELD RES TOTAL CALL; ;
09   18861871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   42244; GTLDWEWKFREEDOM; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> ____          WHO IS? _______          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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SL VIEW 05/29/98 11:22:23   VIEW ORDER - ASOS FORMAT              PAGE   2

ORDER NO    I 3506314 1R OF                                  COMP 04 25 98
TELNO  954 523 5125    CKT

09    18882244FWWD; PRO1=WC
09    523-5125; ; O-5483; 980425; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS NA; ID NA; PTN NA
1101 04/25/98TXT/DMSS/20182678/GTELD CD 04/19 DD 05/04
1400 ORDER COMPLETED CTAXA866                    T4CTXT2 04 25 98 10.54 9140 ST
1400 ORDER CREATED CTAXA866                      T4CTXT2 04 25 98 10.54 9140 ST



0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> _____      WHO IS? _______      PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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SL VIEW 05/29/98 09:43:40   VIEW ORDER - ASOS FORMAT                PAGE  1 +

ORDER NO   I 3717022 1R OF                                  COMP 05 04 98
TELNO  305 769 3047   CKT

     R/C DD:                COEFF :              SUFFIX:
     ITEM #:                WKWITH:              VISIT :
     REMARKS:

01   023; I3717022; 980504; 77XX; 980504; 1R; 769-3047
02   SAINTABLE, ANTOINE; 1271 NW 115 ST; ;
0202 MIAMI; FL; 33167
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 999999; ALT, S; RISK, L
03   SCORE 743; BUREAU CODE, TW; TEI, N
05   43976; LD "ONLY" PIC FEE WAIVER; ;
05   41871; GTELD RES TOTAL CALL; ;
09   18881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   42244; GTLDWEWKFREEDOM; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> ____          WHO IS? _______          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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May 29 11:44 1998 Page 1

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SL VIEW 05/29/98 09:43:40   VIEW ORDER - ASOS FORMAT                PAGE  2

ORDER NO    I 3717022 1R OF                                  COMP 05 04 98
TELNO  305 769 3047   CKT

09   18882244FWWD; PRO1=WC
09   769-3047; ; O-5483; 980504; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS [redacted]; ID NA; PTN NA
1101 05/04/98RXP/DMSS/20209815/GTELD OD 04/19 DD 05/04
1400 ORDER COMPLETED CTAXA840                  T2CRXP1 05 04 98 13.09 9140 ST
1400 ORDER CREATED CTAXA840                    T2CRXP1 05 04 98 13.08 9140 ST



0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===>            WHO IS?                  PAGING KEY
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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SL VIEW 05/20/98 11:08:57   VIEW ORDER - ASOS FORMAT                PAGE   1 +

ORDER NO   I 3576165 1R OF                                  COMP 04 28 98
TELNO  305 326 7494   CKT

     R/C DD:                COEFF :              SUFFIX:
     ITEM #:                WKWITH:              VISIT :
     REMARKS:

01   023; I3576165; 980428; 77AL; 980428; 1R; 326-7494
02   LAZO, INES; 529 SW 4TH ST 202; ;
0202 MIAMI; FL; 33130
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 200; ALT, D; RISK, H
03   SCORE 100; BUREAU CODE, SO; TEI, N
05   43976; LD "ONLY" PIC FEE WAIVER; ;
05   41871; GTELD RES TOTAL CALL; ;
09   18881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   44086; SPANISH-LANGUAGE PREFERNC; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===>            WHO IS?                 PAGING KEY
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
```

SLAM

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SL VIEW 05/20/98 11:08:57   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO    I 3576165 1R OF                                  COMP 04 28 98
TELNO  305 326 7494    CKT

05    42244; GTLDWEWKFREEDOM; ;
09    18882244FWWD; PRO1=WC
09    326-7494; ; O-5483; 980428; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS NA; ID NA; PTN NA
1101 04/28/98RXG/DMSS/20198714/GTELD OD 04/23 DD 05/08
1400 ORDER COMPLETED CTAXA86I                  T4CRXG5 04 28 98 14.21 9140 ST
1400 ORDER CREATED CTAXA86I                    T4CRXG5 04 28 98 14.20 9140 ST



0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> _____          WHO IS? _______          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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May 21 09:52 1998 Page 1

SL VIEW 05/21/98 07:52:04 VIEW ORDER - ASOS FORMAT PAGE 1 +

ORDER NO I 3622303 1R OF COMP 04 30 98
TELNO 954 458 3144 CKT

R/C DD: COEFF : SUFFIX:
ITEM #: WKWITH: VISIT :
REMARKS:

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01 141; I3622303; 980429; 77EH; 980429; 1R; 458-3144
02 LAROQUE, CLAUDIA; 704 NE 8TH ST; ;
0202 HALLANDALE; FL; 33009
03 B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03 CTX, 0000; TAX, 3; ACCT-LIMIT, 300; ALT, D; RISK, M
03 SCORE 600; BUREAU CODE, SO; TEI, N
05 43976; LD "ONLY" PIC FEE WAIVER; ;
05 41871; GTELD RES TOTAL CALL; ;
09 18881871EZ3R; PRO1=WC
05 44762; SNYDER GENERAL IN LANGUAGE; ;
05 41366; GTELD RES INTERNATIONAL DCP; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> _____ WHO IS? _____ PAGING KEY ___
PF14=PG FWD PF15=PG BWD PF17=+10 PGS PF18=-10 PGS PF19=LAST PG PF20=PAGE

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SL VIEW 05/21/98 07:52:04   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO   I 3622303 1R OF                                  COMP 04 30 98
TELNO  954 458 3144   CKT

09   18881366CESP; PRO1=WC
05   42245; GTLDWEWKFREEINTL; ;
09   18882245FWWI; PRO1=WC
09   458-3144; ; O-5483; 980429; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS [redacted]; ID NA; PTN NA
1101 04/29/98LXW/DMSS/20200794/GTELD OD 04/26 DD 05/11
1400 ORDER COMPLETED CTAXA85U                T4CLXW1 04 29 98 18.33 9140 ST
1400 TEI CHANGED FROM N TO X                 T4CLXW1 04 29 98 18.32 9140 01
1400 ORDER CREATED CTAXA85U                  T4CLXW1 04 29 98 18.32 9140 ST



0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===>          WHO IS?          PAGING KEY
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE
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May 21 13:47 1998 Page 1

SL VIEW 05/21/98 11:46:50 VIEW ORDER - ASOS FORMAT PAGE 1 +

ORDER NO I 3483223 1R OF COMP 04 24 98
TELNO 305 822 8413 CKT

R/C DD: COEFF : SUFFIX:
ITEM #: WKWITH: VISIT :
REMARKS:

01 023; I3483223; 980424; 77XX; 980424; 1R; 822-8413
02 BACA, SILVIO; 2660 W 76 ST; ;
0202 HIALEAH; FL; 33012
03 B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03 CTX, 0000; TAX, 3; ACCT-LIMIT, 200; ALT, D; RISK, H
03 SCORE 100; BUREAU CODE, SO; TEI, N
05 43976; LD "ONLY" PIC FEE WAIVER; ;
05 41871; GTELD RES TOTAL CALL; ;
09 18881871EZ3R; PRO1=WC
05 44762; SNYDER GENERAL IN LANGUAGE; ;
05 44086; SPANISH-LANGUAGE PREFERNC; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> ____ WHO IS? _____ PAGING KEY ___
PF14=PG FWD PF15=PG BWD PF17=+10 PGS PF18=-10 PGS PF19=LAST PG PF20=PAGE

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SL VIEW 05/21/98 11:46:50   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO   I 3483223 1R OF                                  COMP 04 24 98
TELNO  305 822 8413   CKT

05   42245; GTLDWEWKFREEINTL; ;
09   18882245FWWI; PRO1=WC
05   00493; INTERNATIONAL CALL PLAN II; ;
09   18880493ICP2; PRO1=WC
09   822-8413; ; O-5483; 980424; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS[redacted]; ID NA; PTN NA
1101 04/24/98RXG/DMSS/20180078/GTELD OD 04/08 DD 04/23
1400 ORDER COMPLETED CTAXA86I                T4CRXG5 04 24 98 13.13 9140 ST
1400 TEI CHANGED FROM N TO X                 T4CRXG5 04 24 98 13.12 9140 01
1400 ORDER CREATED CTAXA86I                  T4CRXG5 04 24 98 13.12 9140 ST



0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===>          WHO IS?          PAGING KEY
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE
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SL VIEW 05/29/98 09:44:21   VIEW ORDER - ASOS FORMAT                PAGE   1 +

ORDER NO   I 3500051 1R OF                                  COMP 04 25 98
TELNO  305 547 4136   CKT

     R/C DD:                COEFF :              SUFFIX:
     ITEM #:                WKWITH:              VISIT :
     REMARKS:

01   023; I3500051; 980425; 77DK; 980425; 1R; 547-4136
02   OROSCO, CARMEN; 1358 NW 7 CT; ;
0202 MIAMI; FL; 33136
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 200; ALT, D; RISK, H
03   SCORE 100; BUREAU CODE, SO; TEI, N
05   43976; LD "ONLY" PIC FEE WAIVER; ;
05   41871; GTELD RES TOTAL CALL; ;
09   18881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   44086; SPANISH-LANGUAGE PREFERNC; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===>            WHO IS?                  PAGING KEY
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE
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May 29 11:44 1998 Page 1

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SL VIEW 05/29/98 09:44:21   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO   I 3500051 1R OF                                  COMP 04 25 98
TELNO  305 547 4136   CKT

05   42245; GTLDWEWKFREEINTL; ;
09   18882245FWWI; PRO1=WC
05   00493; INTERNATIONAL CALL PLAN II; ;
09   18880493ICP2; PRO1=WC
09   547-4136; ; O-5483; 980425; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS NA; ID NA; PTN NA
1101 04/25/98RXG/DMSS/20183245/GTELD OD 04/19 DD 05/04
1400 ORDER COMPLETED CTAXA86I                    T4CRXG5 04 25 98 06.13 9140 ST
1400 ORDER CREATED CTAXA86I                      T4CRXG5 04 25 98 06.12 9140 ST



0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> _____  WHO IS? _______  PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE
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May 29 15:19 1998 Page 1

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SL VIEW 05/29/98 13:18:48   VIEW ORDER - ASOS FORMAT                PAGE   1 +

ORDER NO    I 3792354 1R OF                                  COMP 05 06 98
TELNO  305 445 3484    CKT

     R/C DD:                 COEFF :                 SUFFIX:
     ITEM #:                 WKWITH:                 VISIT :
     REMARKS:

01   023; I3792354; 980506; 77XX; 980506; 1R; 445-3484
02   VALVERDE, MERCEDES; 1525 SW 31 AVE; ;
0202 MIAMI; FL; 33145
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 200; ALT, D; RISK, H
03   SCORE 100; BUREAU CODE, SO; TEI, N
05   43976; LD "ONLY" PIC FEE WAIVER; ;
05   41871; GTELD RES TOTAL CALL; ;
09   18881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   44086; SPANISH-LANGUAGE PREFERNC; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===>          WHO IS?                    PAGING KEY
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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May 29 15:19 1998 Page 1

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SL VIEW 05/29/98 13:18:48   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO   I 3792354 1R OF                                  COMP 05 06 98
TELNO  305 445 3484   CKT

05   42245; GTLDWEWKFREEINTL; ;
09   18882245FWWI; PRO1=WC
05   00493; INTERNATIONAL CALL PLAN II; ;
09   18880493ICP2; PRO1=WC
09   445-3484; ; O-5483; 980506; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS NA; ID NA; PTN NA
1101 05/06/98TXT/DMSS/20212947/GTELD OD 04/30 DD 05/25
1400 ORDER COMPLETED CTAXA866                T4CTXT2 05 06 98 15.10 9140 ST
1400 ORDER CREATED CTAXA866                  T4CTXT2 05 06 98 15.09 9140 ST



0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> _____          WHO IS? _________          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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SL VIEW 06/16/98 06:48:07   VIEW ORDER - ASOS FORMAT                PAGE   1 +

ORDER NO   I 4129867 1R OF                                  COMP 05 20 98
TELNO  305 944 5422   CKT

     R/C DD:                COEFF :              SUFFIX:
     ITEM #:                WKWITH:              VISIT :
     REMARKS:

01   023; I4129867; 980520; 77XX; 980520; 1R; 944-5422
02   BARRON, LEONARD; 1501 NE 191ST ST; ;
0202 MIAMI; FL; 33162
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 300; ALT, D; RISK, M
03   SCORE 600; BUREAU CODE, SO; TEI, N
05   41871; GTELD RES TOTAL CALL; ;
09   18881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   41366; GTELD RES INTERNATIONAL DCP; ;
09   18881366CESP; PRO1=WC
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===>          WHO IS?          PAGING KEY
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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Customer did not authorize change to GTE long distance # 8.48 adj.

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SL VIEW 06/16/98 06:48:07   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO   I 4129867 1R OF                                  COMP 05 20 98
TELNO  305 944 5422   CKT

05   42245; GTLDWEWKFREEINTL; ;
09   18882245FWWI; PRO1=WC
09   944-5422; ; O-5483; 980520; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS [redacted]; ID NA; PTN NA
1101 05/20/98CXP/DMSS/20243365/GTELD OD 05/17 DD 06/02
1400 ORDER COMPLETED CTAXA85C                  T4CCXP5 05 20 98 10.58 9140 ST
1400 TEI CHANGED FROM N TO X                   T4CCXP5 05 20 98 10.57 9140 01
1400 ORDER CREATED CTAXA85C                    T4CCXP5 05 20 98 10.57 9140 ST


0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===>          WHO IS?          PAGING KEY
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE
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SL VIEW 06/16/98 08:40:35   VIEW ORDER - ASOS FORMAT                PAGE   1 +

ORDER NO   I 3719727 1R OF                                  COMP 05 04 98
TELNO  305 643 3271   CKT

     R/C DD:                COEFF :              SUFFIX:
     ITEM #:                WKWITH:              VISIT :
     REMARKS:

01   023; I3719727; 980504; 77MF; 980504; 1R; 643-3271
02   LOPEZ, JULIA; 1101 SW 24 AVE; ;
0202 MIAMI; FL; 33135
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 200; ALT, D; RISK, H
03   SCORE 100; BUREAU CODE, SO; TEI, N
05   43976; LD "ONLY" PIC FEE WAIVER; ;
05   41871; GTELD RES TOTAL CALL; ;
09   18881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   44086; SPANISH-LANGUAGE PREFERNC; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===>            WHO IS?            PAGING KEY
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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2.05

23271

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SL VIEW 06/16/98 08:40:41   VIEW ORDER - ASOS FORMAT              PAGE   2

ORDER NO   I 3719727 1R OF                                  COMP 05 04 98
TELNO  305 643 3271   CKT

05   42245; GTLDWEWKFREEINTL; ;
09   18882245FWWI; PRO1=WC
05   00493; INTERNATIONAL CALL PLAN II; ;
09   18880493ICP2; PRO1=WC
09   643-3271; ; O-5483; 980504; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS [redacted]; ID NA; PTN NA
1101 05/04/98MXJ/DMSS/20210080/GTELD OD 04/23 DD 05/08
1400 ORDER COMPLETED CTAXA856                  T4CMXJ0 05 04 98 13.58 9140 ST
1400 TEI CHANGED FROM N TO X                   T4CMXJ0 05 04 98 13.57 9140 01
1400 ORDER CREATED CTAXA856                    T4CMXJ0 05 04 98 13.57 9140 ST



0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> ____          WHO IS? _______          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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SL VIEW 06/16/98 08:58:47   VIEW ORDER - ASOS FORMAT                PAGE   1 +

ORDER NO   I 3398872 1R OF                                  COMP 04 22 98
TELNO  305 891 5521   CKT

     R/C DD:                COEFF :              SUFFIX:
     ITEM #:                WKWITH:              VISIT :
     REMARKS:

01   023; I3398872; 980422; 77XX; 980422; 1R; 891-5521
02   BLACKBURN, JULIO; 0 PO BOX 545913; ;
0202 SURFSIDE; FL; 33154
03   B/C, 10; OCC, 36; OST, TT; SLS, RXP; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 200; ALT, D; RISK, H
03   SCORE 100; BUREAU CODE, SO; TEI, N
05   43976; LD "ONLY" PIC FEE WAIVER; ;
05   44708; EASY SAVINGS PLAN TF; ;
09   18884708REPM; PRO1=D6
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   44086; SPANISH-LANGUAGE PREFERNC; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> ____          WHO IS? _______          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=
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18.20

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SL VIEW 06/16/98 08:58:47   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO   I 3398872 1R OF                                  COMP 04 22 98
TELNO  305 891 5521   CKT

09   891-5521; ; O-5483; 980422; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS NA; ID NA; PTN NA
1101 04/22/98RXP/DMSS/20041844/GTELD OD 01/31 DD 02/06
1400 ORDER COMPLETED CTAXA840                  T2CRXP1 04 22 98 09.04 9140 ST
1400 ORDER CREATED CTAXA840                    T2CRXP1 04 22 98 09.03 9140 ST



0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> _____        WHO IS? ________        PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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Slammed

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SL VIEW 06/16/98 12:32:33   VIEW ORDER - ASOS FORMAT                PAGE   1

ORDER NO   I 3967379 1R OF                                  COMP 05 13 98
TELNO  305 751 6865   CKT

     R/C DD:                 COEFF :              SUFFIX:
     ITEM #:                 WKWITH:              VISIT :
     REMARKS:

01   023; I3967379; 980513; 77XX; 980513; 1R; 751-6865
02   CHARLES, AMITE; 7543 NE MIAMI CT; ;
0202 MIAMI; FL; 33138
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 300; ALT, D; RISK, M
03   SCORE 600; BUREAU CODE, SO; TEI, N
05   43976; LD "ONLY" PIC FEE WAIVER; ;
05   41871; GTELD RES TOTAL CALL; ;
09   18881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   42244; GTLDWEWKFREEDOM; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> _____  WHO IS? _____  PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE
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SL VIEW 06/16/98 12:36:57   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO    I 3967379 1R OF                                  COMP 05 13 98
TELNO  305 751 6865   CKT

09   18882244FWWD; PRO1=WC
09   751-6865; ; O-5483; 980513; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS [redacted]; ID NA; PTN NA
1101 05/13/98MXJ/DMSS/20229955/GTELD OD 05/10 DD 05/26
1400 ORDER COMPLETED CTAXA856                 T4CMXJ0 05 13 98 16.00 9140 ST
1400 TEI CHANGED FROM N TO X                  T4CMXJ0 05 13 98 15.59 9140 01
1400 ORDER CREATED CTAXA856                   T4CMXJ0 05 13 98 15.59 9140 ST



0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> _____          WHO IS? _______        PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
```

23276

Jun 17 09:43 1998 Page 1

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SL VIEW 06/17/98 07:43:15   VIEW ORDER - ASOS FORMAT                PAGE   1 +

ORDER NO   I 4361597 1R OF                                  COMP 06 01 98
TELNO  305 893 0211   CKT

     R/C DD:              COEFF :              SUFFIX:
     ITEM #:              WKWITH:              VISIT :
     REMARKS:

01   023; I4361597; 980601; 77JV; 980601; 1R; 893-0211
02   CLAVERIA, CARLOS; 12590 NE 16TH AVE; ;
0202 MIAMI; FL; 33161
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 200; ALT, D; RISK, H
03   SCORE 100; BUREAU CODE, SO; TEI, N
05   41871; GTELD RES TOTAL CALL; ;
09   18881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   42244; GTLDWEWKFREEDOM; ;
09   18882244FWWD; PRO1=WC
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===>          WHO IS?                    PAGING KEY
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE
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Customer did not authorize change to GTE long distance $.61 adj.

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SL VIEW 06/17/98 07:43:15   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO    I 4361597 1R OF                                 COMP 06 01 98
TELNO  305 893 0211   CKT

09   893-0211; ; O-5483; 980601; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS NA; ID NA; PTN NA
1101 06/01/98CXP/DMSS/20253836/GTELD OD 05/21 DD 06/08
1400 ORDER COMPLETED CTAXA85C                  T4CCXP5 06 01 98 06.23 9140 ST
1400 ORDER CREATED CTAXA85C                    T4CCXP5 06 01 98 06.22 9140 ST

0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> _____          WHO IS? _______          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE
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SL VIEW 06/17/98 07:50:23   VIEW ORDER - ASOS FORMAT                PAGE   1 +

ORDER NO   I 3738173 1R OF                                  COMP 05 05 98
TELNO  407 851 6359   CKT

     R/C DD:                COEFF :              SUFFIX:
     ITEM #:                WKWITH:              VISIT :
     REMARKS:

01   044; I3738173; 980505; 77XX; 980505; 1R; 851-6359
02   GUILLEN, JUAN; 6774 KASBON LN; ;
0202 ORLANDO; FL; 32809
03   B/C, 10; OCC, 36; OST, TT; SIS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 200; ALT, D; RISK, H
03   SCORE 100; BUREAU CODE, SO; TEI, N
05   43976; LD "ONLY" PIC FEE WAIVER; ;
05   41871; GTELD RES TOTAL CALL; ;
09   I8881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   44086; SPANISH-LANGUAGE PREFERNC; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===>            WHO IS?                  PAGING KEY
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE
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SL VIEW 06/17/98 07:50:23   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO   I 3738173 1R OF                                  COMP 05 05 98
TELNO  407 851 6359   CKT

05   42244; GTLDWEWKFREEDOM; ;
09   18882244FWWD; PRO1=WC
09   851-6359; ; O-5483; 980505; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS [redacted]; ID NA; PTN NA
1101 05/05/98CXP/DMSS/20212104/GTELD OD 04/30 DD 05/15
1400 ORDER COMPLETED CTAXA85C                    T4CCXP5 05 05 98 07.14 9140 ST
1400 TEI CHANGED FROM N TO X                     T4CCXP5 05 05 98 07.13 9140 01
1400 ORDER CREATED CTAXA85C                      T4CCXP5 05 05 98 07.13 9140 ST



0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===>          WHO IS?                  PAGING KEY
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE
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SL VIEW 06/17/98 08:35:30   VIEW ORDER - ASOS FORMAT                PAGE   1 -

ORDER NO   I 4355095 1R OF                                  COMP 05 30 98
TELNO  305 254 6811   CKT

     R/C DD:                COEFF :              SUFFIX:
     ITEM #:                WKWITH:              VISIT :
     REMARKS:

01   023; I4355095; 980530; 77FE; 980530; 1R; 254-6811
02   BUENO, CARLOS; 12801 SW 68 AVE; ;
0202 MIAMI; FL; 33156
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 200; ALT, D; RISK, H
03   SCORE 100; BUREAU CODE, SO; TEI, N
05   41871; GTELD RES TOTAL CALL; ;
09   18881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   44086; SPANISH-LANGUAGE PREFERNC; ;
05   42245; GTLDWEWKFREEINTL; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===>            WHO IS?                  PAGING KEY
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE
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4.22

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SL VIEW 06/17/98 08:35:30   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO   I 4355095 1R OF                                  COMP 05 30 98
TELNO  305 254 6811   CKT

09   18882245FWWI; PRO1=WC
05   00493; INTERNATIONAL CALL PLAN II; ;
09   18880493ICP2; PRO1=WC
09   254-6811; ; O-5483; 980530; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS [redacted]; ID NA; PTN NA
1101 05/30/98RXP/DMSS/20253594/GTELD SD 05/21 DD 06/08
1400 ORDER COMPLETED CTAXA840                  T2CRXP1 05 30 98 11.49 9140 ST
1400 TEI CHANGED FROM N TO X                   T2CRXP1 05 30 98 11.49 9140 01
1400 ORDER CREATED CTAXA840                    T2CRXP1 05 30 98 11.49 9140 ST



0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===>          WHO IS?          PAGING KEY
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE
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SL VIEW 06/17/98 10:44:36   VIEW ORDER - ASOS FORMAT              PAGE   1 +

ORDER NO   I 3999043 1R OF                                  COMP 05 14 98
TELNO  305 557 5892   CKT

     R/C DD:                 COEFF :                 SUFFIX:
     ITEM #:                 WKWITH:                 VISIT :
     REMARKS:

01   023; I3999043; 980514; 77AA; 980514; 1R; 557-5892
02   SANCHEZ, ROSA; 1485 W 46 ST; ;
0202 HIALEAH; FL; 33012
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 200; ALT, D; RISK, H
03   SCORE 100; BUREAU CODE, SO; TEI, N
05   43976; LD "ONLY" PIC FEE WAIVER; ;
05   41871; GTELD RES TOTAL CALL; ;
09   18881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   44086; SPANISH-LANGUAGE PREFERNC; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===>          WHO IS?          PAGING KEY
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
```

SLAM

1.24

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SL VIEW 06/17/98 10:44:36   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO   I 3999043 1R OF                                  COMP 05 14 98
TELNO  305 557 5892   CKT

05   42245; GTLDWEWKFREEINTL; ;
09   18882245FWWI; PRO1=WC
05   00493; INTERNATIONAL CALL PLAN II; ;
09   18880493ICP2; PRO1=WC
09   557-5892; ; O-5483; 980514; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS [redacted]; ID NA; PTN NA
1101 05/14/98RXP/DMSS/20232381/GTELD OD 05/10 DD 05/26
1400 ORDER COMPLETED CTAXA840                  T2CRXP1 05 14 98 15.44 9140 ST
1400 TEI CHANGED FROM N TO X                   T2CRXP1 05 14 98 15.43 9140 01
1400 ORDER CREATED CTAXA840                    T2CRXP1 05 14 98 15.43 9140 ST



0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===>          WHO IS?          PAGING KEY
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAG
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SL VIEW 06/17/98 09:26:08   VIEW ORDER - ASOS FORMAT              PAGE  1 +

ORDER NO   I 3974660 1R OF                                  COMP 05 13 98
TELNO  305 854 2120   CKT

     R/C DD:                 COEFF :              SUFFIX:
     ITEM #:                 WKWITH:              VISIT :
     REMARKS:

01   023; I3974660; 980513; 77XX; 980513; 1R; 854-2120
02   GIL, CARLOS; 1276 SW 17 TER; ;
0202 MIAMI; FL; 33145
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 300; ALT, D; RISK, M
03   SCORE 600; BUREAU CODE, SO; TEI, N
05   43976; LD "ONLY" PIC FEE WAIVER; ;
05   41871; GTELD RES TOTAL CALL; ;
09   18881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   44086; SPANISH-LANGUAGE PREFERNC; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> ____          WHO IS? _______          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE
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10.64

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SL VIEW 06/17/98 09:26:08   VIEW ORDER - ASOS FORMAT              PAGE   2

ORDER NO   I 3974660 1R OF                                  COMP 05 13 98
TELNO  305 854 2120   CKT

05   42245; GTLDWEWKFREEINTL; ;
09   18882245FWWI; PRO1=WC
05   00493; INTERNATIONAL CALL PLAN II; ;
09   18880493ICP2; PRO1=WC
09   854-2120; ; O-5483; 980513; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS [redacted]; ID NA; PTN NA
1101 05/13/98RXG/DMSS/20231068/GTELD QD 05/10 DD 05/26
1400 ORDER COMPLETED CTAXA86I                 T4CRXG5 05 13 98 19.33 9140 ST
1400 TEI CHANGED FROM N TO X                  T4CRXG5 05 13 98 19.33 9140 01
1400 ORDER CREATED CTAXA86I                   T4CRXG5 05 13 98 19.32 9140 ST


0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===>            WHO IS?                  PAGING KEY
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE
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SL VIEW 06/18/98 11:06:14   VIEW ORDER - ASOS FORMAT                PAGE   1 +

ORDER NO   I 3601358 1R OF                                  COMP 04 29 98
TELNO  904 285 7493   CKT

     R/C DD:                COEFF :              SUFFIX:
     ITEM #:                WKWITH:              VISIT :
     REMARKS:

01   127; I3601358; 980429; 77XX; 980429; 1R; 285-7493
02   HASLAUER, LYNN; 60 DOLPHIN BLVD; ;
0202 PONTE VEDRA; FL; 32082
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 200; ALT, D; RISK, H
03   SCORE 100; BUREAU CODE, SO; TEI, N
05   43976; LD "ONLY" PIC FEE WAIVER; ;
05   44708; EASY SAVINGS PLAN TF; ;
09   18884708REPM; PRO1=D6
05   44762; SNYDER GENERAL IN LANGUAGE; ;
09   285-7493; ; O-5483; 980429; L; TC; LP; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===>          WHO IS?                    PAGING KEY
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAG
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SL Ann

23287

This Cust Mother Cld in - Sd a Snyder Rep was signing young People up outside of their School They told them if they W/ desc Serv - they (the Cust) would get 10.00 to 20.00 dollars. ???

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SL VIEW 06/18/98 11:06:14   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO    I 3601358 1R OF                                  COMP 04 29 98
TELNO  904 285 7493    CKT

11CI EMPL NA; CBR NA
11CJ SS [redacted] ID NA; PTN NA
1101 04/29/98TXD/DMSS/20202405/GTELD OD 04/26 DD 05/11
1400 ORDER COMPLETED CTAXA860                  T4CTXD3 04 29 98 10.49 9140 ST
1400 TEI CHANGED FROM N TO X                   T4CTXD3 04 29 98 10.48 9140 O
1400 ORDER CREATED CTAXA860                    T4CTXD3 04 29 98 10.48 9140 S.

0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> _____  WHO IS? _____  PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAG
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SL VIEW 06/17/98 15:18:40   VIEW ORDER - ASOS FORMAT                PAGE   1 +

ORDER NO   I 4146328 1R OF                                  COMP 05 20 98
TELNO  954 985 8390   CKT

     R/C DD:                COEFF :              SUFFIX:
     ITEM #:                WKWITH:              VISIT :
     REMARKS:

01   141; I4146328; 980520; 77XX; 980520; 1R; 985-8390
02   VELEZ, CARMEN; 3430 N 72 AVE; ;
0202 HOLLYWOOD; FL; 33024
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 200; ALT, D; RISK, H
03   SCORE 100; BUREAU CODE, SO; TEI, N
05   41871; GTELD RES TOTAL CALL; ;
09   18881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   41366; GTELD RES INTERNATIONAL DCP; ;
09   18881366CESP; PRO1=WC
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> _____   WHO IS? _____   PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAG
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Jun 17 17:19 1998 Page 1

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SL VIEW 06/17/98 15:18:40   VIEW ORDER - ASOS FORMAT              PAGE   2

ORDER NO   I 4146328 1R OF                                  COMP 05 20 98
TELNO  954 985 8390   CKT

05   42245; GTLDWEWKFREEINTL; ;
09   18882245FWWI; PRO1=WC
09   985-8390; ; O-5483; 980520; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS NA; ID NA; PTN NA
1101 05/20/98TXT/DMSS/20244976/GTELD OD 05/17 DD 06/02
1400 ORDER COMPLETED CTAXA866                  T4CTXT2 05 20 98 16.45 9140 ST
1400 ORDER CREATED CTAXA866                    T4CTXT2 05 20 98 16.45 9140 ST



0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> _____   WHO IS? _________   PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=F
```

Jun 18 13:06 1998 Page 1

SL VIEW 06/18/98 11:06:14 VIEW ORDER - ASOS FORMAT PAGE 1 +

ORDER NO I 3601358 1R OF COMP 04 29 98
TELNO 904 285 7493 CKT

R/C DD: COEFF : SUFFIX:
ITEM #: WKWITH: VISIT :
REMARKS:

01 127; I3601358; 980429; 77XX; 980429; 1R; 285-7493
02 HASLAUER, LYNN; 60 DOLPHIN BLVD; ;
0202 PONTE VEDRA; FL; 32082
03 B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03 CTX, 0000; TAX, 3; ACCT-LIMIT, 200; ALT, D; RISK, H
03 SCORE 100; BUREAU CODE, SO; TEI, N
05 43976; LD "ONLY" PIC FEE WAIVER; ;
05 44708; EASY SAVINGS PLAN TF; ;
09 18884708REPM; PRO1=D6
05 44762; SNYDER GENERAL IN LANGUAGE; ;
09 285-7493; ; O-5483; 980429; L; TC; LP; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> WHO IS? PAGING KEY
PF14=PG FWD PF15=PG BWD PF17=+10 PGS PF18=-10 PGS PF19=LAST PG PF20=PAGE

SL Ann

23291

This Cust Mother called in - said a Snyder rep was signing young people up outside of their school. They told them if they W/ desc serv - they (the Cust) would get 10.00 to 20.00 dollars. ???

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SL VIEW 06/15/98 09:49:51   VIEW ORDER - ASOS FORMAT                PAGE   1 +

ORDER NO    I 3506515 1R OF                                  COMP 04 25 98
TELNO  305 226 6552   CKT

     R/C DD:                COEFF :              SUFFIX:
     ITEM #:                WKWITH:              VISIT :
     REMARKS:

01   023; I3506515; 980425; 77XX; 980425; 1R; 226-6552
02   SAAVEDRA, MERCY; 850 NW 106 AVE; ;
0202 MIAMI; FL; 33182
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 200; ALT, D; RISK, H
03   SCORE 100; BUREAU CODE, SO; TEI, N
05   43976; LD "ONLY" PIC FEE WAIVER; ;
05   44708; EASY SAVINGS PLAN TF; ;
09   18884708REPM
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   44086; SPANISH-LANGUAGE PREFERNC; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===>            WHO IS?                  PAGING KEY
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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SL VIEW 06/15/98 09:49:56   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO   I 3506515 1R OF                                  COMP 04 25 98
TELNO  305 226 6552   CKT

09   226-6552; ; O-5483; 980425; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS NA; ID NA; PTN NA
1101 04/25/98MPH/DMSS/20184493/GTELD OD 04/19 DD 05/04
1400 ORDER COMPLETED CTAXARWK                  B5MMPH0 04 25 98 11.03 9140 ST
1400 ORDER CREATED CTAXARWK                    B5MMPH0 04 25 98 11.00 9140 ST



0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> ____          WHO IS? ________          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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SL VIEW 06/15/98 07:01:46 VIEW ORDER - ASOS FORMAT PAGE 1 +

ORDER NO I 4151026 1R OF COMP 05 21 98
TELNO 305 826 2188 CKT

R/C DD: COEFF : SUFFIX:
ITEM #: WKWITH: VISIT :
REMARKS:

01 023; I4151026; 980520; 77IX; 980520; 1R; 826-2188
02 BANEGA, EDILSA; 5373 W 23RD AVE; ;
0202 HIALEAH; FL; 33012
03 B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03 CTX, 0000; TAX, 3; ACCT-LIMIT, 200; ALT, D; RISK, H
03 SCORE 100; BUREAU CODE, SO; TEI, N
05 41871; GTELD RES TOTAL CALL; ;
09 18881871EZ3R; PRO1=WC
05 44762; SNYDER GENERAL IN LANGUAGE; ;
05 42244; GTLDWEWKFREEDOM; ;
09 18882244FWWD; PRO1=WC
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> WHO IS? PAGING KEY
PF14=PG FWD PF15=PG BWD PF17=+10 PGS PF18=-10 PGS PF19=LAST PG PF20=PAGE 1

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SL VIEW 06/15/98 07:01:46   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO   I 4151026 1R OF                                  COMP 05 21 98
TELNO  305 826 2188   CKT

09   826-2188; ; O-5483; 980520; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS NA; ID NA; PTN NA
1101 05/20/98MXJ/DMSS/20244435/GTELD OD 05/17 DD 06/02
1400 ORDER COMPLETED CTAXA856                  T4CMXJ0 05 20 98 19.01 9140 ST
1400 ORDER CREATED CTAXA856                    T4CMXJ0 05 20 98 19.01 9140 ST



0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> ____          WHO IS? _______          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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SL VIEW 06/12/98 08:31:50   VIEW ORDER - ASOS FORMAT                PAGE   1 +

ORDER NO    I 4362404 1R OF                                  COMP 06 01 98
TELNO  305 558 8291   CKT

     R/C DD:                 COEFF :                 SUFFIX:
     ITEM #:                 WKWITH:                 VISIT :
     REMARKS:

01   023; I4362404; 980601; 77XX; 980601; 1R; 558-8291
02   FIGUEROA, HECTOR; 3795 W 7 CT; ;
0202 HIALEAH; FL; 33012
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; EQS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 200; ALT, D; RISK, H
03   SCORE 100; BUREAU CODE, SO; TEI, N
05   41871; GTELD RES TOTAL CALL; ;
09   18881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   42245; GTLDWEWKFREEINTL; ;
09   18882245FWWI; PRO1=WC
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> _____          WHO IS? _______          PAGING KEY __
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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SL VIEW 06/12/98 08:31:50   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO   I 4362404 1R OF                                  COMP 06 01 98
TELNO  305 558 8291   CKT

05   00493; INTERNATIONAL CALL PLAN II; ;
09   18880493ICP2; PRO1=WC
09   558-8291; ; O-5483; 980601; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS NA; ID NA; PTN NA
1101 06/01/98TXD/DMSS/20255062/GTELD OD 05/21 DD 06/08
1400 ORDER COMPLETED CTAXA860                  T4CTXD3 06 01 98 07.19 9140 ST
1400 ORDER CREATED CTAXA860                    T4CTXD3 06 01 98 07.18 9140 ST


0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> ____          WHO IS? _______          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
```

Jun 12 09:23 1998 Page 1

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SL VIEW 06/12/98 07:23:17   VIEW ORDER - ASOS FORMAT                PAGE   1 +

ORDER NO    I 4315011 1R OF                                  COMP 05 28 98
TELNO  352 332 0641   CKT

     R/C DD:                COEFF :              SUFFIX:
     ITEM #:                WKWITH:              VISIT :
     REMARKS:

01   037; I4315011; 980528; 77CW; 980528; 1R; 332-0641
02   JAIN, ASHOK K; 8629 NW 1ST AVE; ;
0202 GAINESVILLE; FL; 32607
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 200; ALT, D; RISK, H
03   SCORE 100; BUREAU CODE, SO; TEI, N
05   41366; GTELD RES INTERNATIONAL DCP; ;
09   18881366CESP; PRO1=WC
05   42245; GTLDWEWKFREEINTL; ;
09   18882245FWWI; PRO1=WC
05   41851; GTELD RES ESP CHOICE 5-5; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> ____          WHO IS? _______          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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SL VIEW 06/12/98 07:23:17   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO    I 4315011 1R OF                                  COMP 05 28 98
TELNO  352 332 0641    CKT

09   18881851REPM; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
09   332-0641; ; O-5483; 980528; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS NA; ID NA; PTN NA
1101 05/28/98RXG/DMSS/20265555/GTELD OD 05/26 DD 06/10
1400 ORDER COMPLETED CTAXA86I                  T4CRXG5 05 28 98 17.31 9140 ST
1400 ORDER CREATED CTAXA86I                    T4CRXG5 05 28 98 17.30 9140 ST


0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> _____      WHO IS? _______      PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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SL VIEW 06/12/98 07:24:24   VIEW ORDER - ASOS FORMAT                PAGE   1 +

ORDER NO   I 4151203 1R OF                                  COMP 05 21 98
TELNO  305 931 2721   CKT

     R/C DD:                COEFF :              SUFFIX:
     ITEM #:                WKWITH:              VISIT :
     REMARKS:

01   023; I4151203; 980520; 77XX; 980520; 1R; 931-2721
02   DEROSA, LOUISE; 2470 NE 215 ST; ;
0202 MIAMI; FL; 33180
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 200; ALT, D; RISK, H
03   SCORE 100; BUREAU CODE, SO; TEI, N
05   41871; GTELD RES TOTAL CALL; ;
09   18881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   41366; GTELD RES INTERNATIONAL DCP; ;
09   18881366CESP; PRO1=WC
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> _____          WHO IS? _________          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
```

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SL VIEW 06/12/98 07:24:24   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO   I 4151203 1R OF                                  COMP 05 21 98
TELNO  305 931 2721   CKT

05   42245; GTLDWEWKFREEINTL; ;
09   18882245FWWI; PRO1=WC
09   931-2721; ; O-5483; 980520; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS [redacted]; ID NA; PTN NA
1101 05/20/98LXW/DMSS/20244468/GTELD OD 05/17 DD 06/02
1400 ORDER COMPLETED CTAXA85U                  T4CLXW1 05 20 98 19.16 9140 ST
1400 TEI CHANGED FROM N TO X                   T4CLXW1 05 20 98 19.15 9140 01
1400 ORDER CREATED CTAXA85U                    T4CLXW1 05 20 98 19.14 9140 ST


0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> ____        WHO IS? ________        PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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SL VIEW 06/12/98 07:39:20   VIEW ORDER - ASOS FORMAT                PAGE   1 +

ORDER NO   I 4139271 1R OF                                  COMP 05 20 98
TELNO  305 451 7051   CKT

     R/C DD:              COEFF :              SUFFIX:
     ITEM #:              WKWITH:              VISIT :
     REMARKS:

01   023; I4139271; 980520; 77XX; 980520; 1R; 451-7051
02   RODRIGUEZ, LIONEL; 129 OCEAN SHORE DR; ;
0202 KEY LARGO; FL; 33037
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 300; ALT, D; RISK, M
03   SCORE 600; BUREAU CODE, SO; TEI, N
05   41871; GTELD RES TOTAL CALL; ;
09   18881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   42244; GTLDWEWKFREEDOM; ;
09   18882244FWWD; PRO1=WC
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===>            WHO IS?                    PAGING KEY
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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SL VIEW 06/12/98 07:39:20   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO    I 4139271 1R CF                                  COMP 05 20 98
TELNO  305 451 7051   CKT

09   451-7051; ; O-5483; 980520; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS [redacted] ID NA; PTN NA
1101 05/20/98OSV/DMSS/20244109/GTELD OD 05/17 DD 06/02
1400 ORDER COMPLETED CTAXA8E7                 B5MOSV1 05 20 98 14.06 9140 ST
1400 TEI CHANGED FROM N TO X                  B5MOSV1 05 20 98 14.05 9140 01
1400 ORDER CREATED CTAXA8E7                   B5MOSV1 05 20 98 14.05 9140 ST


0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> ____          WHO IS? _______          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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SL VIEW 06/11/98 12:16:27 VIEW ORDER - ASOS FORMAT PAGE 1 +

ORDER NO I 3533567 1R OF COMP 04 27 98
TELNO 305 596 1629 CKT

R/C DD: COEFF : SUFFIX:
ITEM #: WKWITH: VISIT :
REMARKS:

01 023; I3533567; 980427; 77FG; 980427; 1R; 596-1629
02 HURTADO, AVRELIO; 10740 SW 67 T; ;
0202 MIAMI; FL; 33176
03 B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03 CTX, 0000; TAX, 3; ACCT-LIMIT, 200; ALT, D; RISK, H
03 SCORE 100; BUREAU CODE, SO; TEI, N
05 44708; EASY SAVINGS PLAN TF; ;
09 18884708REPM
05 44762; SNYDER GENERAL IN LANGUAGE; ;
05 44086; SPANISH-LANGUAGE PREFERNC; ;
05 43976; LD "ONLY" PIC FEE WAIVER; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> WHO IS? PAGING KEY
PF14=PG FWD PF15=PG BWD PF17=+10 PGS PF18=-10 PGS PF19=LAST PG PF20=PAGE 1

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SL VIEW 06/11/98 12:16:34   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO   I 3533567 1R OF                                  COMP 04 27 98
TELNO  305 596 1629   CKT

09   596-1629; ; O-5483; 980427; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS NA; ID NA; PTN NA
1101 4-27-98/AMA/DMSS/20189546/OD4-20/DD5-5/SSN REFUSED/GTELD
1400 ORDER COMPLETED CTAXA7EZ                  B5MAMA0 04 27 98 12.17 9140 ST
1400 ORDER CREATED CTAXA7EZ                    B5MAMA0 04 27 98 12.15 9140 ST



0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> _____          WHO IS? _________          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE
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SL VIEW 06/11/98 12:58:40   VIEW ORDER - ASOS FORMAT                PAGE   1 +

ORDER NO   I 3758624 1R OF                                  COMP 05 05 98
TELNO  954 784 7851   CKT

     R/C DD:                COEFF :              SUFFIX:
     ITEM #:                WKWITH:              VISIT :
     REMARKS:

01   141; I3758624; 980505; 77XX; 980505; 1R; 784-7851
02   DIEUVEILLE, DERNIDE; 2030 NE 2 AVE; ;
0202 POMPANO BEACH; FL; 33060
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 300; ALT, D; RISK, M
03   SCORE 600; BUREAU CODE, SO; TEI, N
05   43976; LD "ONLY" PIC FEE WAIVER; ;
05   41871; GTELD RES TOTAL CALL; ;
09   18881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   41366; GTELD RES INTERNATIONAL DCP; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> _____   WHO IS? _____   PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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Old Orders

Re-rate

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SL VIEW 06/11/98 12:58:40   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO    I 3758624 1R OF                                  COMP 05 05 98
TELNO  954 784 7851   CKT

09   18881366CESP; PRO1=WC
05   42245; GTLDWEWKFREEINTL; ;
09   18882245FWWI; PRO1=WC
09   784-7851; ; O-5483; 980505; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS [redacted]; ID NA; PTN NA
1101 05/05/98LXW/DMSS/20195094/GTELD OD 04/22 DD 05/07
1400 ORDER COMPLETED CTAXA85U                 T4CLXW1 05 05 98 14.43 9140 ST
1400 TEI CHANGED FROM N TO X                  T4CLXW1 05 05 98 14.43 9140 01
1400 ORDER CREATED CTAXA85U                   T4CLXW1 05 05 98 14.42 9140 ST


0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===>          WHO IS?                    PAGING KEY
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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SL VIEW 06/11/98 11:52:44   VIEW ORDER - ASOS FORMAT              PAGE   1 +

ORDER NO   I 4129957 1R OF                                  COMP 05 20 98
TELNO  305 819 3491   CKT

     R/C DD:                COEFF :              SUFFIX:
     ITEM #:                WKWITH:              VISIT :
     REMARKS:

01   023; I4129957; 980520; 77ER; 980520; 1R; 819-3491
02   BORGES, GILBERTO; 5705 W 13 AVE; ;
0202 HIALEAH; FL; 33016
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 300; ALT, D; RISK, M
03   SCORE 600; BUREAU CODE, SO; TEI, N
05   41871; GTELD RES TOTAL CALL; ;
09   18881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   44086; SPANISH-LANGUAGE PREFERNC; ;
05   42245; GTLDWEWKFREEINTL; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> _____          WHO IS? _______          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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SL VIEW 06/11/98 11:52:44   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO   I 4129957 1R OF                                  COMP 05 20 98
TELNO  305 819 3491   CKT

09   18882245FWWI; PRO1=WC
05   00493; INTERNATIONAL CALL PLAN II; ;
09   18880493ICP2; PRO1=WC
09   819-3491; ; O-5483; 980520; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS [redacted]; ID NA; PTN NA
1101 05/20/98OSV/DMSS/20243372/GTELD OD 05/17 DD 06/02
1400 ORDER COMPLETED CTAXA8E7                    B5MOSV1 05 20 98 11.00 9140 ST
1400 TEI CHANGED FROM N TO X                     B5MOSV1 05 20 98 10.59 9140 01
1400 ORDER CREATED CTAXA8E7                      B5MOSV1 05 20 98 10.59 9140 ST



0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===>            WHO IS?                  PAGING KEY
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
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SL VIEW 06/16/98 07:59:02   VIEW ORDER - ASOS FORMAT                PAGE   1 +

ORDER NO    I 4035721 1R OF                                  COMP 05 15 98
TELNO  561 852 4202   CKT

     R/C DD:                COEFF :              SUFFIX:
     ITEM #:                WKWITH:              VISIT :
     REMARKS:

01   147; I4035721; 980515; 77AN; 980515; 1R; 852-4202
02   FRANCIS, RAUL; 9829 ORANGEPARK TER; ;
0202 BOCA RATON; FL; 33428
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 200; ALT, D; RISK, H
03   SCORE 100; BUREAU CODE, SO; TEI, N
05   41871; GTELD RES TOTAL CALL; ;
09   18881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   42244; GTLDWEWKFREEDOM; ;
09   18882244FWWD; PRO1=WC
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===>              WHO IS?                PAGING KEY
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
```

Customer did not authorize change to GTE long distance $17.01 adj.

Jul 08 12:52 1998 Page 1

```
SL VIEW 07/08/98 10:51:50   VIEW ORDER - ASOS FORMAT              PAGE   1 +

ORDER NO   I 4505939 1R OF                                  COMP 06 05 98
TELNO  305 625 1524   CKT

     R/C DD:                 COEFF :                SUFFIX:
     ITEM #:                 WKWITH:                VISIT :
     REMARKS:

01   023; I4505939; 980605; 77AW; 980605; 1R; 625-1524
02   RAMOS, MIGUEL; 16905 NW 54 CT; ;
0202 MIAMI; FL; 33126
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 300; ALT, D; RISK, M
03   SCORE 600; BUREAU CODE, SO; TEI, N
05   41871; GTELD RES TOTAL CALL; ;
09   18881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   44086; SPANISH-LANGUAGE PREFERNC; ;
05   42245; GTLDWEWKFREEINTL; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> ____          WHO IS? ________          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE
```

Not authorized

4.6801

Jul 08 12:52 1998 Page 1

SL VIEW 07/08/98 10:51:50 VIEW ORDER - ASOS FORMAT PAGE 2

ORDER NO I 4505939 1R OF COMP 06 05 98
TELNO 305 625 1524 CKT

09 18882245FWWI; PRO1=WC
05 00493; INTERNATIONAL CALL PLAN II; ;
09 18880493ICP2; PRO1=WC
09 625-1524; ; O-5483; 980605; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS [redacted]; ID NA; PTN NA
1101 06/05/98TXT/DMSS/20278360/GTELD QD 06/02 DD 06/17
1400 ORDER COMPLETED CTAXA866 T4CTXT2 06 05 98 10.28 9140 ST
1400 TEI CHANGED FROM N TO X T4CTXT2 06 05 98 10.27 9140 01
1400 ORDER CREATED CTAXA866 T4CTXT2 06 05 98 10.27 9140 ST

0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> ____ WHO IS? _____ PAGING KEY ___
PF14=PG FWD PF15=PG BWD PF17=+10 PGS PF18=-10 PGS PF19=LAST PG PF20=PAGE 1

1 of 4

Jul 07 18:21 1998 Page 1

```
SL VIEW 07/07/98 16:20:57   VIEW ORDER - ASOS FORMAT                PAGE   1 +

ORDER NO   I 5252964 1R OF                                          COMP
TELNO  305 573 0524   CKT

     R/C DD:                 COEFF :                 SUFFIX:
     ITEM #:                 WKWITH:                 VISIT :
     REMARKS: DMSS

01   023; I5252964; 980707; 77CW; 980707; 1R; 573-0524
02   BROWNE, SHAWN; 1830 NW 5 PL; ;
0202 MIAMI; FL; 33136
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 200; ALT, D; RISK, H
03   SCORE 100; BUREAU CODE, SO; TEI, N
05   41871; GTELD RES TOTAL CALL; ;
09   18881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   42244; GTLDWEWKFREEDOM; ;
09   18882244FWWD; PRO1=WC
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===>                 WHO IS?                    PAGING KEY
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE :
```

Slammed

23320

did not authorize

Shawn Browne is some person that has this

TNT This is the 2nd time

```
SL VIEW 07/07/98 16:20:57   VIEW ORDER - ASOS FORMAT              PAGE   2

ORDER NO   I 5252964 1R OF                                        COMP
TELNO  305 573 0524   CKT

09   573-0524; ; O-5483; 980707; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS NA; ID NA; PTN NA
1101 07-07-98/PJM/DMSS/GTELD/20343818/OD 6-20 DD 7-7
1400 ORDER COMPLETED CTAXA4H5                  B5MPJM2 07 07 98 07.11 9140 ST
1400 ORDER CREATED CTAXA4H5                    B5MPJM2 07 07 98 07.08 9140 ST



0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> ____          WHO IS? ________          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE
```

3094

Jul 07 18:27 1998 Page 1

```
SL VIEW 07/07/98 16:26:57   VIEW ORDER - ASOS FORMAT                PAGE   1 +

ORDER NO   O 5279071 1R OF                                          RLSE
TELNO  305 573 0524   CKT

     R/C DD:                COEFF :              SUFFIX:
     ITEM #:                WKWITH:              VISIT :
     REMARKS: DEACTIVATE ANI

01   023; O5279071;        ; 01XX; 980707; 1R; 573-0524
02AA BROWNE, SHAWN; 1830 NW 5 PL; ;
0202 MIAMI; FL; 33136
03   DCR, NFN
11CI+EMPL NA; CBR NA
11CJ+SS NA; ID NA; PTN NA
1400 ORDER RLSD, ROUTED 9140LD, SFX          G056402 07 07 98 16.26 6902 ST
1400 ORDER CREATED CNAX8671                  G056402 07 07 98 16.22 6902 ST
1901+THIS TN BELONGS TO LEONORA NICHOLS & SHE HAS ALREADY BEEN
1902+SLAMMED ONCE TO GTELD UNDER THIS TN THAT ACCT WAS CLOSED
1903+& NOW A 2ND ORDER UNDER HER SONS NAME HAS BEEN DONE
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===>              WHO IS?                 PAGING KEY
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE
```

Jul 07 18:27 1998 Page 1

SL VIEW 07/07/98 16:26:57 VIEW ORDER - ASOS FORMAT PAGE 2

ORDER NO O 5279071 1R OF RLSE
TELNO 305 573 0524 CKT

1904+HER SON HAS NOT LIVED AT THIS REQ FOR 9 YEARS & HE DOES NOT
1905+HAVE AUTHORITY TO CHANGE LD IXC ON THE ACCT
1906+CUST VERY UPSET WANTS ACCT CLOSED ASAP ****DOES NOT WANT GTE
1907+ADVISED TO CALL LEC
1908+DEACTIVATE ANI

0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> ____ WHO IS? _____ PAGING KEY ___
PF14=PG FWD PF15=PG BWD PF17=+10 PGS PF18=-10 PGS PF19=LAST PG PF20=PAGE

May 18 08:12 1998 Page 1

```
SL VIEW 05/18/98 06:12:15   VIEW ORDER - ASOS FORMAT                PAGE   1 +

ORDER NO   I 3479189 1R OF                                  COMP 04 24 98
TELNO  954 987 6303   CKT

     R/C DD:                COEFF :              SUFFIX:
     ITEM #:                WKWITH:              VISIT :
     REMARKS:

01   141; I3479189; 980424; 77AM; 980424; 1R; 987-6303
02   WALPOLE, LAVERNA; 211 LAWN ACRES CIR; ;
0202 HOLLYWOOD; FL; 33023
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 200; ALT, D; RISK, H
03   SCORE 100; BUREAU CODE, SO; TEI, N
05   43976; LD "ONLY" PIC FEE WAIVER; ;
05   41871; GTELD RES TOTAL CALL; ;
09   18881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   42244; GTLDWEWKFREEDOM; ;
0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===>            WHO IS?                    PAGING KEY
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
```

This is another Slam –
Plus the TN is not a working TN

May 18 08:12 1998 Page 1

```
SL VIEW 05/18/98 06:12:15   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO   I 3479189 1R OF                                  COMP 04 24 98
TELNO  954 987 6303   CKT

09   18882244FWWD; PRO1=WC
09   987-6303; ; O-5483; 980424; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS [redacted] ID NA; PTN NA
1101 04/24/98TXT/DMSS/20179664/GTELD OD 04/16 DD 05/01
1400 ORDER COMPLETED CTAXA866                  T4CTXT2 04 24 98 11.42 9140 ST
1400 TEI CHANGED FROM N TO X                   T4CTXT2 04 24 98 11.42 9140 01
1400 ORDER CREATED CTAXA866                    T4CTXT2 04 24 98 11.41 9140 ST

0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> ____          WHO IS? _______          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PAGE 1
```

May 14 14:19 1998 Page 1

```
SL VIEW 05/14/98 12:19:28   VIEW ORDER - ASOS FORMAT                PAGE   1

ORDER NO    I 3520297 1R OF                                  COMP 04 27 98
TELNO  954 961 7842   CKT

     R/C DD:                 COEFF :                 SUFFIX:
     ITEM #:                 WKWITH:                 VISIT :
     REMARKS:

01   141; I3520297; 980427; 77XX; 980427; 1R; 961-7842
02   AMBROSE, FRANK; 5805 WASHINGTON ST; ;
0202 HOLLYWOOD; FL; 33023
03   B/C, 10; OCC, 36; OST, TT; SLS, SNY; ECS, R1; BLS, 1
03   CTX, 0000; TAX, 3; ACCT-LIMIT, 300; ALT, D; RISK, M
03   SCORE 600; BUREAU CODE, SO; TEI, N
05   43976; LD "ONLY" PIC FEE WAIVER; ;
05   41871; GTELD RES TOTAL CALL; ;
09   18881871EZ3R; PRO1=WC
05   44762; SNYDER GENERAL IN LANGUAGE; ;
05   42244; GTLDWEWKFREEDOM; ;
00051 - DATA RETRIEVED SUCCESSFULLY
COMMAND ===>            WHO IS?                    PAGING KEY
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PA
```

May 14 14:19 1998 Page 1

```
SL VIEW 05/14/98 12:19:28   VIEW ORDER - ASOS FORMAT                PAGE   2

ORDER NO   I 3520297 1R OF                                  COMP 04 27 98
TELNO  954 961 7842   CKT

09   18882244FWWD; PRO1=WC
09   961-7842; ; O-5483; 980427; L; TC; LP; ;
11CI EMPL NA; CBR NA
11CJ SS[redacted] ID NA; PTN NA
1101 04/27/98JDS/DMSS/20188491/GTELD OD 04/20 DD 05/05
1400 ORDER COMPLETED CTAXARA5                 B5MJDS1 04 27 98 08.22 9140 S
1400 TEI CHANGED FROM N TO X                  B5MJDS1 04 27 98 08.21 9140 0
1400 ORDER CREATED CTAXARA5                   B5MJDS1 04 27 98 08.21 9140 S



0005I - DATA RETRIEVED SUCCESSFULLY
COMMAND ===> ____          WHO IS? _______          PAGING KEY ___
PF14=PG FWD  PF15=PG BWD  PF17=+10 PGS  PF18=-10 PGS  PF19=LAST PG  PF20=PF
```

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Exhibit REP-18
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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-2-98 **Time:** 9:51 (AM) PM (Circle One)

CSR Name: Angelica Vazquez

Sales Channel: SNYDER IF / OOF (Circle One)

Customer Type: (Circle One)
(Consumer – Long Distance Only)
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)

Rudeness	Pricing/Calling Plan Issue	Other Complaint Types:
(Unauthorized Switch)	Rate Discrepancy	
Promotion Discrepancy	Misunderstanding	
Billing Issue	Payment Not Received	
Repair Problems	Provisioning	
Slammed	Cursed Customer	
Deceased Person		

Customer Service Group: (Circle One)

SITEL	(AFNI)
AFNI-TUCSON	BSC
THORNTON	PHONE MARTS
NIAGARA FALLS	REPAIR
ALPHARETTA	Other:

Customer First Name: Karen
Customer Last Name: Borges
Customer Address: 8229 SW 107th Ave Apt C Mia, Fl
City: Miami **State** Fl **Zip** 33173
Customer BTN: (305) 274-1693 **Customer WTN (S):**
Social Security #: [redacted]
If Available, Provide:
Birthdate:
Language: Spanish
Market:
Product:
Pricing Plan(s):

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION (YES) NO

PROBLEM: (Please be very specific and describe thoroughly):
Customer wants to know why she got switched? He doesn't have no bills now, but stated that she won't pay any if we bill her

RESEARCH/RESOLUTION: (What action did you take?):
23341

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Exhibit REP-18
Page 223

CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-2-98 **Time:** 8:30 (AM) PM (Circle One)

CSR Name: Manuel Ferrer

Sales Channel: SNYDER IF / OOF (Circle One)

Customer Type: (Circle One)
- ~~Consumer – Long Distance Only~~
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- (Unauthorized Switch)
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- Slammed
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- ESC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Manuel
Customer Last Name: Ferrer
Customer Address: 30125 SW 152nd Ct
City: Homestead **State** FL **Zip** 33033
Customer BTN: 305 246 8887 **Customer WTN (S):** _____
Social Security #: [redacted]
If Available, Provide:
Birthdate: _____
Language: Spanish
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION (YES) / NO

PROBLEM: (Please be very specific and describe thoroughly):

Customer wants to know why he got a Unauthorized Switch.

RESEARCH/RESOLUTION: (What action did you take?):

23342

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-7-98 **Time:** 9:20 (AM) PM (Circle One)

CSR Name: Angelica Vazquez

Sales Channel: (SNYDER) IF / (OOF) (Circle One)

Customer Type: (Circle One)
- Consumer – Long Distance Only
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- (Unauthorized Switch)
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- Slammed
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Marlon
Customer Last Name: Flores
Customer Address: 401 SW 109th Ave
City: Miami **State** FL **Zip** 33174
Customer BTN: 305 553-4168 **Customer WTN (S):** _____
Social Security #: _____
If Available, Provide:
Birthdate: 11/28/56
Language: Spanish
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION (YES) / NO

PROBLEM: (Please be very specific and describe thoroughly):
Customer would like to know who switched his service.

RESEARCH/RESOLUTION: (What action did you take?):

23343

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11/09/98 **Time:** 5:00 pm **AM (PM)** (Circle One)

CSR Name: Melissa A. Ross

Sales Channel: (SNYDER) **(IF)** OOF (Circle One)

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- (Unauthorized Switch)
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- Slammed
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer
- Other Complaint Ty: _____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- ~~BSC~~
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Robert
Customer Last Name: Blake
Customer Address: 02772 Forest Edge Cir.
City: Orlando **State** FL **Zip** 32828
Customer BTN: 407-384-7969 **Customer WTN (S):** _____
Social Security #: _____
If Available, Provide:
Birthdate: _____
Language: English
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: CUSTOMER REQUESTED CALLBACK (YES / NO) CUSTOMER THREATENING ESCALATION YES

PROBLEM: **(Please be very specific and describe thoroughly):**
Customer was switched to GTE without their permission

RESEARCH/RESOLUTION: (What action did you take?): 23344

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11/09/98 **Time:** 6:47 **AM (PM) (Circle One)**

CSR Name: Shelia Cramer

Sales Channel: SNYDER (IF) OOF (Circle One)

Customer Type: (Circle One)
(Consumer – Long Distance Only)
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)
~~Rudeness~~
(Unauthorized Switch)
Promotion Discrepancy
Billing Issue
Repair Problems
Slammed
Deceased Person
Pricing/Calling Plan Issue
Rate Discrepancy
Misunderstanding
Payment Not Received
Provisioning
Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
SITEL
AFNI-TUCSON
THORNTON
NIAGARA FALLS
ALPHARETTA
(~~AFNI~~)
BSC
PHONE MARTS
REPAIR
Other: _____

Customer First Name: Danny
Customer Last Name: Taylor
Customer Address: 3504 County Rd. 675
City: Bradenton **State** FL **Zip** 34202-9469
Customer BTN: 941-322-0216 **Customer WTN (S):** _____
Social Security #: _____
If Available, Provide:
Birthdate: N/A
Language: English
Market: N/A
Product: N/A
Pricing Plan(s): N/A

Please Circle: CUSTOMER REQUESTED CALLBACK YES / NO CUSTOMER THREATENING ESCALATION YES / NO

PROBLEM: (Please be very specific and describe thoroughly):
1. was solicited by Phone. she said she doesn't
& opt so just send the information in the mail;
her service was then switched.

RESEARCH/RESOLUTION: (What action did you take?):
PIC = Deactive.
AFNI = Active

23345

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-11-98 **Time:** 9:01 **AM PM (Circle One)**

CSR Name: Bayia VanCleave

Sales Channel: SNYDER **IF / (OOF) (Circle One)**

Customer Type: (Circle One)
(Consumer –Long Distance Only)
~~Small Business-Long Distance Only~~
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)
Rudeness
(Unauthorized Switch)
~~Promotion Discrepancy~~
Billing Issue
Repair Problems
Slammed
Deceased Person
Pricing/Calling Plan Issue
Rate Discrepancy
Misunderstanding
Payment Not Received
Provisioning
Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
SITEL
AFNI-TUCSON
THORNTON
NIAGARA FALLS
ALPHARETTA
(AFNI)
BSC
PHONE MARTS
REPAIR
Other: _____

Customer First Name: Maria Nieves
Customer Last Name: 5228 NW 186th Ln
Customer Address: _____
City: Miami **State** FL **Zip** 33055
Customer BTN: 305 625 8078 **Customer WTN (S):** —
Social Security #: _____
If Available, Provide:
Birthdate: _____
Language: Spanish
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) NO CUSTOMER THREATENING ESCALATION (YES) NO

PROBLEM: (Please be very specific and describe thoroughly):

cx wants to know why he was switched

RESEARCH/RESOLUTION: (What action did you take?):

23346

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-11-98 **Time:** 9:26 (AM) PM (Circle One)

CSR Name: Boyd

Sales Channel: SNYDER IF / (OOF) (Circle One)

Customer Type: (Circle One)
- Consumer – Long Distance Only
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- Unauthorized Switch
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- Slammed
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- AFNI
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Gary
Customer Last Name: Bendt
Customer Address: 11465 88 Rd
City: W Palm Beach **State** FL **Zip** 33412
Customer BTN: 561 626 0108 **Customer WTN (S):** _____
Social Security #: /
If Available, Provide:
Birthdate: /
Language: English
Market: _____
Product: /
Pricing Plan(s): /

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) NO CUSTOMER THREATENING ESCALATION (YES) NO

PROBLEM: (Please be very specific and describe thoroughly):

I was taken away by us & want to know how

RESEARCH/RESOLUTION: (What action did you take?):

23347

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Exhibit REP-18
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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: Nov-11-98 **Time:** 5:33 **AM** (PM) **(Circle One)**

CSR Name: Jorge Rojas.

Sales Channel: (SNYDER) **IF / (OOF) (Circle One)**

Customer Type: (Circle One)
- Consumer –(Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- (Unauthorized Switch)
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- Slammed
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Victor
Customer Last Name: Moussa.
Customer Address: 15570 SW 76 LN.
City: Miami **State** FL. **Zip** 33157.
Customer BTN: 305 388 6932 **Customer WTN (S):** _____
Social Security #: [redacted]
If Available, Provide:
Birthdate: _____
Language: _____
Market: _____
Product: _____
Pricing Plan(s): _____

23348

Please Circle: CUSTOMER REQUESTED CALLBACK YES / NO CUSTOMER THREATENING ESCALATION YES / NO

PROBLEM: **(Please be very specific and describe thoroughly):**

C' call because never req. GTELD but we had a order from 08-26-98 and C order in 11-09-98, he had a bill for 147.89 and he dont wanst to pay the bill and he wanst the contract or some paper with his signature.

RESEARCH/RESOLUTION: (What action did you take?):

so I explain the plans and promo but he follow he never req serv. with GTE and I eat to create the bill but he dont wanst he wanst to no how he had GTE.

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: Nov 11,1998 **Time:** 2:25 **AM (PM) (Circle One)**

CSR Name: Angelica Vazquez

Sales Channel: SNYDER **IF (OOF) (Circle One)**

Customer Type: (Circle One)
(Consumer – Long Distance Only)
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)
Rudeness
~~Unauthorized Switch~~
Promotion Discrepancy
Billing Issue
Repair Problems
Slammed
Deceased Person
Pricing/Calling Plan Issue
Rate Discrepancy
Misunderstanding
Payment Not Received
Provisioning
Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
SITEL
AFNI-TUCSON
THORNTON
NIAGARA FALLS
ALPHARETTA
(AFNI)
BSC
PHONE MARTS
REPAIR
Other: _____

Customer First Name: Felipe
Customer Last Name: Rodriguez
Customer Address: 29 Santander
City: Miami **State** FL **Zip** 33126
Customer BTN: 305 448 0920 **Customer WTN (S):** _____
Social Security #: [redacted]
If Available, Provide:
Birthdate: _____
Language: English
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION YES (NO)

PROBLEM: (Please be very specific and describe thoroughly):

Customer was very mad he received a bill. He has a restriction wasn't completely sustained but he wants to know how he got the bill.

RESEARCH/RESOLUTION: (What action did you take?):

23349

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-11-98 **Time:** 4:41 **AM (PM)** (Circle One)

CSR Name: Norma A. Smith

Sales Channel: SNYDER **IF / OOF (Circle One)**

Customer Type: (Circle One)
(Consumer – Long Distance Only)
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)
Rudeness
(Unauthorized Switch)
Promotion Discrepancy
Billing Issue
Repair Problems
Slammed
Deceased Person
Pricing/Calling Plan Issue
Rate Discrepancy
Misunderstanding
Payment Not Received
Provisioning
Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
SITEL
AFNI-TUCSON
THORNTON
NIAGARA FALLS
ALPHARETTA
(AFNI)
BSC
PHONE MARTS
REPAIR
Other: _____

Customer First Name: Clara Chavarria
Customer Last Name: "
Customer Address: 966 Blarrit Dr
City: Miami State Beach FL Zip 33141
Customer BTN: (305) 864-7429 **Customer WTN (S):** _____
Social Security #: N/A
If Available, Provide:
Birthdate: N/A
Language: Spanish
Market: N/A
Product: N/A
Pricing Plan(s): N/A

Please Circle: CUSTOMER REQUESTED CALLBACK YES / NO CUSTOMER THREATENING ESCALATION YES / NO

PROBLEM: (Please be very specific and describe thoroughly):

Is was swith to GTE "out Auth, she wans to know who swith acc ID

RESEARCH/RESOLUTION: (What action did you take?):

23350

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-5-98 **Time:** 9:40 (AM) PM (Circle One)

CSR Name: Angelica Vazquez

Sales Channel: (SNYDER) IF / OOF (Circle One)

Customer Type: (Circle One)
- Consumer –(Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- (Unauthorized Switch)
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- Slammed
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Carmen
Customer Last Name: Junco
Customer Address: 3300 SW 57th Ave
City: Miami **State** FL **Zip** 33155
Customer BTN: FAX (305) 662-8589 **Customer WTN (S):** (305) 661 0806
Social Security #:
If Available, Provide:
Birthdate: 3/18/56
Language: Spanish
Market:
Product:
Pricing Plan(s):

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) NO CUSTOMER THREATENING ESCALATION YES (NO)

PROBLEM: **(Please be very specific and describe thoroughly):**

Wants to know how the switched was made w/out my authorization. She will not pay/Bill. The number is a fax. til she receives an answer of why this happen

RESEARCH/RESOLUTION: (What action did you take?):

23351

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-6-98 **Time:** 5:35 **AM** (PM) **(Circle One)**

CSR Name: Michelle Tomlinson

Sales Channel: SNYDER IF (OOF) (Circle One)

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- (Unauthorized Switch)
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- Slammed
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types
_____
_____
_____
_____
_____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Sidney ~~Kane~~
Customer Last Name: Kane
Customer Address: 20225 NE 34 Ave
City: MIAMI **State** FL **Zip** 33180
Customer BTN: 305-466-9633 **Customer WTN (S):** _____
Social Security #: _____
If Available, Provide:
Birthdate: _____
Language: _____
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: CUSTOMER REQUESTED CALLBACK YES / NO CUSTOMER THREATENING ESCALATION (YES) NO

PROBLEM: (Please be very specific and describe thoroughly):

Cx very upset that he was switched w/out his consent

RESEARCH/RESOLUTION: (What action did you take?):

23352

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11/06/98 **Time:** 1:01 **AM (PM)** (Circle One)

CSR Name: Andrea

Sales Channel: SNYDER **IF / (OOF)** (Circle One)

Customer Type: (Circle One)
(Consumer) Long Distance Only
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)
Rudeness
(Unauthorized Switch)
Promotion Discrepancy
Billing Issue
Repair Problems
Slammed
Deceased Person
Pricing/Calling Plan Issue
Rate Discrepancy
Misunderstanding
Payment Not Received
Provisioning
Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
SITEL
AFNI-TUCSON
THORNTON
NIAGARA FALLS
ALPHARETTA
(AFNI)
BSC
PHONE MARTS
REPAIR
Other: _____

Customer First Name: Patrick ~~Barrett~~
Customer Last Name: Barrett
Customer Address: 2023 Grasmere
City: Apopka **State** Florida **Zip** 32703
Customer BTN: 407-880-2576 **Customer WTN (S):** 407-880-4917
Social Security #:
If Available, Provide:
Birthdate:
Language:
Market:
Product:
Pricing Plan(s):

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) NO CUSTOMER THREATENING ESCALATION YES / NO

PROBLEM: **(Please be very specific and describe thoroughly):**

Cx shares home with roommates. No one remembers authorizing switch. Would like to know who switched service or who was contacted.

RESEARCH/RESOLUTION: (What action did you take?):

23353

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11/04/98 **Time:** 3:20 **AM** (PM) (Circle One)

CSR Name: Jami

Sales Channel: (SNYDER) **IF / OOF (Circle One)**

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- (Unauthorized Switch)
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- Slammed
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Narbal
Customer Last Name: Lesage
Customer Address: 7606 Kismet St
City: Miramar **State** Florida **Zip** 33023
Customer BTN: 954-987-4149 **Customer WTN (S):** _____
Social Security #: [redacted]
If Available, Provide:
Birthdate: _____
Language: _____
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION (YES) / NO

PROBLEM: (Please be very specific and describe thoroughly):
C: switched w/out authorization. Says he will not pay. Wants proof that he okayed switch. Threatening to sue.

RESEARCH/RESOLUTION: (What action did you take?):

23354

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-16-98 **Time:** 12:51 **AM (PM)** (Circle One)

CSR Name: Shay Hensley

Sales Channel: SNYDER IF / (OOE) (Circle One)

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- (Unauthorized Switch)
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- Slammed
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: JUDD
Customer Last Name: GREEN
Customer Address: 1174 Stillwood Ct.
City: PORT ORANGE **State** FLORIDA **Zip** 32119
Customer BTN: 904-756-8846 **Customer WTN (S):** SAME
Social Security #: [redacted]
If Available, Provide:
Birthdate:
Language: ENGLISH
Market:
Product:
Pricing Plan(s):

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION YES (NO)

PROBLEM: (Please be very specific and describe thoroughly):
Cust is continually being switched between long distance providers

RESEARCH/RESOLUTION: (What action did you take?):

23355

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FORM-SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4944

Today's Date: 11/16/98 **Time:** 3:33 **AM (PM) (Circle One)**

CSR Name: Shay Hensley

Sales Channel: SNYDER IF/(OE) (Circle One)

Customer Type: (Circle One)
(Consumer – Long Distance Only)
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)
Rudeness
(Unauthorized Switch)
Promotion Discrepancy
Billing Issue
Repair Problems
Slammed
Deceased Person
Pricing/Calling Plan Issue
Rate Discrepancy
Misunderstanding
Payment Not Received
Provisioning
Cursed Customer

Other Complaint Types
_____
_____
_____
_____
_____

Customer Service Group: (Circle One)
SITEL
WENTZVILLE
THORNTON
NIAGARA FALLS
ALPHARETTA
(AFNI)
BSC
PHONE MARTS
REPAIR
Other: _____

Customer First Name: DENISE
Customer Last Name: MATHURIN
Customer Address: 1126 N.W. 1st Ave Apt. A
City: FORT LAUDERDALE **State** FLORIDA **Zip** 33311
Customer BTN: 954-525-9720 **Customer WTN (S):** SAME
Social Security #: [redacted]
Birthdate: NA
Language: ENGLISH
Market:
Product:
Pricing Plan(s):

Please Circle: (ESCALATION-YES) ESCALATION-NO CALLBACK NEEDED-(YES) CALLBACK NEEDED-NO

PROBLEM: (Please be very specific and describe thoroughly):
Cust wants to know who authorized switch

RESEARCH/RESOLUTION: (What action did you take?):

23356

CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11/13 **Time:** _____ **AM PM (Circle One)**

CSR Name: Shatayea Williams

Sales Channel: SNYDER **IF / OOF (Circle One)**

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)

Rudeness	(Unauthorized Switch)	Pricing/Calling Plan Issue	Other Complaint Type:
Promotion Discrepancy		Rate Discrepancy	_____
Billing Issue		Misunderstanding	_____
Repair Problems		Payment Not Received	_____
Slammed		Provisioning	_____
Deceased Person		Cursed Customer	_____

Customer Service Group: (Circle One)

SITEL	AFNI
AFNI-TUCSON	BSC
THORNTON	PHONE MARTS
NIAGARA FALLS	REPAIR
ALPHARETTA	Other: _____

Customer First Name: Ahmed
Customer Last Name: Marple
Customer Address: 9379 N.W 23rd St
City: Pembroke Lake **State** Florida **Zip** 33024
Customer BTN: _____ **Customer WTN (S):** _____
Social Security #: _____
If Available, Provide:
Birthdate: _____
Language: _____
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION (YES) / NO

PROBLEM: (Please be very specific and describe thoroughly):
cx was switched w/out permission

RESEARCH/RESOLUTION: (What action did you take?):
Apologized and issued Order

23357

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: Nov. 16, 1998 **Time:** 8:30 (AM) PM (Circle One)

CSR Name: TODD MONAE/

Sales Channel: SNYDER IF (OOF) (Circle One)

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- (Unauthorized Switch)
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- Slammed
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer
- Other Complaint Type

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- BSC
- PHONE MARTS
- REPAIR
- Other:

Customer First Name: FRANCIS
Customer Last Name: BLAKE
Customer Address: 834 MC DONALD RD.
City: PORT ORANGE **State** FL **Zip** 32119
Customer BTN: 904 756 4783 **Customer WTN (S):** SAME
Social Security #:
If Available, Provide:
Birthdate:
Language: ENGLISH
Market:
Product:
Pricing Plan(s):

23358

Please Circle: CUSTOMER REQUESTED CALLBACK (YES)/ NO CUSTOMER THREATENING ESCALATION (YES)/

PROBLEM: **(Please be very specific and describe thoroughly):**

Cust said he spoke to no one (telemarketer, other); was out-of-town + son return found GTE LD mail thanking him for SWITCHING. Cust's Local Bel South rec'd. electronic message to switch him. Cust swore FOR CERTAIN HE WOULD SPEAK TO LAWYER FOR WHATEVER LEGAL JUSTIFICATION → PUBLIC SLANDER TO GT

RESEARCH/RESOLUTION: (What action did you take?): A. HOW DID GTELD GET HIS NAME + # B. EXAC
I FILLED OUT THIS FORM, SUBMITTED IT DATE OF
+ TRIED TO GET # THRU TO SNYDER # 800-483-8384 SWITCH

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-15-98 **Time:** 12:50 **AM (PM)** (Circle One)

CSR Name: [redacted] Veronica Luna

Sales Channel: SNYDER **IF / (OOF)** (Circle One)

Customer Type: (Circle One)
(Consumer – Long Distance Only)
Small Business-Long Distance Only
Consumer – Bundles
Small Business-Bundles

Complaint Type: (Circle One)

Rudeness	Pricing/Calling Plan Issue	Other Complaint Types:
(Unauthorized Switch)	Rate Discrepancy	
Promotion Discrepancy	Misunderstanding	
Billing Issue	Payment Not Received	
Repair Problems	Provisioning	
Slammed	Cursed Customer	
Deceased Person		

Customer Service Group: (Circle One)

SITEL	(AFNI)
AFNI-TUCSON	BSC
THORNTON	PHONE MARTS
NIAGARA FALLS	REPAIR
ALPHARETTA	Other: _____

Customer First Name: Yamile [redacted]
Customer Last Name: Ferrer
Customer Address: 1340 W 41st Apt. 204
City: HLH **State** FL **Zip** _____
Customer BTN: 305 362-9073 **Customer WTN (S):** _____
Social Security #: _____
If Available, Provide:
Birthdate: _____
Language: Spanish
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) NO CUSTOMER THREATENING ESCALATION YES (NO)

PROBLEM: (Please be very specific and describe thoroughly):
Customer very upset, because she never authorized the switch. says she is with ACI. very upset, but polite.

RESEARCH/RESOLUTION: (What action did you take?):

23359

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FORM-SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4944

Today's Date: 11/16/98 **Time:** 5:51 **AM (PM)** (Circle One)

CSR Name: Shay Hensley

Sales Channel: SNYDER IF/(OE) (Circle One)

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- (Unauthorized Switch)
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- Slammed
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Type

Customer Service Group: (Circle One)
- SITEL
- WENTZVILLE
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AENL)
- BSC
- PHONE MARTS
- REPAIR
- Other:

Customer First Name: TIMMIE
Customer Last Name: LEE
Customer Address: 7832 FRED GRIFFIS RD.
City: ORLANDO **State** FLORIDA **Zip** 32831
Customer BTN: 407-381-2171 **Customer WTN (S):** SAME
Social Security #: NA
Birthdate: NA
Language: ENGLISH
Market: NA
Product:
Pricing Plan(s):

Please Circle: ESCALATION-YES ESCALATION-NO CALLBACK NEEDED-(YES) CALLBACK NEEDED-NO

PROBLEM: (Please be very specific and describe thoroughly):
Cust wants to know who switched, or authorized switch
A.S.A.P.

23360

RESEARCH/RESOLUTION: (What action did you take?):
Placed cancellation order and noted account.

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-25-98 **Time:** 9:11 (AM) PM (Circle One)

CSR Name: Tim F

Sales Channel: (SNYDER) IF / (OOF) (Circle One)

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- (Unauthorized Switch)
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- Slammed
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: DAVID OR CINDA
Customer Last Name: GRAF
Customer Address: 11411 SW 109 RD.
City: MIAMI **State** FL. **Zip** 33176
Customer BTN: 305-596-5450 **Customer WTN (S):** _____
Social Security #: _____
If Available, Provide:
Birthdate: _____
Language: _____
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: CUSTOMER REQUESTED CALLBACK YES / NO CUSTOMER THREATENING ESCALATION YES / NO

PROBLEM: (Please be very specific and describe thoroughly):

CUSTOMER WOULD LIKE TO KNOW HOW THEY CAME OVER TO GTE L.D. SERVICE.

RESEARCH/RESOLUTION: (What action did you take?):

23361

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-17-98 **Time:** 8:45 (AM) PM (Circle One)

CSR Name: Veronica Riggs

Sales Channel: (SNYDER) IF (OOF) (Circle One)

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- Unauthorized Switch
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- (Slammed)
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Brenda
Customer Last Name: Kale.
Customer Address: 2940 NW 175 St
City: Carol City **State** FL **Zip** 33056
Customer BTN: 305 624 5628 **Customer WTN (S):** 3056245628
Social Security #: N-A
If Available, Provide:
Birthdate:
Language:
Market:
Product:
Pricing Plan(s):

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION (YES) / NO

PROBLEM: (Please be very specific and describe thoroughly):
Cu switched W/Out permission would like know authorizing party

RESEARCH/RESOLUTION: (What action did you take?):
Deactivated service.

23362

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11/17/98 **Time:** 1:49 **AM** (PM) **(Circle One)**

CSR Name: Reni' Garcia

Sales Channel: SNYDER IF / OOF (Circle One)

Customer Type: (Circle One)
- Consumer – Long Distance Only
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- Unauthorized Switch
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- Slammed
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- AFNI
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Reni'
Customer Last Name: Garcia
Customer Address: 10276 Brewsway Place, Boca Raton FL. 33428
City: Boca Raton **State** Florida **Zip** 33428
Customer BTN: 561 **Customer WTN (S):** 862-2391
Social Security #: [redacted]
If Available, Provide:
Birthdate:
Language:
Market:
Product:
Pricing Plan(s):

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) NO **CUSTOMER THREATENING ESCALATION YES / NO**

PROBLEM: (Please be very specific and describe thoroughly):

How are you able to make an attempt on my phone line w/o my authorization -

RESEARCH/RESOLUTION: (What action did you take?):

23363

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-17 **Time:** 12:20 **AM** (PM) **(Circle One)**

CSR Name: K Wood

Sales Channel: SNYDER (IF) / OOF (Circle One)

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- ~~Rudeness~~
- (Unauthorized Switch)
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- (Slammed)
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer
- Other Complaint Type

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Donald ~~tuttle~~
Customer Last Name: Wallace
Customer Address: 14239 Puffin Ct
City: Clearwater **State** FL **Zip** 33762
Customer BTN: 727-573-8592 **Customer WTN (S):** _____
Social Security #: _____
If Available, Provide:
Birthdate: _____
Language: _____
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: CUSTOMER REQUESTED CALLBACK YES / (NO) CUSTOMER THREATENING ESCALATION YES / N

PROBLEM: (Please be very specific and describe thoroughly):
didn't give permission to switch – could not find in CMB so don't know who signed up

RESEARCH/RESOLUTION: (What action did you take?):

23365

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-24-98 **Time:** 3:35 **AM (PM)** (Circle One)

CSR Name: Karen Barnhill **Badge #:**

Customer Name: Miriam Feldman **BTN:** 305 935-6011

Address: 19667 NE 36 CT **Apt.#:**

City: Miami Shores Aventura **ST:** FL **ZIP:** 33180 **INF? (OOF?)** (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

~~they~~ GTE attempted to slam him. Wife is dead has been dead 5 years feels what was is morally and ethically wrong. Accountis in wife's name "She couldn't have come up from the grave to authorize this" he is very hurt by this.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

FORM SNYDER CUSTOMER

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4944

Today's Date: 8-17-99 Time: 11:50 (AM) PM (Circle One)

CSR Name: Kristina Alexander

Sales Channel: ~~SNYDER~~ Unknown IF/OOF (Circle One)

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- ~~Small Business-Long Distance Only~~
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- (Unauthorized Switch/Slammed)
- ~~Pricing/Calling Plan Issue~~
- Promotion Discrepancy
- Rate Discrepancy
- Order Dispute

Cursed Customer
Billing Issue
Provisioning
Deceased Person
Miscellaneous

Other Complaint Type: _____

Customer Service Group: (Circle One)
- (SITEL)
- WENTZVILLE
- THORNTON
- NIAGARA FALLS
- ALPHARETTA

AFNI
BSC
PHONE MARTS
REPAIR
Other: _____

Customer First Name: Todd
Customer Last Name: Williams
Customer Address: 3918 Wisconsin Ave
City: Tampa State FL Zip 33616
Customer BTN: 813 831 4658 Customer WTN (S): _____
Social Security #: _____
Birthdate: _____
Language: _____
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: ESCALATION-YES ESCALATION-NO CALLBACK NEEDED-YES CALLBACK NEEDED-N

PROBLEM: (Please be very specific and describe thoroughly):

Cust switched to GTE w/o permission - Want to know why & who did it

23367

RESEARCH/RESOLUTION: (What action did you take?):

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 8-17-99 TIME 11:50 AM ✓ PM _____

CSR NAME Kristina Alexander BADGE # 87376

CUSTOMER NAME Todd Williams BTN # 813-831-4658

ADDRESS 3913 Wisconsin Av APT # _____

CITY Tampa STATE FL ZIP CODE 33616

IS RESPONSE NEEDED? (YES) / NO PROJECT? GTE LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

CBR# - 813-350-2603
Aug 6th he was switched to GTE without his permission. He wants to know who did it and why?

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Transfer back to local to get him back on AT&T.

1998-99 ¢
Special Project - Res. — RETURN CALL TO CUSTOMER

COMMENTS

CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 12/18/98 Time: 2:50 AM (PM) (Circle One)

CSR Name: Nella

Sales Channel: (SNYDER) IF / (OOF) (Circle One)

Customer Type: (Circle One)
- Consumer – (Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- Unauthorized Switch
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- Slammed
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: unauthorized order for GTELD

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Robert
Customer Last Name: Deland
Customer Address: 8400 SW 55 CT
City: Davie State FL Zip 33326
Customer BTN: 954-434-0055 Customer WTN (S): 954-434-0055
Social Security #:
If Available, Provide:
Birthdate:
Language: English
Market:
Product:
Pricing Plan(s):

23369

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) NO CUSTOMER THREATENING ESCALATION YES (NO)

PROBLEM: (Please be very specific and describe thoroughly):
Cust rec a welcome letter from GTELD - he did not authorize order. He wants to know how the order was placed.

RESEARCH/RESOLUTION: (What action did you take?):
filed complaint form for investigation. Cust is R/A in QMF. Had 'o' order placed (order tracker). Cancel issued credit

DEC.29.1998 2:19PM AFNI OUTSOURCING NO.661 P.5

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11/02/98 **Time:** 7:58 **AM (PM)** (Circle One)

CSR Name: Shelia Cramer

Sales Channel: SNYDER IF / (OOF) (Circle One)

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- ~~Small Business-Long Distance Only~~
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- ~~Rudeness~~
- (Unauthorized Switch)
- ~~Promotion Discrepancy~~
- Billing Issue
- Repair Problems
- Slammed
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- ~~BSC~~
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Samuel ~~Simon~~
Customer Last Name: Simon
Customer Address: 2910 NW. 12th ST.
City: DelRay Bch **State** FL **Zip** 33445
Customer BTN: 561-276-3694 **Customer WTN (S):** _____
Social Security #: N/a
If Available, Provide:
Birthdate: N/a
Language: English
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION YES / NO

PROBLEM: (Please be very specific and describe thoroughly)

C/I switched to ATELD w/o Auth. Req. REimbursement
C $100.00 fine hisp anguish + time.

RESEARCH/RESOLUTION: (What action did you take?):

PIC = P
PTNI = A

23370

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-2-98 **Time:** 9:51 (AM) PM (Circle One)

CSR Name: Angelica Vazquez

Sales Channel: SNYDER IF / OOF (Circle One)

Customer Type: (Circle One)
(Consumer – Long Distance Only)
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)
Rudeness
(Unauthorized Switch)
Promotion Discrepancy
Billing Issue
Repair Problems
Slammed
Deceased Person
Pricing/Calling Plan Issue
Rate Discrepancy
Misunderstanding
Payment Not Received
Provisioning
Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
SITEL
AFNI-TUCSON
THORNTON
NIAGARA FALLS
ALPHARETTA
(AFNI)
BSC
PHONE MARTS
REPAIR
Other: _____

Customer First Name: Karen
Customer Last Name: Borges
Customer Address: 8229 SW 107th Ave Apt C Mia, Fl
City: Miami **State** Fl **Zip** 33173
Customer BTN: (305)274-1693 **Customer WTN (S):** _____
Social Security #: [redacted]
If Available, Provide:
Birthdate: _____
Language: Spanish
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) NO CUSTOMER THREATENING ESCALATION (YES) NO

PROBLEM: (Please be very specific and describe thoroughly):
At times Wants to know why she got switched? he doesn't have no bills now but stated that she won't pay any if we bill her

RESEARCH/RESOLUTION: (What action did you take?): 23371

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-2-98 **Time:** 8:30 (AM) PM (Circle One)

CSR Name: Manuel Ferrer

Sales Channel: SNYDER IF / OOF (Circle One)

Customer Type: (Circle One)
~~Consumer – Long Distance Only~~
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)
Rudeness
(Unauthorized Switch)
Promotion Discrepancy
Billing Issue
Repair Problems
Slammed
Deceased Person
Pricing/Calling Plan Issue
Rate Discrepancy
Misunderstanding
Payment Not Received
Provisioning
Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
SITEL
AFNI-TUCSON
THORNTON
NIAGARA FALLS
ALPHARETTA
(AFNI)
BSC
PHONE MARTS
REPAIR
Other: _____

Customer First Name: Manuel
Customer Last Name: Ferrer
Customer Address: 30125 SW 152nd Ct
City: Homestead **State** FL **Zip** 33033
Customer BTN: 305 246 8887 **Customer WTN (S):** _____
Social Security #: [redacted]
If Available, Provide:
Birthdate: _____
Language: Spanish
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION (YES) / NO

PROBLEM: (Please be very specific and describe thoroughly):

Customer wants to know why he got a Unauthorized Switch.

RESEARCH/RESOLUTION: (What action did you take?):

23372

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-7-98 **Time:** 9:20 (AM) PM (Circle One)

CSR Name: Angelica Vazquez

Sales Channel: (SNYDER) IF / (OOF) (Circle One)

Customer Type: (Circle One)
- Consumer – Long Distance Only
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)

Rudeness	Pricing/Calling Plan Issue	Other Complaint Types:
(Unauthorized Switch)	Rate Discrepancy	
Promotion Discrepancy	Misunderstanding	
Billing Issue	Payment Not Received	
Repair Problems	Provisioning	
Slammed	Cursed Customer	
Deceased Person		

Customer Service Group: (Circle One)

SITEL	(AFNI)
AFNI-TUCSON	BSC
THORNTON	PHONE MARTS
NIAGARA FALLS	REPAIR
ALPHARETTA	Other:

Customer First Name: Marlon
Customer Last Name: Flores
Customer Address: 401 SW 109th Ave
City: Miami **State** FL **Zip** 33174
Customer BTN: 305 553-4168 **Customer WTN (S):**
Social Security #:
If Available, Provide:
Birthdate: 11/28/56
Language: Spanish
Market:
Product:
Pricing Plan(s):

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION (YES) / NO

PROBLEM: (Please be very specific and describe thoroughly):
Customer would like to know who switched his service.

RESEARCH/RESOLUTION: (What action did you take?):

23373

CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11/09/98 **Time:** 5:00 pm **AM** (PM) (Circle One)

CSR Name: Molissa A. Ross

Sales Channel: (SNYDER) (IF) / OOF (Circle One)

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- (Unauthorized Switch)
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- Slammed
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Ty

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- ~~BSC~~
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Robert
Customer Last Name: Blake
Customer Address: 02772 Forest Edge Cir.
City: Orlando **State** FL **Zip** 32828
Customer BTN: 407-384-7969 **Customer WTN (S):** _____
Social Security #: _____
If Available, Provide:
Birthdate: _____
Language: English
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION YES

PROBLEM: (Please be very specific and describe thoroughly):
Customer was switched to GTE without their permission

RESEARCH/RESOLUTION: (What action did you take?):

23374

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11/09/98 **Time:** 6:47 **AM (PM)** (Circle One)

CSR Name: Shelia Cramer

Sales Channel: SNYDER **(IF)** / OOF (Circle One)

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- ~~Rudeness~~
- (Unauthorized Switch)
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- Slammed
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (~~AFNI~~)
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Danny
Customer Last Name: Taylor
Customer Address: 3504 County Rd. 675
City: Bradenton **State** FL **Zip** 34202-9469.
Customer BTN: 941-322-0216. **Customer WTN (S):** _____
Social Security #: _____
If Available, Provide:
Birthdate: N/a
Language: English
Market: N/a
Product: N/a
Pricing Plan(s): N/a

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION YES / NO

PROBLEM: (Please be very specific and describe thoroughly):

C. was solicited by Phone. she said she doesn't not solicit. Send the information in the mail; her service was then switched.

RESEARCH/RESOLUTION: (What action did you take?):

PIC = Deactive.
AMU = Active

23375

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-11-98 **Time:** 9:01 **AM PM (Circle One)**

CSR Name: Bajia VanCleave

Sales Channel: SNYDER **IF / OOF (Circle One)**

Customer Type: (Circle One)
- Consumer –Long Distance Only
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- Unauthorized Switch
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- Slammed
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- AFNI
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Mayra Nunez
Customer Last Name: 5228 NW 186th Ter
Customer Address:
City: Miami **State** FL **Zip** 33055
Customer BTN: 305 625 8078 **Customer WTN (S):** —
Social Security #:
If Available, Provide:
Birthdate:
Language: Spanish
Market:
Product:
Pricing Plan(s):

Please Circle: CUSTOMER REQUESTED CALLBACK YES / NO CUSTOMER THREATENING ESCALATION YES / NO

PROBLEM: (Please be very specific and describe thoroughly):

Customer wants to know how the was switched

RESEARCH/RESOLUTION: (What action did you take?):

23376

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-11-98 **Time:** 9:26 (AM) PM (Circle One)

CSR Name: Boyiadi

Sales Channel: SNYDER IF / (OOF) (Circle One)

Customer Type: (Circle One)
- Consumer – Long Distance Only
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- Unauthorized Switch
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- Slammed
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- AFNI
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Gary
Customer Last Name: Benoit
Customer Address: 11465 88 Rd
City: W Palm Beach **State** FL **Zip** 33412
Customer BTN: 561 6226 0108 **Customer WTN (S):** _____
Social Security #: /
If Available, Provide:
Birthdate: /
Language: English
Market: _____
Product: /
Pricing Plan(s): /

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION (YES) / NO

PROBLEM: (Please be very specific and describe thoroughly):

I was taken advantage by we want to know how

RESEARCH/RESOLUTION: (What action did you take?):

23377

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: Nov-11-98 **Time:** 5:33 **AM** (PM) (Circle One)

CSR Name: Jorge Rojas.

Sales Channel: (SNYDER) **IF / (OOF)** (Circle One)

Customer Type: (Circle One)
- Consumer –(Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- (Unauthorized Switch)
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- Slammed
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

ustomer First Name: Victor
ustomer Last Name: Moussa.
ustomer Address: 15570 SW 76 LN.
lty: Miami **State** FL. **Zip** 33157.
ustomer BTN: 305 388 6932 **Customer WTN (S):**
cial Security #: [redacted]
Available, Provide:
rthdate:
nguage:
arket:
oduct:
lcing Plan(s):

23378

ase Circle: CUSTOMER REQUESTED CALLBACK YES / NO CUSTOMER THREATENING ESCALATION YES / NO

OBLEM: (Please be very specific and describe thoroughly):

call because never req. GTELD but we had a order from 08-26-98 su c order in 11-03-98, he had a bill for 147.89 and he dont wanst 2 pay the bill and he wanst the contract or some paper with his signature

SEARCH/RESOLUTION: (What action did you take?):

2 I explain the plans and promo but he follow he never req serv. with GTE nd treat to recate the bill but he dont wanst he wanst to no how he had GTE.

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: Nov 11, 1998 **Time:** 2:25 **AM (PM)** (Circle One)

CSR Name: Angelica Vazquez

Sales Channel: SNYDER IF / (OOF) (Circle One)

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- ~~Unauthorized Switch~~
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- Slammed
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Felipe
Customer Last Name: Rodriguez
Customer Address: 29 Santander
City: Miami **State** FL **Zip** 33126
Customer BTN: 305 448-9920 **Customer WTN (S):** _____
Social Security #: [redacted]
If Available, Provide:
Birthdate: _____
Language: English
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION YES / (NO)

PROBLEM: (Please be very specific and describe thoroughly):

Customer was very mad he received a bill. He has a PC Restriction wasn't completly switched but he wants to know how he got the bill.

RESEARCH/RESOLUTION: (What action did you take?):

23379

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-11-98 **Time:** 4:41 **AM (PM) (Circle One)**

CSR Name: Norma A. Smith

Sales Channel: SNYDER **IF / OOF (Circle One)**

Customer Type: (Circle One)
(Consumer – Long Distance Only)
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)
Rudeness
(Unauthorized Switch)
Promotion Discrepancy
Billing Issue
Repair Problems
Slammed
Deceased Person

Pricing/Calling Plan Issue
Rate Discrepancy
Misunderstanding
Payment Not Received
Provisioning
Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
SITEL
AFNI-TUCSON
THORNTON
NIAGARA FALLS
ALPHARETTA

(AFNI)
BSC
PHONE MARTS
REPAIR
Other: _____

Customer First Name: Clara Chavarria
Customer Last Name: " "
Customer Address: 966 Blaxrit Dr
City: Miami **State** Beach FL **Zip** 33141
Customer BTN: (305) 864-7429 **Customer WTN (S):** _____
Social Security #: N/A
If Available, Provide:
Birthdate: N/A
Language: Spanish
Market: N/A
Product: N/A
Pricing Plan(s): N/A

Please Circle: CUSTOMER REQUESTED CALLBACK YES / NO CUSTOMER THREATENING ESCALATION YES / NO

PROBLEM: (Please be very specific and describe thoroughly):

Cx was swith to GTE w/out Auth, she wans to know who swith acct ID

RESEARCH/RESOLUTION: (What action did you take?): 23380

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-5-98 **Time:** 9:40 (AM) PM (Circle One)

CSR Name: Angelica Vazquez

Sales Channel: (SNYDER) IF / OOF (Circle One)

Customer Type: (Circle One)
- Consumer –(Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- (Unauthorized Switch)
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- Slammed
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Carmen
Customer Last Name: Junco
Customer Address: 3300 SW 57th Ave
City: Miami **State** FL **Zip** 33155
Customer BTN: FAX (305) 662-8589 **Customer WTN (S):** (305) 661 0806
Social Security #:
If Available, Provide:
Birthdate: 3/18/56
Language: Spanish
Market:
Product:
Pricing Plan(s):

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) NO CUSTOMER THREATENING ESCALATION YES (NO)

PROBLEM: **(Please be very specific and describe thoroughly):**

Wants to know how the switched was made w/out her authorization. She will not pay Bill. The number is a fax. Till she receives an answer of writing to happen

RESEARCH/RESOLUTION; (What action did you take?):

23381

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-6-98 **Time:** 5:35 **AM** (PM) **(Circle One)**

CSR Name: Michelle Tomlinson

Sales Channel: SNYDER **IF** (OOF) **(Circle One)**

Customer Type: (Circle One)
(Consumer – Long Distance Only)
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)

Rudeness	Pricing/Calling Plan Issue	Other Complaint Types
(Unauthorized Switch)	Rate Discrepancy	_____
Promotion Discrepancy	Misunderstanding	_____
Billing Issue	Payment Not Received	_____
Repair Problems	Provisioning	_____
Slammed	Cursed Customer	_____
Deceased Person		

Customer Service Group: (Circle One)

SITEL	(AFNI)
AFNI-TUCSON	BSC
THORNTON	PHONE MARTS
NIAGARA FALLS	REPAIR
ALPHARETTA	Other: _____

Customer First Name: Sidney ~~Kane~~
Customer Last Name: Kane
Customer Address: 20225 NE 34 Ave
City: MIAMI **State** FL **Zip** 33180
Customer BTN: 305-466-9633 **Customer WTN (S):** _____
Social Security #: _____
If Available, Provide:
Birthdate: _____
Language: _____
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: CUSTOMER REQUESTED CALLBACK YES / NO CUSTOMER THREATENING ESCALATION (YES / NO

PROBLEM: (Please be very specific and describe thoroughly):

Cx very upset that he was switched w/out
+ s consent

RESEARCH/RESOLUTION: (What action did you take?):

23382

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11/06/98 **Time:** 1:01 **AM (PM)** (Circle One)

CSR Name: Andrea

Sales Channel: SNYDER **IF / (OOF)** (Circle One)

Customer Type: (Circle One)
(Consumer – Long Distance Only)
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)
Rudeness
(Unauthorized Switch)
Promotion Discrepancy
Billing Issue
Repair Problems
Slammed
Deceased Person

Pricing/Calling Plan Issue
Rate Discrepancy
Misunderstanding
Payment Not Received
Provisioning
Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
SITEL
AFNI-TUCSON
THORNTON
NIAGARA FALLS
ALPHARETTA

(AFNI)
BSC
PHONE MARTS
REPAIR
Other: _____

Customer First Name: Patrick ~~Barrett~~
Customer Last Name: Barrett
Customer Address: 2023 Grasmere
City: Apopka **State** Florida **Zip** 32703
Customer BTN: 407-880-2576 **Customer WTN (S):** 407-880-4917
Social Security #:
If Available, Provide:
Birthdate:
Language:
Market:
Product:
Pricing Plan(s):

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION YES / NO

PROBLEM: **(Please be very specific and describe thoroughly):**

C" shares home with roommates. No one remembers authorizing switch. Would like to know who switched service or who was contacted.

RESEARCH/RESOLUTION: (What action did you take?):

23383

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11/04/98 **Time:** 3:20 **AM** (PM) (Circle One)

CSR Name: Jami

Sales Channel: (SNYDER) **IF** / (OOF) (Circle One)

Customer Type: (Circle One)
(Consumer – Long Distance Only)
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)

Rudeness	Pricing/Calling Plan Issue	Other Complaint Types:
(Unauthorized Switch)	Rate Discrepancy	
Promotion Discrepancy	Misunderstanding	
Billing Issue	Payment Not Received	
Repair Problems	Provisioning	
Slammed	Cursed Customer	
Deceased Person		

Customer Service Group: (Circle One)

SITEL	(AFNI)
AFNI-TUCSON	BSC
THORNTON	PHONE MARTS
NIAGARA FALLS	REPAIR
ALPHARETTA	Other:

Customer First Name: Narbal
Customer Last Name: Lesage
Customer Address: 7000 Kismet St
City: Miramar **State** Florida **Zip** 33023
Customer BTN: 954-987-4149 **Customer WTN (S):**
Social Security #: [redacted]

If Available, Provide:
Birthdate:
Language:
Market:
Product:
Pricing Plan(s):

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION (YES) / NO

PROBLEM: (Please be very specific and describe thoroughly):
C switched w/out authorization. Says he will not pay. Wants proof that he changed switch. Threatening to sue.

RESEARCH/RESOLUTION: (What action did you take?):

23384

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-16-98 **Time:** 12:51 **AM (PM)** (Circle One)

CSR Name: Shay Hensley

Sales Channel: SNYDER IF / (OQE) (Circle One)

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- (Unauthorized Switch)
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- Slammed
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: JUDD
Customer Last Name: GREEN
Customer Address: 1174 Stillwood Ct.
City: PORT ORANGE **State** FLORIDA **Zip** 32119
Customer BTN: 904-756-8846 **Customer WTN (S):** SAME
Social Security #: [redacted]
If Available, Provide:
Birthdate:
Language: ENGLISH
Market:
Product:
Pricing Plan(s):

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) NO CUSTOMER THREATENING ESCALATION YES (NO)

PROBLEM: (Please be very specific and describe thoroughly):
Cust is continually being switched between long distance providers

RESEARCH/RESOLUTION: (What action did you take?):

23385

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FORM-SNYDER **CUSTOMER COMPLAINT**

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4944

Today's Date: 11/16/98 **Time:** 3:33 **AM (PM)** (Circle One)

CSR Name: Shay Hensley

Sales Channel: SNYDER IF/~~OE~~ (Circle One)

Customer Type: (Circle One)
~~Consumer – Long Distance Only~~
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)

Rudeness	Pricing/Calling Plan Issue	Other Complaint Types
~~Unauthorized Switch~~	Rate Discrepancy	
Promotion Discrepancy	Misunderstanding	
Billing Issue	Payment Not Received	
Repair Problems	Provisioning	
Slammed	Cursed Customer	
Deceased Person		

Customer Service Group: (Circle One)

SITEL	~~AFNI~~
WENTZVILLE	BSC
THORNTON	PHONE MARTS
NIAGARA FALLS	REPAIR
ALPHARETTA	Other:

Customer First Name: DENISE MATHURIN
Customer Last Name:
Customer Address: 1126 N.W. 1st Ave Apt. A
City: FORT LAUDERDALE **State** FLORIDA **Zip** 33311
Customer BTN: 954-525-9720 **Customer WTN (S):** SAME
Social Security #: [redacted]
Birthdate: NA
Language: ENGLISH
Market:
Product:
Pricing Plan(s):

Please Circle: ESCALATION-~~YES~~ ESCALATION-NO CALLBACK NEEDED-YES CALLBACK NEEDED-NO

PROBLEM: (Please be very specific and describe thoroughly):
Cust wants to know who authorized switch

RESEARCH/RESOLUTION: (What action did you take?):

CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

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(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11/13 **Time:** _____ **AM PM (Circle One)**

CSR Name: Natasha Williams

Sales Channel: SNYDER **IF / OOF (Circle One)**

Customer Type: (Circle One)
(Consumer – Long Distance Only)
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)
Rudeness
(Unauthorized Switch)
Promotion Discrepancy
Billing Issue
Repair Problems
Slammed
Deceased Person
Pricing/Calling Plan Issue
Rate Discrepancy
Misunderstanding
Payment Not Received
Provisioning
Cursed Customer
Other Complaint Type: _____

Customer Service Group: (Circle One)
SITEL
AFNI-TUCSON
THORNTON
NIAGARA FALLS
ALPHARETTA
AFNI
BSC
PHONE MARTS
REPAIR
Other: _____

Customer First Name: Daniel
Customer Last Name: Marple
Customer Address: 937 N. W 23rd Dr
City: Pembroke Pines **State** Florida **Zip** 33024
Customer BTN: _____ **Customer WTN (S):** _____
Social Security #: _____
If Available, Provide:
Birthdate: _____
Language: _____
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION (YES) / NO

PROBLEM: (Please be very specific and describe thoroughly):
cu was switched w/out permission

RESEARCH/RESOLUTION: (What action did you take?):
Apologized and issued Order

23387

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: Nov. 16, 1998 **Time:** 8:30 (AM) PM (Circle One)

CSR Name: TODD MONAR/

Sales Channel: SNYDER IF (OOF) (Circle One)

Customer Type: (Circle One)
(Consumer – Long Distance Only)
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)

Rudeness		Pricing/Calling Plan Issue	Other Complaint Type
(Unauthorized Switch)		Rate Discrepancy	
Promotion Discrepancy		Misunderstanding	
Billing Issue		Payment Not Received	
Repair Problems		Provisioning	
Slammed		Cursed Customer	
Deceased Person			

Customer Service Group: (Circle One)

SITEL	(AFNI)
AFNI-TUCSON	BSC
THORNTON	PHONE MARTS
NIAGARA FALLS	REPAIR
ALPHARETTA	Other:

Customer First Name: FRANCIS
Customer Last Name: BLAKE
Customer Address: 834 MC DONALD RD.
City: PORT ORANGE **State** FL **Zip** 32119
Customer BTN: 904 756 4783 **Customer WTN (S):** SAME
Social Security #:
If Available, Provide:
Birthdate:
Language: ENGLISH
Market:
Product: 23388
Pricing Plan(s):

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION (YES) / N

PROBLEM: (Please be very specific and describe thoroughly):

Cust said he spoke to no one (telemarketer other); was out-of-town + on return found GTE LD mail thanking him for SWITCHING. Cust's Local Bel South rec'd. electronic message to switch him. Cust. swore FOR CERTAIN HE WOULD SPEAK TO LAWYER FOR WHATEVER LEGAL JUSTIFICATION → PUBLIC SLANDER TO GT

RESEARCH/RESOLUTION: (What action did you take?): A. HOW DID GTELD GET HIS NAME + B. EXAC
I FILLED OUT THIS FORM, SUBMITTED IT DATE OF
+ TRIED TO GET + THRU TO SNYDER + 800-483-8384 SWITCH

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-15-98 **Time:** 12:50 **AM (PM)** (Circle One)

CSR Name: [redacted] Veronica Luna

Sales Channel: SNYDER IF / (DOF) (Circle One)

Customer Type: (Circle One)
(Consumer – Long Distance Only)
Small Business-Long Distance Only
Consumer – Bundles
Small Business-Bundles

Complaint Type: (Circle One)

		Other Complaint Types:
Rudeness	Pricing/Calling Plan Issue	
(Unauthorized Switch)	Rate Discrepancy	
Promotion Discrepancy	Misunderstanding	
Billing Issue	Payment Not Received	
Repair Problems	Provisioning	
Slammed	Cursed Customer	
Deceased Person		

Customer Service Group: (Circle One)

SITEL	(AFNI)
AFNI-TUCSON	BSC
THORNTON	PHONE MARTS
NIAGARA FALLS	REPAIR
ALPHARETTA	Other: _____

Customer First Name: Yamile [redacted]
Customer Last Name: Ferrer
Customer Address: 1340 W 41ST Apt. 204
City: HLH **State** FL **Zip** _____
Customer BTN: 305 362-9073 **Customer WTN (S):** _____
Social Security #: _____
If Available, Provide:
Birthdate: _____
Language: Spanish
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) NO CUSTOMER THREATENING ESCALATION YES (NO)

PROBLEM: (Please be very specific and describe thoroughly):
Customer very upset, because she never authorized switch. Says she is with nct. very upset, but polite.

RESEARCH/RESOLUTION: (What action did you take?):

23389

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FORM-SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4944

Today's Date: 11/16/98 **Time:** 5:51 **AM** (PM) **(Circle One)**

CSR Name: Shay Hensley

Sales Channel: SNYDER **IF/(OE)** (Circle One)

Customer Type: (Circle One)
(Consumer – Long Distance Only)
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)
Rudeness
(Unauthorized Switch)
Promotion Discrepancy
Billing Issue
Repair Problems
Slammed
Deceased Person
Pricing/Calling Plan Issue
Rate Discrepancy
Misunderstanding
Payment Not Received
Provisioning
Cursed Customer
Other Complaint Type

Customer Service Group: (Circle One)
SITEL
WENTZVILLE
THORNTON
NIAGARA FALLS
ALPHARETTA
(AENL)
BSC
PHONE MARTS
REPAIR
Other:

Customer First Name: TIMMIE
Customer Last Name: LEE
Customer Address: 7832 FRED GRIFFIS R.D.
City: ORLANDO **State** FLORIDA **Zip** 32831
Customer BTN: 407-381-2171 **Customer WTN (S):** SAME
Social Security #: NA
Birthdate: NA
Language: ENGLISH
Market: NA
Product:
Pricing Plan(s):

Please Circle: ESCALATION-YES ESCALATION-NO CALLBACK NEEDED-YES CALLBACK NEEDED-NO

PROBLEM: (Please be very specific and describe thoroughly):
Cust wants to know who switched, or authorized switch
A.S.A.P.

23390

RESEARCH/RESOLUTION: (What action did you take?):
Placed cancellation order and noted accounts.

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-25-98 **Time:** 9:11 (AM) PM (Circle One)

CSR Name: Tim F

Sales Channel: (SNYDER) IF / OOF (Circle One)

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- (Unauthorized Switch)
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- Slammed
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: DAVID OR LINDA
Customer Last Name: GRAF
Customer Address: 11411 SW 109 RD.
City: MIAMI **State** FL. **Zip** 33176
Customer BTN: 305-596-5450 **Customer WTN (S):** _____
Social Security #: _____
If Available, Provide:
Birthdate: _____
Language: _____
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: CUSTOMER REQUESTED CALLBACK YES / NO CUSTOMER THREATENING ESCALATION YES / NO

PROBLEM: (Please be very specific and describe thoroughly):

CUSTOMER WOULD LIKE TO KNOW HOW THEY CAME OVER TO GTE L.D. SERVICE.

RESEARCH/RESOLUTION: (What action did you take?):

23391

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-17-98 **Time:** 8:45 (AM) PM (Circle One)

CSR Name: Veronica Riggs

Sales Channel: (SNYDER) IF (OOF) (Circle One)

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- Unauthorized Switch
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- (Slammed)
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Brenda
Customer Last Name: Kale
Customer Address: 2940 NW 175 St
City: Carol City **State** FL **Zip** 33056
Customer BTN: 305 624 5628 **Customer WTN (S):** 3056245628
Social Security #: N-A
If Available, Provide:
Birthdate:
Language:
Market:
Product:
Pricing Plan(s):

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION (YES) / NO

PROBLEM: (Please be very specific and describe thoroughly):
Cu switched W/Out permission would like know authorizing party.

RESEARCH/RESOLUTION: (What action did you take?): 23392
Deactivated service.

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11/17/98 **Time:** 1:49 **AM** (PM) **(Circle One)**

CSR Name: Reni Garcia

Sales Channel: SNYDER **IF / OOF (Circle One)**

Customer Type: (Circle One)
Consumer – Long Distance Only
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)

Rudeness	Pricing/Calling Plan Issue	Other Complaint Types:
Unauthorized Switch	Rate Discrepancy	
Promotion Discrepancy	Misunderstanding	
Billing Issue	Payment Not Received	
Repair Problems	Provisioning	
(Slammed)	Cursed Customer	
Deceased Person		

Customer Service Group: (Circle One)

SITEL	AFNI
AFNI-TUCSON	BSC
THORNTON	PHONE MARTS
NIAGARA FALLS	REPAIR
ALPHARETTA	Other: _____

Customer First Name: Reni'
Customer Last Name: Garcia
Customer Address: 10276 Brewway Place, Boca Raton FL. 33428
City: Boca Raton **State** Florida **Zip** 33428
Customer BTN: 561 **Customer WTN (S):** 862-2391
Social Security #: [redacted]
If Available, Provide:
Birthdate:
Language:
Market:
Product:
Pricing Plan(s):

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION YES / NO

PROBLEM: (Please be very specific and describe thoroughly):

How are you able to make an attempt on my phone line w/o my authorization -

RESEARCH/RESOLUTION: (What action did you take?):

23393

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FORM-SNYDER **CUSTOMER COMPLAINT**

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4944

Today's Date: NOV 17 1998 **Time:** 16:48 **AM** (PM) **(Circle One)**

CSR Name: Shay H. / Lynda R.

Sales Channel: (SNYDER) **IF/OOF (Circle One)**

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- (Unauthorized Switch)
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- Slammed
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types
her time invol

Customer Service Group: (Circle One)
- SITEL
- WENTZVILLE
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Bernard
Customer Last Name: Panfel
Customer Address: 345 S. Ocean Blvd.
City: Palm Beach **State** FL **Zip** 33480
Customer BTN: 561-533-6102 **Customer WTN (S):**
Social Security #:
Birthdate:
Language:
Market:
Product:
Pricing Plan(s): 23394

Please Circle: (ESCALATION-YES) ESCALATION-NO (CALLBACK NEEDED-YES) CALLBACK NEEDED-NO

PROBLEM: (Please be very specific and describe thoroughly):

Cus was taken over w/out auth. Very upset wants to escalate. Husband is lawyer. Wants contacted ASAP.

Resolution made by Kelly McClay CSC Supervisor

RESEARCH/RESOLUTION: (What action did you take?):

Called customer back. I faxed the bill back to GTE and did an O-order so that GTE could stop billing before she ever received a bill. The cus was a bit calm. At times, she raised her voice. I attempted to call Bell South, but she didn't want to wait for them to answer. She finally concen

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11/17/98 **Time:** 1605 **AM** (PM) (Circle One)

CSR Name: Jami

Sales Channel: (SNYDER) **IF / DOE** (Circle One)

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- (Unauthorized Switch)
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- Slammed
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Earl [redacted] Di
Customer Last Name: Biggs
Customer Address: 7606 Eagle Ct.
City: Port Orange **State** Florida **Zip** 32127
Customer BTN: 904-756-9219 **Customer WTN (S):** —
Social Security #: —
If Available, Provide:
Birthdate:
Language:
Market:
Product:
Pricing Plan(s):

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION (YES) NO

PROBLEM: **(Please be very specific and describe thoroughly):**

Customer wants to be contacted within two weeks of this date to know h he was switched. He did not give authorization.
Supervisor talked with customer – he will take further action if not contacted.

RESEARCH/RESOLUTION: (What action did you take?):

23395

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-17-98 **Time:** 11:08 (AM) PM (Circle One)

CSR Name: Veronica Riggs.

Sales Channel: (SNYDER) IF / OOF (Circle One)

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- Unauthorized Switch
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- (Slammed)
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer
- Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Angel
Customer Last Name: J Alfedo
Customer Address: 121 NE 135St.
City: Miami **State** FL **Zip** 33161
Customer BTN: 305-893-3862 **Customer WTN (S):** 305-893-3862
Social Security #: N.A

If Available, Provide:
Birthdate:
Language:
Market:
Product:
Pricing Plan(s):

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) NO CUSTOMER THREATENING ESCALATION (YES) NO

PROBLEM: (Please be very specific and describe thoroughly):
I'm switched without permission!

RESEARCH/RESOLUTION: (What action did you take?):

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-17-98. **Time:** 9:19 ~~AM~~ **PM (Circle One)**

CSR Name: Veronica Riggs

Sales Channel: SNYDER IF / ~~OOP~~ (Circle One)

Customer Type: (Circle One)
- Consumer – Long Distance Only
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- Unauthorized Switch
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- Slammed
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- ~~AFNI~~
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Jie.
Customer Last Name: Ludurasen.
Customer Address: 22 Katrinas Dr.
City: Ormond Beach **State** FL **Zip** 32174.
Customer BTN: 904.672 4542 **.Customer WTN (S):** 904 672 4547
Social Security #: N-A.
If Available, Provide:
Birthdate:
Language:
Market:
Product:
Pricing Plan(s):

Please Circle: CUSTOMER REQUESTED CALLBACK YES / NO CUSTOMER THREATENING ESCALATION YES / NO

PROBLEM: (Please be very specific and describe thoroughly):
Cx demands to know how he got billed for someone else's phone # just because it is one # off from his.

RESEARCH/RESOLUTION: (What action did you take?):
Changed billing name + address.

23397

CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-17 **Time:** 9:08 (AM) PM (Circle One)

CSR Name: KWood

Sales Channel: (SNYDER) IF / (OOF) (Circle One)

Customer Type: (Circle One)
(Consumer – Long Distance Only)
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)

		Other Complaint Type
Rudeness	Pricing/Calling Plan Issue	
(Unauthorized Switch)	Rate Discrepancy	
Promotion Discrepancy	Misunderstanding	
Billing Issue	Payment Not Received	
Repair Problems	Provisioning	
(Slammed)	Cursed Customer	
Deceased Person		

Customer Service Group: (Circle One)

SITEL	(AFNI)
AFNI-TUCSON	BSC
THORNTON	PHONE MARTS
NIAGARA FALLS	REPAIR
ALPHARETTA	Other:

Customer First Name: Pam
Customer Last Name: Abrahams
Customer Address: 940 Garden Ln
City: Ormond Bch **State** FL **Zip** 32174
Customer BTN: **Customer WTN (S):**
Social Security #:
If Available, Provide:
Birthdate:
Language:
Market:
Product:
Pricing Plan(s):

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION YES (N

PROBLEM: (Please be very specific and describe thoroughly):
"is not approve – not talk to anyone

RESEARCH/RESOLUTION: (What action did you take?):

23398

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11/18/98 **Time:** 9:28 (AM) PM (Circle One)

CSR Name: Eric Williams

Sales Channel: SNYDER IF / OOF (Circle One)

Customer Type: (Circle One)
(Consumer – Long Distance Only)
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)
Rudeness
~~Unauthorized Switch~~
~~Promotion Discrepancy~~
Billing Issue
Repair Problems
Slammed
Deceased Person
Pricing/Calling Plan Issue
Rate Discrepancy
Misunderstanding
Payment Not Received
Provisioning
Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
SITEL
AFNI-TUCSON
THORNTON
NIAGARA FALLS
ALPHARETTA
(AFNI)
~~DSC~~
PHONE MARTS
REPAIR
Other: _____

Customer First Name: [redacted] Keith
Customer Last Name: _____
Customer Address: 8425 SW 181 Ter
City: Miami **State** FL **Zip** 33186
Customer BTN: 305-252-7946 **Customer WTN (S):** _____
Social Security #: _____
If Available, Provide:
Birthdate: _____
Language: _____
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION (YES) / NO

PROBLEM: (Please be very specific and describe thoroughly):

slammed by GTE w/o upsell wants to know who did it

RESEARCH/RESOLUTION: (What action did you take?):

23399

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FORM-SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4944

Today's Date: 11/19/98 **Time:** 2:41 **AM (PM)** (Circle One)

CSR Name: Andre'

Sales Channel: SNYDER **IF/(OOF)** (Circle One)

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- (Unauthorized Switch)
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- Slammed
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- WENTZVILLE
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Robert
Customer Last Name: Jacques
Customer Address: 1420 Sheridan Apt H-12
City: Hollywood **State** FL **Zip** 33020
Customer BTN: 954-921-2413 **Customer WTN (S):** 954-921-2413
Social Security #:
Birthdate:
Language:
Market:
Product:
Pricing Plan(s):

Please Circle: ESCALATION-YES ESCALATION-NO CALLBACK NEEDED-YES CALLBACK NEEDED-NO

PROBLEM: (Please be very specific and describe thoroughly):

Cu was switched to GTE W/O authorization. Would like written explanation.

RESEARCH/RESOLUTION: (What action did you take?):

Called AT&T to have service reinstated.

23400

CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-19-98 **Time:** 5:17 **AM (PM)** (Circle One)

CSR Name: Christopher L. [redacted]

Sales Channel: SNYDER **IF (OOF)** (Circle One)

Customer Type: (Circle One)
Consumer – Long Distance Only
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)
Rudeness
Unauthorized Switch
Promotion Discrepancy
Billing Issue
Repair Problems
Slammed
Deceased Person
Pricing/Calling Plan Issue
Rate Discrepancy
Misunderstanding
Payment Not Received
Provisioning
Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
(SITEL)
AFNI-TUCSON
THORNTON
NIAGARA FALLS
ALPHARETTA
AFNI
BSC
PHONE MARTS
REPAIR
Other: _____

Customer First Name: Wade
Customer Last Name: Calabrese
Customer Address: 2140 SW 3 Ave
City: Miami **State** FL. **Zip** 33129
Customer BTN: [redacted] **Customer WTN (S):** _____
Social Security #: 954-958-6253 9-4:30

If Available, Provide:
Birthdate: _____
Language: _____
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION (YES) / NO

PROBLEM: (Please be very specific and describe thoroughly):
LD distance was changed without customer authorization

RESEARCH/RESOLUTION: (What action did you take?):

23401

CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-19-98 **Time:** 12:05 **AM** (PM) **(Circle One)**

CSR Name: JUAN VAZQUEZ

Sales Channel: SNYDER **IF** (OOF) **(Circle One)**

Customer Type: **(Circle One)**
(Consumer – Long Distance Only)
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: **(Circle One)**
Rudeness
(Unauthorized Switch)
Promotion Discrepancy
Billing Issue
Repair Problems
Slammed
Deceased Person
Pricing/Calling Plan Issue
Rate Discrepancy
Misunderstanding
Payment Not Received
Provisioning
Cursed Customer

Other Complaint Types: _____

Customer Service Group: **(Circle One)**
SITEL
AFNI-TUCSON
THORNTON
NIAGARA FALLS
ALPHARETTA
(AFNI)
BSC
PHONE MARTS
REPAIR
Other: _____

Customer First Name: RAMO VIERA
Customer Last Name: VIERA
Customer Address: 3834 SW 87 PL
City: MIAMI **State** FL **Zip** 33165
Customer BTN: _____ **Customer WTN (S):** _____
Social Security #: _____
If Available, Provide:
Birthdate: _____
Language: SPANISH
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO **CUSTOMER THREATENING ESCALATION** YES (NO)

PROBLEM: (Please be very specific and describe thoroughly):

C° NEVER REQ. SERV. CS WANTS TO KNOW WHO AUTHORIZED THE SWITCH. PLEASE CALL OR WRITE HIM, AND EXPLAIN THE SITUATION

RESEARCH/RESOLUTION: (What action did you take?):

23402

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FORM-SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4944

Today's Date: 11/19/98 **Time:** 5:30 pm **AM (PM)** (Circle One)

CSR Name: Nancy Smith

Sales Channel: SNYDER **IF/(OOF)** (Circle One)

Customer Type: (Circle One)
(Consumer) – Long Distance Only
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)
Rudeness
(Unauthorized Switch)
Promotion Discrepancy
Billing Issue
Repair Problems
Slammed
Deceased Person
Pricing/Calling Plan Issue
Rate Discrepancy
Misunderstanding
Payment Not Received
Provisioning
Cursed Customer

Other Complaint Types:
_____
_____
_____
_____
_____

Customer Service Group: (Circle One)
SITEL
WENTZVILLE
THORNTON
NIAGARA FALLS
ALPHARETTA
(AFNI)
BSC
PHONE MARTS
REPAIR
Other: _____

Customer First Name: Maria
Customer Last Name: Vizamar
Customer Address: 1130 NW 121 ST
City: Miami **State** FL **Zip** 33168
Customer BTN: 305-687-8963 **Customer WTN (S):** _____
Social Security #: _____
Birthdate: _____
Language: _____
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: ESCALATION-YES ESCALATION-NO CALLBACK NEEDED-(YES) CALLBACK NEEDED-NO

PROBLEM: **(Please be very specific and describe thoroughly):**

Wants to know who authorized switch. How happened etc.

RESEARCH/RESOLUTION: **(What action did you take?):**

23403

FORM-SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4944

Today's Date: 11/19/98 **Time:** 6:13 **AM (PM)** (Circle One)

CSR Name: Naomi Smith

Sales Channel: SNYDER **IF/OOF** (Circle One)

Customer Type: (Circle One)
- (Consumer) Long Distance Only
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- (Unauthorized Switch)
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- Slammed
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- WENTZVILLE
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Jim
Customer Last Name: MOLNAR
Customer Address: 13619 Bluewater Cir
City: Orlando **State** FL **Zip** 32828
Customer BTN: 407-275-8083 **Customer WTN (S):** _____
Social Security #: _____
Birthdate: _____
Language: _____
Market: _____
Product: _____
Pricing Plan(a): _____

Please Circle: ESCALATION-YES ESCALATION-NO CALLBACK NEEDED-(YES) CALLBACK NEEDED-NO

PROBLEM: (Please be very specific and describe thoroughly):

Wants investigation done on how this was switched

RESEARCH/RESOLUTION: (What action did you take?):

23404

CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11/19/98 **Time:** 6:20 **AM** (PM) (Circle One)

CSR Name: Shelia Cramer

Sales Channel: SNYDER IF / ~~OOF~~ (Circle One)

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- (Unauthorized Switch)
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- Slammed
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Paul
Customer Last Name: Poulliot
Customer Address: 405 GREEN SPRING CIR.
City: WN. SPRGS **State** FL **Zip** 32708-3021
Customer BTN: (407)327-1772. **Customer WTN (S):** _____
Social Security #: _____
If Available, Provide:
Birthdate: _____
Language: _____
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: CUSTOMER REQUESTED CALLBACK – (YES) / NO CUSTOMER THREATENING ESCALATION YES / (NO)

PROBLEM: (Please be very specific and describe thoroughly):

Cus never auth switch. Referred to LEC.

RESEARCH/RESOLUTION: (What action did you take?):

PIC = Active
BNI = Active.

23405

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11/04/98 **Time:** 3:38 **AM (PM)** (Circle One)

CSR Name: Jami

Sales Channel: SNYDER **IF / (OOF)** (Circle One)

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- (Unauthorized Switch)
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- Slammed
- (Deceased Person)

Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- (AFNI)
- AFNI-TUCSON
- BSC
- THORNTON
- PHONE MARTS
- NIAGARA FALLS
- REPAIR
- ALPHARETTA
- Other: _____

Customer First Name: Andres bill Raymond (deceased for 4 years)
Customer Last Name: Roth
Customer Address: 8020 SW 118 St.
City: Miami **State** Florida **Zip** 33156
Customer BTN: 305-235-0765 **Customer WTN (S):** Same
Social Security #: [redacted]
If Available, Provide:
Birthdate:
Language:
Market:
Product:
Pricing Plan(s):

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) NO CUSTOMER THREATENING ESCALATION (YES) NO

PROBLEM: (Please be very specific and describe thoroughly):

Called last week wanting to know who switched this. Her husband has deceased. She has reported the situation to some kind of commission in Florida. Please call. This is second request.

RESEARCH/RESOLUTION: (What action did you take?):

23406

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 10-29-98 **Time:** 4:06 **AM (PM)** (Circle One)

CSR Name: James & Rachel Gumpf

Sales Channel: SNYDER IF (OOF) (Circle One)

Customer Type: (Circle One)
(Consumer – Long Distance Only)
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)
Rudeness
(Unauthorized Switch)
~~Promotion Discrepancy~~
Billing Issue
Repair Problems
Slammed
Deceased Person
Pricing/Calling Plan Issue
Rate Discrepancy
Misunderstanding
Payment Not Received
Provisioning
Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
SITEL
AFNI-TUCSON
THORNTON
NIAGARA FALLS
ALPHARETTA
(AFNI)
~~BSC~~
PHONE MARTS
REPAIR
Other: _____

Customer First Name: James & Rachel
Customer Last Name: Gumpf
Customer Address: 1650 windy pnts Dr apt 93
City: Naples **State** FL **Zip** 34112
Customer BTN: 941-793-7920 **Customer WTN (S):** _____
Social Security #: N/A
If Available, Provide:
Birthdate: N/A
Language: English
Market: _____
Product: _____
Pricing Plan(s): 41X71, 42244

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION YES / NO

PROBLEM: (Please be very specific and describe thoroughly):

C was switch w/out authorization
C wants to know person who and how the order was placed

RESEARCH/RESOLUTION: (What action did you take?):

23407

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 10-29-98 **Time:** 400 **AM** (PM) **(Circle One)**

CSR Name: M Ann Brown **Badge #:**

Customer Name: Brenda Pousche **BTN:** 904.642-5137

Address: 1743 Mindanao Dr **Apt.#:**

City: JKVL FL **ST:** **ZIP:** 32246 **INF? OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu 15yr Old daughter Solicited
for GTE CO. didnt verify. Order
was Initiated, Cu was Active
in QMF. Very Upset

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-30-97 **Time:** 9:28 (AM) PM (Circle One)

CSR Name: STEVEN CORNEJO

Sales Channel: SNYDER IF / OOF (Circle One)

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- (Unauthorized Switch)
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- Slammed
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: EDGAR
Customer Last Name: ZUNIGA
Customer Address: 2637 SW 24 TERRANCE
City: MIAMI **State** FL **Zip** 33134
Customer BTN: _____ **Customer WTN (S):** 305-858-2085
Social Security #: _____
If Available, Provide:
Birthdate: _____
Language: _____
Market: _____
Product: _____
Pricing Plan(s): TOTAL CALL, TNT FREE MIN.

Please Circle: CUSTOMER REQUESTED CALLBACK YES / NO CUSTOMER THREATENING ESCALATION YES / NO

PROBLEM: (Please be very specific and describe thoroughly):
SWITCHED W/O AUTH

23409

RESEARCH/RESOLUTION: (What action did you take?):
ADV CUS WOULD REBATE AND CANC CUS REFUSED

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 10-30-98 **Time:** 1:43 **AM** (PM) (Circle One)

CSR Name: Deina-F.

Sales Channel: SNYDER IF / (OOF) (Circle One)

Customer Type: (Circle One)
(Consumer – Long Distance Only)
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)
Rudeness
Unauthorized Switch
Promotion Discrepancy
Billing Issue
Repair Problems
(Slammed)
Deceased Person
Pricing/Calling Plan Issue
Rate Discrepancy
Misunderstanding
Payment Not Received
Provisioning
Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
SITEL
AFNI-TUCSON
THORNTON
NIAGARA FALLS
ALPHARETTA
(AFNI)
BSC
PHONE MARTS
REPAIR
Other: _____

Customer First Name: Donald
Customer Last Name: Lindhorst
Customer Address: 5100 60th St E Lt 025
City: Bradenton **State** FL **Zip** 34203
Customer BTN: 941-753-7625 **Customer WTN (S):** _____
Social Security #: _____
If Available, Provide:
Birthdate: _____
Language: English
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) NO **CUSTOMER THREATENING ESCALATION YES / NO**

PROBLEM: (Please be very specific and describe thoroughly):
Customer did not authorize a switch to GTECC.

RESEARCH/RESOLUTION: (What action did you take?):

23410

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: October 31, 1998 **Time:** 2:57 **AM PM (Circle One)**

CSR Name: Elizabeth Medellin

Sales Channel: SNYDER **IF / OOF (Circle One)**

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- (Unauthorized Switch)
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- Slammed
- Deceased Person

Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: Rates are to high' cust wants the lowest rates. send letter or other bill by mail; cust req

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- AFNI
- BSC
- PHONE MARTS
- REPAIR
- Other: CSC

Customer First Name: Fernando
Customer Last Name: Novoa
Customer Address: Po Box 528414 Mia Fl 33152
City: Miami **State** FL **Zip**
Customer BTN: (305) 229-1607 **Customer WTN (S):**
Social Security #: [redacted]
If Available, Provide:
Birthdate:
Language: Spanish
Market:
Product: GTE was chg Mr. Novoa $1.40 a min to venezuela he also
Pricing Plan(s): had 1hour Free for 6 months

Please Circle: CUSTOMER REQUESTED CALLBACK YES / (NO) CUSTOMER THREATENING ESCALATION YES / (NO)

PROBLEM: (Please be very specific and describe thoroughly):

Cli mgr would like to be contacted within 2-3 weeks by mail, cust thinks the bill is to high.

23411

RESEARCH/RESOLUTION: (What action did you take?):
advised him that a rep. from GTE would contact him to resolve this problem. the reason I didn't do anything to his account is; he had received two credits of $15.00

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 10-31-98 **Time:** 8:11 **(AM) PM (Circle One)**

CSR Name: Jennette Lee

Sales Channel: SNYDER **IF / (OOF) (Circle One)**

Customer Type: (Circle One)
Consumer – (Long Distance Only)
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)

Rudeness	Pricing/Calling Plan Issue	Other Complaint Types:
Unauthorized Switch	Rate Discrepancy	
Promotion Discrepancy	Misunderstanding	
Billing Issue	Payment Not Received	
Repair Problems	Provisioning	
(Slammed)	Cursed Customer	
Deceased Person		

Customer Service Group: (Circle One)

SITEL	AFNI
AFNI-TUCSON	BSC
THORNTON	PHONE MARTS
NIAGARA FALLS	REPAIR
ALPHARETTA	Other:

Customer First Name: Pamela + Richard
Customer Last Name: Sarafan
Customer Address: 600 NE 97th St
City: Miami Shores **State** FL **Zip** 33138
Customer BTN: (305) 754-0792 **Customer WTN (S):**
Social Security #: [redacted]
If Available, Provide:
Birthdate:
Language:
Market:
Product:
Pricing Plan(s):

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION YES / NO

PROBLEM: (Please be very specific and describe thoroughly):

T's customer's service was switched to GTE w/out his knowledge or authorization.
BNF shows inactive/active.

RESEARCH/RESOLUTION: (What action did you take?):

23412

CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 12-1 **Time:** 10:30 (AM) PM (Circle One)

CSR Name: Haron Daly

Sales Channel: (SNYDER)

IF / OOF (Circle One)

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- Unauthorized Switch
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- (Slammed)
- Deceased Person
- *Pricing/Calling Plan Issue*
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Kenneth
Customer Last Name: Favre
Customer Address: 7900 NW 174th St
City: Miami **State** FL **Zip** 33105
Customer BTN: 305-558-1036 **Customer WTN (S):** _____
Social Security #: _____
If Available, Provide:
Birthdate: _____
Language: _____
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION (YES) / NO

PROBLEM: (Please be very specific and describe thoroughly):
CO Was Slammed Wants More Info

RESEARCH/RESOLUTION: (What action did you take?):

23413

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FORM-SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4944

Today's Date: 12-01-98 **Time:** 2:30 **AM** (PM) **(Circle One)**

CSR Name: Erin

Sales Channel: (SNYDER) **(Circle One)**

Customer Type: (Circle One)
- ~~Consumer – Long Distance Only~~
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- (Unauthorized Switch)
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- Slammed
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- WENTZVILLE
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: William
Customer Last Name: LeHMAN
Customer Address: 711 NE 118th St
City: Miami **State** FL **Zip** 33161
Customer BTN: 305-895-4892 **Customer WTN (S):** Same
Social Security #:
Birthdate:
Language:
Market:
Product:
Pricing Plan(s):

Please Circle: ESCALATION-YES ESCALATION-NO CALLBACK NEEDED-YES CALLBACK NEEDED-NO

PROBLEM: (Please be very specific and describe thoroughly):

305-758-0708 – Betty Wright. Call this # back. wants to know who auth. switch. this lady handles all cl. Business

RESEARCH/RESOLUTION: (What action did you take?):

23414

FORM-SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4944

Today's Date: 12-01-98 **Time:** 1:43 **AM** (PM) **(Circle One)**

CSR Name: Veronica R.

Sales Channel: (SNYDER) **IF/OOF (Circle One)**

Customer Type: (Circle One)
- ~~Consumer – Long Distance Only~~
- ~~Small Business-Long-Distance-Only~~
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)

Rudeness	Pricing/Calling Plan Issue	Other Complaint Types:
Unauthorized Switch	Rate Discrepancy	
Promotion Discrepancy	Misunderstanding	
Billing Issue	Payment Not Received	
Repair Problems	Provisioning	
~~Slammed~~	Cursed Customer	
~~Deceased Person~~		

Customer Service Group: (Circle One)

SITEL	(AFNI)
WENTZVILLE	BSC
THORNTON	PHONE MARTS
NIAGARA FALLS	REPAIR
ALPHARETTA	Other:

Customer First Name: Al
Customer Last Name: Ortiz
Customer Address: 15437 SW 110 ter.
City: Miami **State** FL **Zip** 33196
Customer BTN: 305-388-0616 **Customer WTN (S):** 305-388-0616
Social Security #: N/A
Birthdate:
Language:
Market:
Product:
Pricing Plan(s):

Please Circle: ESCALATION-YES ESCALATION-NO CALLBACK NEEDED-YES CALLBACK NEEDED-NO

PROBLEM: (Please be very specific and describe thoroughly):
Ce taken over W/OUT authorization. Demands to know authorizing party.

RESEARCH/RESOLUTION: (What action did you take?):

23415

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CUSTOMER COMPLAINT FORM - ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)

Fax to: Quality Assurance Department - GTECC @ 372/465-4867

Today's Date: 12/2/98 5:12:38 PM

CSR Name: GEORGETTA ROSS

Sales Channel: SNYDER OOF

Customer Type: CONSUMER - LONG DISTANCE ONLY

Complaint Type: UNAUTHORIZED SWITCH/SLAMMED

Misc. Complaint Type:

Customer Service Group: AFNI CSC

Customer First Name DALE

Customer Last Name: MINGER

Customer Address: 745 NE 122ND

City: NORTH M **State:** FL **Zip:** 33161

Customer BTN: 305-893-1928 **Customer WTN:** 305-893-1928

Social Security #: NA

If Available, Provide:

Birthdate:

Language: ENGLISH

Market: NA

Product:

Pricing Plan(s):

CUSTOMER REQUESTED CALLBAC Yes **CUSTOMER REQUESTED ESCALATION:** No

PROBLEM: (Please be very specific and describe thoroughly):

CU WNTS TO KNOW WHY HE WAS SWITCHED, "NOW"

RESEARCH/RESOLUTION: (What action did you take?):

CU IS ACTIVE IN PIC AND ANI. PUT HIM THROUGH TO LOCAL CARRIER TO UPDATE THEIR SYSTEM.

CUSTOMER COMPLAINT FORM - ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)

Fax to: Quality Assurance Department - GTECC @ 372/465-4867

Today's Date: 12/2/98 7:03:58 PM

CSR Name: FARRAH GATHRIGHT

Sales Channel: SNYDER OOF

Customer Type: CONSUMER - LONG DISTANCE ONLY

Complaint Type: UNAUTHORIZED SWITCH/SLAMMED

Misc. Complaint Type:

Customer Service Group: AFNI CSC

Customer First Name JAMIE

Customer Last Name: RUBEN

Customer Address: 9600 BRODVIEW TER BAY

City: MIAMI **State:** FL **Zip:** 33154

Customer BTN: 305-866-6366 **Customer WTN:** 305-866-6378

Social Security #:

If Available, Provide:

Birthdate:

Language: ENGLISH

Market:

Product:

Pricing Plan(s):

CUSTOMER REQUESTED CALLBAC Yes **CUSTOMER REQUESTED ESCALATION:** Yes

PROBLEM: (Please be very specific and describe thoroughly):

CUS WAS SWITCHED W/O HER PERMISSION AND ACCT WAS PLACED IN HER DAUGHER'S NAME CUS CAN ALSO BE CONTACTED AT WK DURING REGULAR BUS. HRS AT 305-892-0111

RESEARCH/RESOLUTION: (What action did you take?):

CR THE ACCT-ADVISED CU TO CALL CARRIER OF CHOICE

CUSTOMER COMPLAINT FORM - ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)

Fax to: Quality Assurance Department - GTECC @ 372/465-4867

Today's Date: 12/2/98 5:12:38 PM

CSR Name: GEORGETTA ROSS

Sales Channel: SNYDER OOF

Customer Type: CONSUMER - LONG DISTANCE ONLY

Complaint Type: UNAUTHORIZED SWITCH/SLAMMED

Misc. Complaint Type:

Customer Service Group: AFNI CSC

Customer First Name DALE

Customer Last Name: MINGER

Customer Address: 745 NE 122ND

City: NORTH M **State:** FL **Zip:** 33161

Customer BTN: 305-893-1928 **Customer WTN:** 305-893-1928

Social Security #: NA

If Available, Provide:

Birthdate:

Language: ENGLISH

Market: NA

Product:

Pricing Plan(s):

CUSTOMER REQUESTED CALLBAC Yes **CUSTOMER REQUESTED ESCALATION:** No

PROBLEM: (Please be very specific and describe thoroughly):
CU WNTS TO KNOW WHY HE WAS SWITCHED, "NOW"

RESEARCH/RESOLUTION: (What action did you take?):
CU IS ACTIVE IN PIC AND ANI. PUT HIM THROUGH TO LOCAL CARRIER TO UPDATE THEIR SYSTEM.

DEC.29.1998 7:23PM AFNI OUTSOURCING NO.661 P.16

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CUSTOMER COMPLAINT FORM - ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)

Fax to: Quality Assurance Department - GTECC @ 372/465-4867

Today's Date: 12/3/98 9:35:19 AM

CSR Name: JOSE PENA

Sales Channel: SNYDER OOF

Customer Type: CONSUMER - LONG DISTANCE ONLY

Complaint Type: UNAUTHORIZED SWITCH/SLAMMED

Misc. Complaint Type:

Customer Service Group: AFNI CSC

Customer First Name SIXTO

Customer Last Name: MORALES

Customer Address: 15024 SW 130 CT APT 19

City: MIAMI **State:** FL **Zip:** 33186

Customer BTN: 305-253-9298 **Customer WTN:** 305-253-9298

Social Security #:

If Available, Provide:

Birthdate:

Language: SPANISH

Market:

Product:

Pricing Plan(s):

CUSTOMER REQUESTED CALLBAC No **CUSTOMER REQUESTED ESCALATION:** No

PROBLEM: (Please be very specific and describe thoroughly):

CUS WAS UPSET BECAUSE HE REC A BILL FOR SERV HE DID NOT HAVE OR REQ

RESEARCH/RESOLUTION: (What action did you take?):

CANC THE ACC AND GAVE CR AND APOLOGISED ON BEHALF OF GTE

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 12/3 Time: 9:45 (AM) PM (Circle One)

CSR Name: Michael Fitzgerald

Sales Channel: SNYDER IB / (OOF) (Circle One)

Customer Type: (Circle One)
- ~~Consumer – Long Distance Only~~
- (Small Business-Long Distance Only)
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- Unauthorized Switch
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- (Slammed)
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- AFNI
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: RAY
Customer Last Name: JONES
Customer Address: 6 OAK CT.
City: ORMOND BEACH State FL. Zip 32174
Customer BTN: [redacted]-9167 Customer WTN (S): _____
Social Security #: [redacted]

If Available, Provide:
Birthdate: _____
Language: _____
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION (YES) / NO

PROBLEM: (Please be very specific and describe thoroughly):

This is Mr. Jones's business phone and he is very irate. He wants information as to how it was switched.

RESEARCH/RESOLUTION: (What action did you take?):

23420

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CUSTOMER COMPLAINT FORM - ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)

Fax to: Quality Assurance Department - GTECC @ 372/465-4867

Today's Date: 12/6/98 11:33:22 AM

CSR Name: WILLIAM SEIPEL

Sales Channel: SNYDER OOF

Customer Type: CONSUMER - LONG DISTANCE ONLY

Complaint Type: UNAUTHORIZED SWITCH/SLAMMED

Misc. Complaint Type:

Customer Service Group: AFNI CSC

Customer First Name LUIS

Customer Last Name: CUBA

Customer Address: 269 NE 90TH ST

City: MIAMI **State:** FL **Zip:** 33138

Customer BTN: 3057583451 **Customer WTN:** 3057583451

Social Security #:

If Available, Provide:

Birthdate:

Language: ENGLISH

Market:

Product:

Pricing Plan(s):

CUSTOMER REQUESTED CALLBAC Yes **CUSTOMER REQUESTED ESCALATION:** No

PROBLEM: (Please be very specific and describe thoroughly):

CUS JUST WANTS TO KNOW HOW HE GOT SWITCHED, HE IS NOT SURE IF HE SIGNED SOMETHING
AND HE WANTS TO KNOW WHEN THIS OCCURED

RESEARCH/RESOLUTION: (What action did you take?):

RERATED HIS BILL TO AT&T AND GOT HIM IN THE PROCESS TO SWITCH BACK

CUSTOMER COMPLAINT FORM - ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)

Fax to: Quality Assurance Department - GTECC @ 372/465-4867

Today's Date: 1/25/99 6:35:56 PM

CSR Name: Nella Hare-Righetti

Sales Channel: SNYDER OOF

Customer Type: CONSUMER - LONG DISTANCE ONLY

Complaint Type: UNAUTHORIZED SWITCH/SLAMMED

Misc. Complaint Type:

Customer Service Group: AFNI CSC

Customer First Name ROBERT

Customer Last Name: ALEXANDER

Customer Address: 1935 NE 201ST ST

City: NMB **State:** FL **Zip:** 33179

Customer BTN: 305-931-9386 **Customer WTN:** 305-931-9386

Social Security #:

If Available, Provide:

Birthdate:

Language: ENGLISH

Market:

Product:

Pricing Plan(s):

CUSTOMER REQUESTED CALLBAC Yes **CUSTOMER REQUESTED ESCALATION:** Yes

PROBLEM: (Please be very specific and describe thoroughly):

CUST HAD BEEN SWITCHED W/O AUTHORIZATION TO GTELD. CUST WOULD LIKE THE SWITCH INVESTIGATED TO SEE WHO DID IT. HE WOULD LIKE FOR SOMEBODY TO GET BACK TO HIM.

RESEARCH/RESOLUTION: (What action did you take?):

CUST WAS GIVEN CREDIT FOR ALL CALLS THAT GTELD PICKED UP

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CUSTOMER COMPLAINT FORM - ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)

Fax to: Quality Assurance Department - GTECC @ 372/465-4867

Today's Date: 1/24/99 2:08:09 PM

CSR Name: LISA ROSICH

Sales Channel: SNYDER OOF

Customer Type: CONSUMER - LONG DISTANCE ONLY

Complaint Type: UNAUTHORIZED SWITCH/SLAMMED

Misc. Complaint Type:

Customer Service Group: AFNI CSC

Customer First Name GUERLIN

Customer Last Name: MANGOS

Customer Address: 6636 NW 176TH TER

City: MIAMI **State:** FL **Zip:** 33015

Customer BTN: 3058234555 **Customer WTN:** 3058234555

Social Security #:

If Available, Provide:

Birthdate:

Language:

Market:

Product:

Pricing Plan(s):

CUSTOMER REQUESTED CALLBAC Yes **CUSTOMER REQUESTED ESCALATION:** No

PROBLEM: (Please be very specific and describe thoroughly):

CUS WAS SWITCHED UNAUTH, SHE HAS ALMOST A 50.00 BILL THAT WAS CREATED OVER
3 MONTHS, CUS IS NOT GOING TO PAY BILL UNTIL THERE IS PROOF OF AUTH SWITCH

RESEARCH/RESOLUTION: (What action did you take?):

I OFFERED TO RERATE BILL, CUS REFUSED TOLD HER I WOULD FILL OUT FORM AND SOMEOME
WOULD GET BACK WITH HER

23423

CUSTOMER COMPLAINT FORM - ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)

Fax to: Quality Assurance Department - GTECC @ 372/465-4867

Today's Date: 1/25/99 7:55:47 PM

CSR Name: LISA ROSICH

Sales Channel: SNYDER OOF

Customer Type: CONSUMER - LONG DISTANCE ONLY

Complaint Type: UNAUTHORIZED SWITCH/SLAMMED

Misc. Complaint Type:

Customer Service Group: AFNI CSC

Customer First Name DILENA

Customer Last Name: YVES

Customer Address: 3260 CHASE AVE

City: MAIMI BE **State:** FL **Zip:** 33140

Customer BTN: 3056738711 **Customer WTN:** 3056738711

Social Security #:

If Available, Provide:

Birthdate:

Language:

Market:

Product:

Pricing Plan(s):

CUSTOMER REQUESTED CALLBAC Yes **CUSTOMER REQUESTED ESCALATION:** No

PROBLEM: (Please be very specific and describe thoroughly):

CUS WAS SWITCHED UNAUTH, HE HAS BILL FOR ALMOST $400.00 HE REFUSES TO PAY UNTIL WE SEND HIM AUTH OF SWITCH,

RESEARCH/RESOLUTION: (What action did you take?):

I OFFERED TO RERATE BILL, HE REFUSED, TOLD HIM I WOULD FILL OUT FORM FOR HIM, BUT AT THIS TIME THE ACCOUNT IS CLOSED

CUSTOMER COMPLAINT FORM - ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)

Fax to: Quality Assurance Department - GTECC @ 372/465-4867

Today's Date: 1/21/99 5:50:55 PM

CSR Name: CHRIS WICKERT

Sales Channel: SNYDER OOF

Customer Type: CONSUMER - LONG DISTANCE ONLY

Complaint Type: UNAUTHORIZED SWITCH/SLAMMED

Misc. Complaint Type:

Customer Service Group: AFNI CSC

Customer First Name KATHLEEN

Customer Last Name: MITCHEL

Customer Address: 5300 BAKER AVE

City: ORLAND **State:** FL **Zip:** 32833

Customer BTN: 4075688514 **Customer WTN:** 4075688514

Social Security #:

If Available, Provide:

Birthdate:

Language:

Market:

Product:

Pricing Plan(s):

CUSTOMER REQUESTED CALLBAC Yes **CUSTOMER REQUESTED ESCALATION:** Yes

PROBLEM: (Please be very specific and describe thoroughly):

CUSTOMER WAS SWITCHED WITHOUT AUTHORIZATION

RESEARCH/RESOLUTION: (What action did you take?):

REFFERED CUSTOMER TO LEC TO SWITCH BACK, EXPLAIN PROCESS OF COMPLAINT FORM
AND REQUESTED A CALLBACK

Docket No. 990362-TI
Exhibit REP-18
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CUSTOMER COMPLAINT FORM - ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)

Fax to: Quality Assurance Department - GTECC @ 372/465-4867

Today's Date: 1/21/99 6:16:13 PM

CSR Name: CHRIS WICKERT

Sales Channel: SNYDER OOF

Customer Type: CONSUMER - LONG DISTANCE ONLY

Complaint Type: UNAUTHORIZED SWITCH/SLAMMED

Misc. Complaint Type:

Customer Service Group: AFNI CSC

Customer First Name TERRY

Customer Last Name: MCCLURE

Customer Address: 51 SANDPIPER CIR

City: ORMOND **State:** FL **Zip:** 32174

Customer BTN: 9046724542 **Customer WTN:** 9046724542

Social Security #:

If Available, Provide:

Birthdate:

Language:

Market:

Product:

Pricing Plan(s):

CUSTOMER REQUESTED CALLBAC Yes **CUSTOMER REQUESTED ESCALATION:** Yes

PROBLEM: (Please be very specific and describe thoroughly):

CUS WAS SWITCHED WITHOUT AUTHORIZATION, AND WOULD LIKE TO KNOW HOW THIS
SWITCH OCCURED.

RESEARCH/RESOLUTION: (What action did you take?):

RERATED BILL TO AT&T, FILED COMPLAINT FORM

CUSTOMER COMPLAINT FORM - ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)

Fax to: Quality Assurance Department - GTECC @ 372/465-4867

Today's Date: 1/19/99 3:18:14 PM

CSR Name: VERONICA RIGGS

Sales Channel: SNYDER OOF

Customer Type: CONSUMER - LONG DISTANCE ONLY

Complaint Type: UNAUTHORIZED SWITCH/SLAMMED

Misc. Complaint Type:

Customer Service Group: AFNI CSC

Customer First Name MANUEL

Customer Last Name: ECHEVARRIA

Customer Address: 426 SW 87CT

City: MIAMI **State:** FL **Zip:** 33174

Customer BTN: 305-559-1494 **Customer WTN:** 305-559-1494

Social Security #:

If Available, Provide:

Birthdate:

Language:

Market:

Product:

Pricing Plan(s):

CUSTOMER REQUESTED CALLBAC Yes **CUSTOMER REQUESTED ESCALATION:** Yes

PROBLEM: (Please be very specific and describe thoroughly):

CU WAS TAKEN OVER BY GTELD UNDER A NAME THAT HAS BEEN DECEASED

RESEARCH/RESOLUTION: (What action did you take?):

CU DEMANDS TO KNOW WHO PLACED THE ORDR BEFORE HE TAKES ANY ACTION, HAS NOT CANCELLED ACCOUNT AND HAS A REMAINING BALANCE OF 92.00

23427

Wednesday, January 20, 1999

CUSTOMER COMPLAINT FORM - ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)

Fax to: Quality Assurance Department - GTECC @ 372/465-4867

Today's Date: 1/18/99 6:15:56 PM

CSR Name: FRANSISCO COSSIO

Sales Channel: SNYDER OOF

Customer Type: CONSUMER - LONG DISTANCE ONLY

Complaint Type: UNAUTHORIZED SWITCH/SLAMMED

Misc. Complaint Type:

Customer Service Group: AFNI CSC

Customer First Name ELIZABETH

Customer Last Name: CASCALHEIR

Customer Address: 835 W LAS OLAS BLVD

City: FORT LA **State:** FL **Zip:** 33312

Customer BTN: 954-522-9162 **Customer WTN:** 954-522-9162

Social Security #: [redacted]

If Available, Provide:

Birthdate:

Language: ENGLISH

Market: SNYDER

Product: LONG DISTANCE

Pricing Plan(s):

CUSTOMER REQUESTED CALLBAC Yes **CUSTOMER REQUESTED ESCALATION:** Yes

PROBLEM: (Please be very specific and describe thoroughly):

CUST CLAIM NEVER REQ GTELD, WE BECOME ACTIVE 9/28/98, AND BE BEGAN TO PICK UP CALLS ON 10/11/98 AND THE CUSTOMER REFUSE TO PAY HE BILLS BECAUSE SHE NEVER REQ GTELD.

RESEARCH/RESOLUTION: (What action did you take?):

WE OFFERED THE CUSTOMER RE-RATE ALL THE CALLS ATT RATE, ALSO WE OFFERED TO CANCEL THE SERVICE TRUE HER LOCAL COMPANY, AT THE SEMA TIME THE CUSTOMER REFUSE ANY HELP, SHE ONLY ARE LOOKING FOR THE BILLS TO BE CANCEL.

JAN.22.1999 6:55PM AFNI CUSTSOURCING NO.095 P.36

CUSTOMER COMPLAINT FORM - ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)

Fax to: Quality Assurance Department - GTECC @ 372/465-4867

Today's Date: 1/16/99 4:33:47 PM

CSR Name: Nella Hare-Righetti

Sales Channel: SNYDER OOF

Customer Type: CONSUMER - LONG DISTANCE ONLY

Complaint Type: UNAUTHORIZED SWITCH/SLAMMED

Misc. Complaint Type:

Customer Service Group: AFNI CSC

Customer First Name STEVEN

Customer Last Name: LUPOLI

Customer Address: 4 BAY TREE CIR

City: ORM BCH **State:** FL **Zip:** 32176

Customer BTN: 904-441-8012 **Customer WTN:** 904-441-8012

Social Security #:

If Available, Provide:

Birthdate:

Language:

Market:

Product:

Pricing Plan(s):

CUSTOMER REQUESTED CALLBAC Yes **CUSTOMER REQUESTED ESCALATION:** Yes

PROBLEM: (Please be very specific and describe thoroughly):

CUST WAS SWITCHED W/O AUTHORIZATION AND WOULD LIKE TO KNOW HOW THE ORDER WAS ORIGINATED. THERE IS A SOCIAL SECURITY NUMBER ON THE ACCT THAT DOES NOT MATCH ANY ONE IN THE HOUSEHOLD.

RESEARCH/RESOLUTION: (What action did you take?):

RERATED CUST'S BILL WITH GTELD. ASSISTED CUSTOMER IS REMOVING GTELD FROM ACCT

CUSTOMER COMPLAINT FORM - ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)

Fax to: Quality Assurance Department - GTECC @ 372/465-4867

Today's Date: 1/15/99 10:00:46 AM

CSR Name: SHAYNA BERRY

Sales Channel: SNYDER OOF

Customer Type: CONSUMER - LONG DISTANCE ONLY

Complaint Type: UNAUTHORIZED SWITCH/SLAMMED

Misc. Complaint Type:

Customer Service Group: AFNI CSC

Customer First Name BELA

Customer Last Name: WACHTER

Customer Address: 2881 NW 47TH

City: LAUDERD **State:** FL **Zip:** 33313

Customer BTN: 954-731-1642 **Customer WTN:** 954-731-1642

Social Security #:

If Available, Provide:

Birthdate:

Language: ENGLISH

Market:

Product:

Pricing Plan(s):

CUSTOMER REQUESTED CALLBAC Yes **CUSTOMER REQUESTED ESCALATION:** Yes

PROBLEM: (Please be very specific and describe thoroughly):

CUST WAS TAKEN OVER, SHE WAS VERY UPSET, WE GOT HER SERVICE SWITCHED BACK
TO AT&T , SHE WANTS TO KNOW HOW SHE WAS SWITCHED TO GTELD THEIR WAS NO ACCOUNT BALANCE,

RESEARCH/RESOLUTION: (What action did you take?):

I GOT THE CUST PLACED BACK WITH AT&T AND I PLACED AN O ORDER TO HAVE HER REMOVED FROM THE SYSTEM

CUSTOMER COMPLAINT FORM - ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)

Fax to: Quality Assurance Department - GTECC @ 372/465-4867

Today's Date: 1/13/99 7:55:03 PM

CSR Name: BAMBI DUNN

Sales Channel: SNYDER OOF

Customer Type: CONSUMER - LONG DISTANCE ONLY

Complaint Type: UNAUTHORIZED SWITCH/SLAMMED

Misc. Complaint Type:

Customer Service Group: AFNI CSC

Customer First Name MICHELLE

Customer Last Name: ALBA

Customer Address: 1121 N. 17TH CT.

City: HOLLYW **State:** FL **Zip:** 33020

Customer BTN: 954-927-1681 **Customer WTN:** 954-927-1681

Social Security #: NA

If Available, Provide:

Birthdate:

Language: NA

Market: NA

Product: NA

Pricing Plan(s): NA

CUSTOMER REQUESTED CALLBAC Yes **CUSTOMER REQUESTED ESCALATION:** Yes

PROBLEM: (Please be very specific and describe thoroughly):

CUST WAS SLAMMED BY GTELD AND RECEIVED A GTELD BILL. CUST IS VERY UPSET AND WANTS TO FIND OUT HOW THE ORDER WAS PLACED. HER OR HER HUSBAND SAID THEY NEVER SPOKE WITH GTELD EVER. AND WANTS SOME ANSWERS AS TO WHY THIS HAPPENED.

RESEARCH/RESOLUTION: (What action did you take?):

TOLD CUST I WOULD FILE A COMPLAINT FORM TO HAVE THIS MATTER INVESTIGATED

O order? Credit?

23431

Wednesday, January 20, 1999

CUSTOMER COMPLAINT FORM - ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)

Fax to: Quality Assurance Department - GTECC @ 372/465-4867

Today's Date: 1/11/99 4:10:01 PM

CSR Name: CHRIS WICKERT

Sales Channel: SNYDER OOF

Customer Type: CONSUMER - LONG DISTANCE ONLY

Complaint Type: UNAUTHORIZED SWITCH/SLAMMED

Misc. Complaint Type:

Customer Service Group: AFNI CSC

Customer First Name CHARLES

Customer Last Name: POSTIS

Customer Address: 204 SW 8TH AV

City: HALLEND **State:** FL **Zip:** 33009

Customer BTN: 9544573542 **Customer WTN:** 954-457-3542

Social Security #:

If Available, Provide:

Birthdate:

Language:

Market:

Product:

Pricing Plan(s):

CUSTOMER REQUESTED CALLBAC Yes **CUSTOMER REQUESTED ESCALATION:** Yes

PROBLEM: (Please be very specific and describe thoroughly):
CUSTOMER WAS SWITCHED WITHOUT AUTHORIZATION

RESEARCH/RESOLUTION: (What action did you take?):
OFFERED TO RERATE CALLS & SUBMIT COMPLAINT FORM. CUSTOMER WAS UN INTERESTED IN RERATE, BUT WANTED COMPLAINT SUBMITED AS SHE PLANS TO CONSULT HER LAWYER

O ord ?

Tuesday, January 12, 1999

23432

JAN. 15. 1999 8:45AM AFNI OUTSOURCING NO. 973 P.8

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CUSTOMER COMPLAINT FORM - ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)

Fax to: Quality Assurance Department - GTECC @ 372/465-4867

Today's Date: 12/12/98 4:14:04 PM

CSR Name: ANGELA MENDOZA

Sales Channel: SNYDER OOF

Customer Type: CONSUMER - LONG DISTANCE ONLY

Complaint Type: UNAUTHORIZED SWITCH/SLAMMED

Misc. Complaint Type:

Customer Service Group: AFNI CSC

Customer First Name RONALD

Customer Last Name: KULICK

Customer Address: 2667 KEY LARGO LANE

City: FT. LAUD **State:** FL **Zip:** 33312

Customer BTN: 954-587-0331 **Customer WTN:** 954-587-0331

Social Security #:

If Available, Provide:

Birthdate:

Language:

Market:

Product:

Pricing Plan(s):

CUSTOMER REQUESTED CALLBAC Yes **CUSTOMER REQUESTED ESCALATION:** Yes

PROBLEM: (Please be very specific and describe thoroughly):

CUSTOMER SLAMMED AND VERY MAD ABOUT IT!!!WILL NOT PAY THE BILL UNTIL THERE IS AN EXPLANATION ABOUT THIS. WILL NOT LET ME RERATE HER CALLS TO AT&T EITHER.

RESEARCH/RESOLUTION: (What action did you take?):

PROMISED HER AN INVESTIGATION ABOUT THIS.

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CUSTOMER COMPLAINT FORM - ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)

Fax to: Quality Assurance Department - GTECC @ 372/465-4867

Today's Date: 12/12/98 3:22:47 PM

CSR Name: MICHAEL FITZGERALD

Sales Channel: SNYDER OOF

Customer Type: CONSUMER - LONG DISTANCE ONLY

Complaint Type: UNAUTHORIZED SWITCH/SLAMMED

Misc. Complaint Type:

Customer Service Group: AFNI CSC

Customer First Name JAY BRUCE

Customer Last Name: COLAN

Customer Address: 520 BRICKELL KEY

City: MIAMI **State:** FL **Zip:** 33132

Customer BTN: 305-377-1010 **Customer WTN:** 305-377-1010

Social Security #:

If Available, Provide:

Birthdate:

Language:

Market:

Product:

Pricing Plan(s):

CUSTOMER REQUESTED CALLBAC Yes **CUSTOMER REQUESTED ESCALATION:** Yes

PROBLEM: (Please be very specific and describe thoroughly):

CUST WAS SLAMMED. VERY IRATE

RESEARCH/RESOLUTION: (What action did you take?):

CLOSED BILLING AND CANCELLED ORDER IMMEDIATELY. CUST DOES NOT WANT TO BE SOLICITED BY GTE AGAIN. IS THREATENING TO FILE A COMPLAINT WITH THE FCC IF HE RECEIVES ANYTHING ELSE FROM GTELD.

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CUSTOMER COMPLAINT FORM - ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)

Fax to: Quality Assurance Department - GTECC @ 372/465-4867

Today's Date: 12/11/98 3:34:35 PM

CSR Name: ANGELA MENDOZA

Sales Channel: SNYDER OOF

Customer Type: CONSUMER - LONG DISTANCE ONLY

Complaint Type: UNAUTHORIZED SWITCH/SLAMMED

Misc. Complaint Type:

Customer Service Group: AFNI CSC

Customer First Name BLANCA

Customer Last Name: ZUNIGA

Customer Address: 1742 NW 5TH ST.

City: MIAMI **State:** FL **Zip:** 331254502

Customer BTN: 305-631-8778 **Customer WTN:** 305-631-8778

Social Security #:

If Available, Provide:

Birthdate:

Language:

Market:

Product:

Pricing Plan(s):

CUSTOMER REQUESTED CALLBAC Yes **CUSTOMER REQUESTED ESCALATION:** Yes

PROBLEM: (Please be very specific and describe thoroughly):

WANTS TO KNOW HOW IN THE WORLD WE ACCESSED THEIR ACCOUNT AND TOOK THEM OVER WITHOUT THEIR KNOWLEDGE. WANTS A CALL BACK TO LET THEM KNOW.

RESEARCH/RESOLUTION: (What action did you take?):

I ISSUED A CREDIT ON THEIR ACCOUNT TO RERATE THEIR CALLS TO AT&T; THEY ARE D/D AT THIS TIME, BUT THEY STILL WANT TO KNOW HOW THIS HAPPENED?

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CUSTOMER COMPLAINT FORM - ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)

Fax to: Quality Assurance Department - GTECC @ 372/465-4867

Today's Date: 12/10/98 12:49:26 PM

CSR Name: CHRIS WICKERT

Sales Channel: SNYDER OOF

Customer Type: CONSUMER - LONG DISTANCE ONLY

Complaint Type: UNAUTHORIZED SWITCH/SLAMMED

Misc. Complaint Type:

Customer Service Group: AFNI CSC

Customer First Name WILLIAM

Customer Last Name: BARR

Customer Address: 5660 BOYNTON BAY CIR

City: BOYNTO **State:** FL **Zip:** 33437

Customer BTN: 561-364-8499 **Customer WTN:** 561-364-8499

Social Security #:

If Available, Provide:

Birthdate:

Language:

Market:

Product:

Pricing Plan(s):

CUSTOMER REQUESTED CALLBAC Yes **CUSTOMER REQUESTED ESCALATION:** Yes

PROBLEM: (Please be very specific and describe thoroughly):

CUSTOMER SAIN HE HAD CALLED BEFORE TO COMPLAIN, APPROX 1 MONTH AGO, REQUESTED CALLBACK BUT DID NOT RECEIVE

RESEARCH/RESOLUTION: (What action did you take?):

SUBMIT NEW COMPLAINT FORM AND REQUEST CALLBACK

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CUSTOMER COMPLAINT FORM - ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)

Fax to: Quality Assurance Department - GTECC @ 372/465-4867

Today's Date: 12/10/98 2:45:29 PM

CSR Name: WILLIAM SEIPEL

Sales Channel: SNYDER OOF

Customer Type: CONSUMER - LONG DISTANCE ONLY

Complaint Type: UNAUTHORIZED SWITCH/SLAMMED

Misc. Complaint Type:

Customer Service Group: AFNI CSC

Customer First Name CIRILO

Customer Last Name: BRUITON

Customer Address: 13460 SW 3RD CT

City: FT LAUD **State:** FL **Zip:** 33325

Customer BTN: 9542369370 **Customer WTN:** SAME

Social Security #:

If Available, Provide:

Birthdate:

Language: ENGLISH

Market:

Product:

Pricing Plan(s):

CUSTOMER REQUESTED CALLBAC Yes **CUSTOMER REQUESTED ESCALATION:** No

PROBLEM: (Please be very specific and describe thoroughly):
CUS WANTS TO KNOW WHO SWITCH HIS LD AND WHY WE BILLED HIM

RESEARCH/RESOLUTION: (What action did you take?):
I FILLED OUT COMPLAINT FORM AND RERATED HIS BILL TO AT&T

23437

CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 12/10/98 **Time:** 4:00 **AM** (PM) **(Circle One)**

CSR Name: Erik Williams

Sales Channel: SNYDER **IF / OOF (Circle One)**

Customer Type: (Circle One)
(Consumer – Long Distance Only)
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)

Rudeness	Pricing/Calling Plan Issue	Other Complaint Types:
(Unauthorized Switch)	Rate Discrepancy	
Promotion Discrepancy	Misunderstanding	
Billing Issue	Payment Not Received	
Repair Problems	Provisioning	
Slammed	Cursed Customer	
Deceased Person		

Customer Service Group: (Circle One)

SITEL	(AFNI)
AFNI-TUCSON	BSC
THORNTON	PHONE MARTS
NIAGARA FALLS	REPAIR
ALPHARETTA	Other:

Customer First Name: Mario [redacted]
Customer Last Name: Delgado
Customer Address: 9647 NW 49th ct
City: Sorse **State** FL **Zip** 3335
Customer BTN: 954-746-9299 **Customer WTN (S):**
Social Security #:
If Available, Provide:
Birthdate:
Language:
Market:
Product:
Pricing Plan(s):

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) NO **CUSTOMER THREATENING ESCALATION** (YES) NO

PROBLEM: **(Please be very specific and describe thoroughly):**

Cus wants to know who switched service so he can contact the FCC

RESEARCH/RESOLUTION: (What action did you take?):

No action needed

23438

FORM-SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4944

Today's Date: 12-1-98 **Time:** 5:45 **AM (PM) (Circle One)**

CSR Name: Cheryl Culver

Sales Channel: SNYDER **IF/OOF (Circle One)**

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- (Unauthorized Switch/Slammed)
- Pricing/Calling Plan Issue
- Promotion Discrepancy
- *Rate Discrepancy*
- Order Dispute

Cursed Customer
Billing Issue
Provisioning
Deceased Person
Miscellaneous

Other Complaint Type: _____

Customer Service Group: (Circle One)
- (SITEL)
- WENTZVILLE
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- AFNI
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Harold
Customer Last Name: Miller
Customer Address: 11610 Briarwood Circle
City: Boynton Beach **State** FL. **Zip** _____
Customer BTN: 561-369-0589 **Customer WTN (S):** _____
Social Security #: _____
Birthdate: _____
Language: _____
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: ESCALATION-YES ESCALATION-NO (CALLBACK NEEDED-YES) CALLBACK NEEDED-NO

PROBLEM: (Please be very specific and describe thoroughly):

^ustomer switched to GTEL without his consent.

23439

RESEARCH/RESOLUTION: (What action did you take?):

FORM-SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4944

Today's Date: 12-14-98 **Time:** 3:05 **AM (PM) (Circle One)**

CSR Name: Tonya Von Willer

Sales Channel: (SNYDER) **IF/OOF (Circle One)**

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- (Unauthorized Switch/Slammed)
- Pricing/Calling Plan Issue
- Promotion Discrepancy
- Rate Discrepancy
- Order Dispute
- Cursed Customer
- Billing Issue
- Provisioning
- Deceased Person
- Miscellaneous

Other Complaint Type: _____

Customer Service Group: (Circle One)
- (SITEL)
- WENTZVILLE
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- AFNI
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Linda
Customer Last Name: Acosta
Customer Address: 821 Charingstone Court
City: Apopka **State** Florida **Zip** 32712
Customer BTN: 407-886-4432 **Customer WTN (S):** _____
Social Security #: _____
Birthdate: _____
Language: _____
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: ESCALATION-YES ESCALATION-NO (CALLBACK NEEDED-YES) CALLBACK NEEDED-NO

PROBLEM: (Please be very specific and describe thoroughly):

Customer says should have A.T.+T as her L.D. provider. She was switched w/o her permission. Wants to know who + why she was switched. Snyder order 12-3-98, effective 12-17-98 for Total Call, 360 Domestic.

RESEARCH/RESOLUTION: (What action did you take?):

23440

FORM-SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4944

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Today's Date: 12-14-98 **Time:** 4:20 **AM (PM) (Circle One)**

CSR Name: Darel Lindsay

Sales Channel: (SNYDER) **IF/(OOF) (Circle One)**

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- (Unauthorized Switch/Slammed)
- Pricing/Calling Plan Issue
- Promotion Discrepancy
- Rate Discrepancy
- Order Dispute
- Cursed Customer
- Billing Issue
- Provisioning
- Deceased Person
- Miscellaneous

Other Complaint Type: _____

Customer Service Group: (Circle One)
- (SITEL)
- WENTZVILLE
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- AFNI
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Samuel
Customer Last Name: Artiste
Customer Address: 6930 NW 186 St., Apt. 115
City: Hialeah **State** Florida **Zip** 33015
Customer BTN: 305-826-1787 **Customer WTN (S):** _____
Social Security #: _____
Birthdate: _____
Language: _____
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: ESCALATION-YES ESCALATION-NO (CALLBACK NEEDED-YES) CALLBACK NEEDED-NO

PROBLEM: (Please be very specific and describe thoroughly):

Received call saying "Thanks you" for changing to SITEL which he did not request. He wants A.T.&T. Snyder order placed 11-22-98, effective 12-9-98 for Total Call with 360 Domestic.

RESEARCH/RESOLUTION: (What action did you take?):

23441

CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 12-19-98 Time: 12:00 AM (PM) (Circle One)

CSR Name: Rachel A

Sales Channel: SNYDER IF (OOE) (Circle One)

Customer Type: (Circle One)
(Consumer) – Long Distance Only
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)
Rudeness
(Unauthorized Switch)
Promotion Discrepancy
Billing Issue
Repair Problems
(Slammed)
Deceased Person

Pricing/Calling Plan Issue
Rate Discrepancy
Misunderstanding
Payment Not Received
Provisioning
Cursed Customer

Other Complaint Types:

Customer Service Group: (Circle One)
SITEL
AFNI-TUCSON
THORNTON
NIAGARA FALLS
ALPHARETTA
(AFNI)
BSC
PHONE MARTS
REPAIR
Other:

Customer First Name: Fran
Customer Last Name: Thomas
Customer Address: 2905 NW 63rd St
City: Miami State FL Zip 33147
Customer BTN: 305-693-4114 Customer WTN (S):
Social Security #:
If Available, Provide:
Birthdate:
Language:
Market:
Product:
Pricing Plan(s):

23442

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION (YES) / NO

PROBLEM: (Please be very specific and describe thoroughly):

Customer got slammed and they want to know how it got switched and want documentation as proof that they switched it

RESEARCH/RESOLUTION: (What action did you take?): Told them to call local & cancel

DEC.29.1998 7:20PM AFNI OUTSOURCING NO.661 P.2

FORM-SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4944

Today's Date: 12-21-98 Time: 342 AM (PM) (Circle One)

CSR Name: Debra Johnston

Sales Channel: (SNYDER) IF/OOF (Circle One)

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- (Unauthorized Switch/Slammed)
- Pricing/Calling Plan Issue
- Promotion Discrepancy
- Rate Discrepancy
- Order Dispute
- Cursed Customer
- Billing Issue
- Provisioning
- Deceased Person
- Miscellaneous

Other Complaint Type: _____

Customer Service Group: (Circle One)
- (SITEL)
- WENTZVILLE
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- AFNI
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Maric

Customer Last Name: Alexander

Customer Address: 1935 N.E 201 st.

City: Maimi State FL. Zip 33179

Customer BTN: 305-931-9386 Customer WTN (S): _____

Social Security #: _____

Birthdate: _____

Language: _____

Market: _____

Product: _____

Pricing Plan(s): _____

Please Circle: ESCALATION-YES ESCALATION-NO (CALLBACK NEEDED-YES) CALLBACK NEEDED-NO

PROBLEM: (Please be very specific and describe thoroughly):

unauthorized switch to GTELD

RESEARCH/RESOLUTION: (What action did you take?):

23443

CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 12-26-98 Time: 11:16 ~~AM~~ (AM) PM (Circle One)

CSR Name: Dan Serradilla-Avery

Sales Channel: (SNYDER) IF / (OOF) (Circle One)

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- (Unauthorized Switch)
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- (Slammed)
- (Deceased Person)
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: SANDRA
Customer Last Name: MORGAN
Customer Address: 9620 SW. 48ST APT 113
City: MIAMI State FLORIDA Zip 33165
Customer BTN: 305-595-1111 Customer WTN (S): _____
Social Security #: [redacted] (which is not the real one)

If Available, Provide:
Birthdate: _____
Language: _____
Market: _____
Product: _____
Pricing Plan(s): _____

23444

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION (YES) / NO

PROBLEM: (Please be very specific and describe thoroughly):

Sandra Morgan died about a year ago. Her daughter call here and complaint about it. he said that her dead mom got slammed and she is getting the bills. She wants ~~some~~ someone to call her back at her home -> 207-594-1801.

RESEARCH/RESOLUTION: (What action did you take?):

Cancel account, credit the bill. Cust was very upset about how snyder (or for the GTE) slammed a dead person.

FORM-SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4944

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Today's Date: 12-29-98 **Time:** 7:00 **AM (PM)** (Circle One)

CSR Name: Kristy Ruiz

Sales Channel: (SNYDER) **IF/OOF (Circle One)**

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)

Rudeness		Cursed Customer	Other Complaint Type:
(Unauthorized Switch/Slammed)		Billing Issue	_____
Pricing/Calling Plan Issue		Provisioning	_____
Promotion Discrepancy		Deceased Person	_____
Rate Discrepancy		Miscellaneous	_____
Order Dispute			

Customer Service Group: (Circle One)

(SITEL)	AFNI
WENTZVILLE	BSC
THORNTON	PHONE MARTS
NIAGARA FALLS	REPAIR
ALPHARETTA	Other: _____

Customer First Name: Dennis
Customer Last Name: Chamberlain
Customer Address: 704 Davey Blvd.
City: Ft. Lauderdale **State** FL. **Zip** 33315
Customer BTN: 954.467 1649 **Customer WTN (S):** _____
Social Security #: _____
Birthdate: _____
Language: _____
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: ESCALATION-YES ESCALATION-NO (CALLBACK NEEDED-YES) CALLBACK NEEDED-NO

PROBLEM: (Please be very specific and describe thoroughly):

switched to GTE LD without authorization

RESEARCH/RESOLUTION: (What action did you take?):

23445

CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 01.05.99 **Time:** 9:11 **(AM) PM (Circle One)**

CSR Name: Veronica Riggs

Sales Channel: (SNYDER) **IF / (QOF)** (Circle One)

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- Unauthorized Switch
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- (Slammed)
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Tangryanne
Customer Last Name: Martins
Customer Address: 5913 NW 110th Ct
City: Miami **State** FL **Zip** 33178
Customer BTN: 305 592 9879 **Customer WTN (S):** 305 592 9879
Social Security #: N/A

If Available, Provide:
Birthdate:
Language:
Market:
Product:
Pricing Plan(s):

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION (YES) NO

PROBLEM: (Please be very specific and describe thoroughly):
Cl is extremely upset. Billed by CFE w/out his permission.

23446

RESOLUTION: (What action did you take?):
Cancelled serv + billing. Advised cu to contact local comp
Credited the bill for a rerate of 1312.54

FORM-SNYDER **CUSTOMER COMPLAINT**

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4944

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Today's Date: 1/9/99 **Time:** 4:21 **AM (PM) (Circle One)**

CSR Name: Sonya Branden

Sales Channel: SNYDER **IF/OOF (Circle One)**

Customer Type: (Circle One)
(Consumer – Long Distance Only)
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)
Rudeness
(Unauthorized Switch)
Promotion Discrepancy
Billing Issue
Repair Problems
Slammed
Deceased Person

Pricing/Calling Plan Issue
Rate Discrepancy
Misunderstanding
Payment Not Received
Provisioning
Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
SITEL
WENTZVILLE
THORNTON
NIAGARA FALLS
ALPHARETTA
(AFNI)
BSC
PHONE MARTS
REPAIR
Other: _____

Customer First Name: Catherine
Customer Last Name: Faulla
Customer Address: 2590 NW 98th Ave
City: Sunrise **State** FL **Zip** 33322
Customer BTN: 954/746-9189 **Customer WTN (S):** 954/746-9189
Social Security #:
Birthdate:
Language:
Market:
Product:
Pricing Plan(s):

Please Circle: (ESCALATION-YES) ESCALATION-NO (CALLBACK NEEDED-YES) CALLBACK NEEDED-NO

PROBLEM: (Please be very specific and describe thoroughly):
cust did not reg GTECC, out of town when order placed threatened to go to media

RESEARCH/RESOLUTION: (What action did you take?):
connected w/ AT+T + recated bill

23447

JAN. 16. 1999 8:47AM AFNI OUTSOURCING NO. 973 P. 16

FORM-SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4944

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Today's Date: 1-19-99 Time: 715 AM (PM) (Circle One,
Comp date 1-17-99
CSR Name: Wes Sheridan

Sales Channel: (SNYDER) IF/OOF (Circle One)

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- (Unauthorized Switch/Slammed)
- Pricing/Calling Plan Issue
- Promotion Discrepancy
- (Rate Discrepancy)
- Order Dispute
- Cursed Customer
- (Billing Issue)
- Provisioning
- Deceased Person
- Miscellaneous

Other Complaint Type: Wants Credit!!!

Customer Service Group: (Circle One)
- (SITEL)
- WENTZVILLE
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- AFNI
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Irene
Customer Last Name: Cuesta
Customer Address: 3104 Magdalene Forest Ct.
City: Tampa State Florida Zip 33618
Customer BTN: 813-963-0014 Customer WTN (S): _____
Social Security #: _____
Birthdate: _____
Language: _____
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: ESCALATION-YES (ESCALATION-NO) (CALLBACK NEEDED-YES) CALLBACK NEEDED-NO

PROBLEM: (Please be very specific and describe thoroughly):

Cust claims she was slammed
Snyder Order - TC, 360dem, in touch, TC ordered 1/7/99
eff. 1/14/99

RESEARCH/RESOLUTION: (What action did you take?):

23448

FC RM-SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4944

Today's Date: 1-26-99 Time: 8:30 (AM) PM (Circle One)
Complaint Date: 1-25-99
CSR Name: Monica Obregon

Sales Channel: ~~SNYDER~~ Unknown IF/OOF (Circle One)

Customer Type: (Circle One)
(Consumer – Long Distance Only)
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)
Rudeness
(Unauthorized Switch/Slammed)
Pricing/Calling Plan Issue
Promotion Discrepancy
Rate Discrepancy
Order Dispute
Cursed Customer
Billing Issue
Provisioning
Deceased Person
Miscellaneous
Other Complaint Type: Put on DNS List

Customer Service Group: (Circle One)
(SITEL)
WENTZVILLE
THORNTON
NIAGARA FALLS
ALPHARETTA
AFNI
BSC
PHONE MARTS
REPAIR
Other: _____

Customer First Name: James
Customer Last Name: Archambault
Customer Address: 1615 Miller Avenue
City: Clearwater State Florida Zip 33756
Customer BTN: 727-584-3539 Customer WTN (S): _____
Social Security #: _____
Birthdate: _____
Language: _____
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: ESCALATION-YES ESCALATION-NO CALLBACK NEEDED-YES (CALLBACK NEEDED-NO)

PROBLEM: (Please be very specific and describe thoroughly):

Just received call twice saying he has been taken off-STE LD. He has PIC restriction on Account. Unauthorized calls stopped. Customer placed on Do Not Solicit List.

RESEARCH/RESOLUTION: (What action did you take?):

23449

FORM-SNYDER **CUSTOMER COMPLAINT**

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4944

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Today's Date: 1-27-99 **Time:** _____ **AM (PM) (Circle One)**
Complaint Date: 1-26-99
CSR Name: Josie Serna

Sales Channel: ~~SNYDER~~ Unknown **IF/OOF (Circle One)**

Customer Type: (Circle One)
(Consumer – Long Distance Only)
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)
Rudeness
(Unauthorized Switch/Slammed)
Pricing/Calling Plan Issue
Promotion Discrepancy
(Rate Discrepancy)
Order Dispute

Cursed Customer
Billing Issue
Provisioning
Deceased Person
Miscellaneous

Other Complaint Type: _____

Customer Service Group: (Circle One)
(SITEL)
WENTZVILLE
THORNTON
NIAGARA FALLS
ALPHARETTA
AFNI
BSC
PHONE MARTS
REPAIR
Other: _____

Customer First Name: Oscar R.
Customer Last Name: Medrano
Customer Address: 890 NW 45th. Ave.
City: Miami **State** FL. **Zip** 33126
Customer BTN: 305-447-1026 **Customer WTN (S):** _____
Social Security #: _____
Birthdate: _____
Language: _____
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: ESCALATION-YES ESCALATION-NO (CALLBACK NEEDED-YES) CALLBACK NEEDED-NO

PROBLEM: (Please be very specific and describe thoroughly):
Received bill & says he doesn't have STE for his I.D provided

23450

RESEARCH/RESOLUTION: (What action did you take?):

FORM-SNYDER **CUSTOMER COMPLAINT**

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4944

Today's Date: 2-1-99 **Time:** 7:13 (AM) PM (Circle One)
Date of Complaint: 1-29-99
CSR Name: Lucy Jimenez

Sales Channel: ~~SNYDER~~ Unknown **IF/OOF (Circle One)**

Customer Type: (Circle One)
(Consumer – Long Distance Only)
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)
Rudeness
(Unauthorized Switch/Slammed)
Pricing/Calling Plan Issue
Promotion Discrepancy
Rate Discrepancy
Order Dispute

Cursed Customer
Billing Issue
Provisioning
Deceased Person
Miscellaneous

Other Complaint Type:
_____
_____
_____
_____

Customer Service Group: (Circle One)
(SITEL)
WENTZVILLE
THORNTON
NIAGARA FALLS
ALPHARETTA

AFNI
BSC
PHONE MARTS
REPAIR
Other: _____

Customer First Name: Felise
Customer Last Name: Anania
Customer Address: 35055 Dale Ave
City: Zephyrhills **State** Florida **Zip** 33541
Customer BTN: _____ **Customer WTN (S):** _____
Social Security #: _____
Birthdate: _____
Language: _____
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: ESCALATION-YES ESCALATION-NO (CALLBACK NEEDED-YES) CALLBACK NEEDED-NO

PROBLEM: (Please be very specific and describe thoroughly):
Customer claimed switched w/o consent.

RESEARCH/RESOLUTION: (What action did you take?):

23451

FORM-SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4944

Today's Date: 2-8-98 **Time:** 4:20 **AM (PM) (Circle One)**
Date of Complaint: 2-6-99
CSR Name: Wesley Alexander

Sales Channel: ~~SNYDER~~ Unknown **IF/OOF (Circle One)**

Customer Type: (Circle One)
(Consumer – Long Distance Only)
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)
Rudeness
(Unauthorized Switch/Slammed)
Pricing/Calling Plan Issue
Promotion Discrepancy
Rate Discrepancy
Order Dispute

Cursed Customer
Billing Issue
Provisioning
Deceased Person
Miscellaneous

Other Complaint Type: _____

Customer Service Group: (Circle One)
(SITEL)
WENTZVILLE
THORNTON
NIAGARA FALLS
ALPHARETTA

AFNI
BSC
PHONE MARTS
REPAIR
Other: _____

Customer First Name: Luis
Customer Last Name: Alvarez
Customer Address: 2454 Shelby Circle
City: Kissimmee **State** Florida **Zip** 34743
Customer BTN: 407-344-4375 **Customer WTN (S):** _____
Social Security #: _____
Birthdate: _____
Language: _____
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: ESCALATION-YES ESCALATION-NO (CALLBACK NEEDED-YES) CALLBACK NEEDED-NO

PROBLEM: (Please be very specific and describe thoroughly):

Tomer claims was switched to ATT (LD) without authorization & is looking for the agent or agency responsible. There is over 150 of ATT's phone calls that need to be taken off or resulted at the customer's PIC's date.

23452

RESEARCH/RESOLUTION: (What action did you take?):

FORM-SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4944

Today's Date: 2-17-99 **Time:** 820 (AM) PM (Circle One)

CSR Name: Patricia Harding

Sales Channel: (SNYDER) *IF/OOF (Circle One)*

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- (Unauthorized Switch/Slammed)
- Pricing/Calling Plan Issue
- Promotion Discrepancy
- Rate Discrepancy
- Order Dispute

Cursed Customer
Billing Issue
Provisioning
Deceased Person
Miscellaneous

Other Complaint Type: _____

Customer Service Group: (Circle One)
- (SITEL)
- WENTZVILLE
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- AFNI
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Shamuna
Customer Last Name: Malik
Customer Address: 372 Long Champ Circle
City: Tallahassee **State** Florida **Zip** 32308
Customer BTN: 850-894-1821 **Customer WTN (S):** _____
Social Security #: _____
Birthdate: _____
Language: _____
Market: _____
Product: _____
Pricing Plan(s): _____

23453

Please Circle: ESCALATION-YES (ESCALATION-NO) CALLBACK NEEDED-YES CALLBACK NEEDED-NC

PROBLEM: (Please be very specific and describe thoroughly):

Unauthorized PC Change made - Not aware of Change until they rec'd Conf letter stating Items to $200 & Worth of LD Calling - Who did this? Snyder Order ESP5-5, 240min, Icatt ord. 2/2 eff 2/11

RESEARCH/RESOLUTION: (What action did you take?):

FORM-SNYDER **CUSTOMER COMPLAINT**

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4944

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Today's Date: 3-1-99 Time: 6:58 AM (PM) (Circle One)
Date of Complaint: 2-26-99
CSR Name: Melissa Hoffman

Sales Channel: ~~SNYDER~~ Unknown IF/OOF (Circle One)

Customer Type: (Circle One)
(Consumer – Long Distance Only)
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)
Rudeness
(Unauthorized Switch/Slammed)
Pricing/Calling Plan Issue
Promotion Discrepancy
Rate Discrepancy
Order Dispute

Cursed Customer
Billing Issue
Provisioning
Deceased Person
Miscellaneous

Other Complaint Type: _____

Customer Service Group: (Circle One)
(SITEL)
WENTZVILLE
THORNTON
NIAGARA FALLS
ALPHARETTA

AFNI
BSC
PHONE MARTS
REPAIR
Other: _____

Customer First Name: Virginia
Customer Last Name: Payne
Customer Address: 11404 Cierus Pointe Drive
City: Tampa State Florida Zip 33625
Customer BTN: 813-920-9110 Customer WTN (S): _____
Social Security #: _____
Birthdate: _____
Language: _____
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: ESCALATION-YES ESCALATION-NO (CALLBACK NEEDED-YES) CALLBACK NEEDED-NO

PROBLEM: (Please be very specific and describe thoroughly):

Customer received a confirmation letter welcoming her back to STE; however, she never switched. Customer wants this researched & would like someone to call her back & tell her how this switch happened.

RESEARCH/RESOLUTION: (What action did you take?):

23454

FORM-SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4944

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Today's Date: 3-1-99 **Time:** 8:25 **AM (PM) (Circle One)**
Date of Complaint: 2-26-99
CSR Name: Romiro Constancio

Sales Channel: ~~SNYDER~~ Unknown **IF/OOF (Circle One)**

Customer Type: (Circle One)
(Consumer – Long Distance Only)
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)
~~Rudeness~~
(Unauthorized Switch/Slammed)
Pricing/Calling Plan Issue
Promotion Discrepancy
Rate Discrepancy
Order Dispute

Cursed Customer
Billing Issue
Provisioning
Deceased Person
Miscellaneous

Other Complaint Type: _____

Customer Service Group: (Circle One)
SITEL
WENTZVILLE
THORNTON
NIAGARA FALLS
ALPHARETTA

AFNI
BSC
PHONE MARTS
REPAIR
Other: _____

Customer First Name: Rosa
Customer Last Name: Abreu
Customer Address: 762 Tamiami Canal Rd.
City: Miami **State** Florida **Zip** 33144
Customer BTN: 305-264-4338 **Customer WTN (S):** _____
Social Security #: _____
Birthdate: _____
Language: _____
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: ESCALATION-YES ESCALATION-NO (CALLBACK NEEDED-YES) CALLBACK NEEDED-NO

PROBLEM: (Please be very specific and describe thoroughly):

Customer claims she was "slammed" without her permission & she does not appreciate how she was switched without her permission.

RESEARCH/RESOLUTION: (What action did you take?):

23455

FORM-SNYDER

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department -- GTECC @ 972/465-4944

Today's Date: 3-2-99 **Time:** 2:15 **AM (PM) (Circle One)**

CSR Name: Kristina Alexander

Sales Channel: ~~SNYDER~~ Unknown **IF/OOF (Circle One)**

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- (Unauthorized Switch/Slammed)
- Pricing/Calling Plan Issue
- Promotion Discrepancy
- Rate Discrepancy
- Order Dispute

Cursed Customer
- Billing Issue
- Provisioning
- Deceased Person
- Miscellaneous

Other Complaint Type: _____

Customer Service Group: (Circle One)
- (SITEL)
- WENTZVILLE
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- AFNI
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: ESTA
Customer Last Name: CARRillo
Customer Address: 915 N.E. 177th St.
City: Miami **State** Fl. **Zip** 33162
Customer BTN: 305-652-2262 **Customer WTN (S):** _____
Social Security #: _____
Birthdate: _____
Language: _____
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: ESCALATION-YES (ESCALATION-NO) CALLBACK NEEDED-YES CALLBACK NEEDED-N

PROBLEM: (Please be very specific and describe thoroughly):

Cust was switched w/o permission

RESEARCH/RESOLUTION: (What action did you take?):

23456

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-14-98 Time: 3:59 AM (PM) (Circle One)

CSR Name: Sonya M. Badge #:

Customer Name: Danny Young BTN: 941-378-3725

Address: 4627 Cronin Dr Apt.#:

City: Sarasota ST: FL ZIP: 34232 (INF?) OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust was switched w/o auth, filled out complaint on 9-30 and was never called back. Please call cust back by end of this week in the evening. She wants a name of who switched her. Please call her back this time. She was never called back last time. Call during evening hours.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10-19-98 TIME 3:30 AM ____ PM X

CSR NAME D. Fisher BADGE # 119172

CUSTOMER NAME Charles Bedden BTN # (727) 595-4916

ADDRESS refused APT # ____

CITY Clearwater/ St. Pete STATE FL ZIP CODE ____

IS RESPONSE NEEDED? (YES) / NO PROJECT? GTELD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Cust had phone transferred on 9123, told rep wanted to remain with same carrier (AT+T) but got switched to GTE. He wants to find out how and he specifically asked for a complaint to be filled out (He originally asked for our address wh. he does have) He also wanted me to add this quote from him in his complaint "if I did not have to speak to GTE, I would not, I despise this company" Thanks!

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

I transferred him to our Cust. Serv. for the credit he demanded

1998 - Ø

DMSS-N/O

RETURN CALL TO CUSTOMER

COMMENTS

23458

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-14-98 **Time:** 10:01 (AM) PM **(Circle One)**

CSR Name: Bajalia Louisa **Badge #:** _____

Customer Name: Robert Frantz **BTN:** 305 685 2351

Address: 13755 NW 4th Pl **Apt.#:** _____

City: Miami **ST:** FL **ZIP:** 33126 **INF?** **OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cx Misses paying auth. on the account doesn't want us, didn't ask for us & wants to know who did this

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-14 98 **Time:** 8:59 (AM) PM **(Circle One)**

CSR Name: Bayja VanGuilder **Badge #:** _____

Customer Name: Sandra Austin **BTN:** 407 816 0080

Address: 1030 Richman St **Apt.#:** A

City: Orlando **ST:** Fl **ZIP:** 32839 **INF?** (OOF?) **(Circle ~~One~~)**

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cx never gave authorization to switch to GTE. Cx wants to know who did it & what the authorization was.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-14-98 **Time:** 9:44 (AM) PM **(Circle One)**

CSR Name: Raquel Gonzalez **Badge #:** _____

Customer Name: Lindsay Ramsey **BTN:** 305-654-0233

Address: 18743 NW 10th Rd **Apt.#:** _____

City: Miami **ST:** FL **ZIP:** 33169 **INF? (OOF?)** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CW must have authorization for GTE. CW wants to know who have authorization on the account because he didn't.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-13-98 **Time:** 1:00 **AM** **PM** **(Circle One)**

CSR Name: Bayia VanGuna **Badge #:** _____

Customer Name: Charles Swartz **BTN:** 941-922-3641

Address: 6224 Lydebank Circle **Apt.#:** _____

City: Sarasota **ST:** FL **ZIP:** 34241 **INF?** **OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cw very unhappy that her service was taken and w/o her consent. She wants to know what the authorization was & who did it.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

Please call back

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-13-98 Time: 3:29 AM (PM) (Circle One)

CSR Name: Heather Brown Badge #: _____

Customer Name: Paul & Irene Manno BTN: 954-438-2011

Address: 11089 Nashville Dr. Apt.#: _____

City: Hollywood, FL ST: _____ ZIP: 33026 INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer no one in her household initiated order, & he would wants to know what happened.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/13/98. **Time:** 8:51 (AM) PM (Circle One)

CSR Name: Shelia Cramer **Badge #:**

Customer Name: Toya Dubin. **BTN:** 305-758-1110.

Address: 374 NE. 95th ST. **Apt.#:**

City: Miami **ST:** FL. **ZIP:** 33138-2714. **INF?** (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: (ESCALATION NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cx never auth switch. Mrs. Dubin also feels that she should not have to pay GTEL for chrgs. She says she doesn't mind paying the bill just not to GTEL. Explained to Mrs. Dubin that I can't forward the bill to AT+T. Mrs Dubin's service will be switched back to AT+T.

RESEARCH: (For Customer Service Use Only)

PIC = Active
ANI = Active.

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE Oct 13, 1998 TIME 12:30 AM ____ PM ✓

CSR NAME Rachael A. Mendez BADGE # 88379

CUSTOMER NAME Juergen Abendroth BTN # 561-848-9662

ADDRESS 300 34th St APT # ____

CITY West Palm Beach STATE Fl. ZIP CODE 33407

IS RESPONSE NEEDED? (YES) / NO PROJECT? Res. Ld.

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

He was unauthorized switched to G.T.E. from At&t on about Sept 28, 1998. He is mad but has already called At&t to switch back. He wants to know who did this and how will he be compensated for his time

Snyder- TC, 3 bedrm 9/23 Eff 10/08
No 1998

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

RETURN CALL TO CUSTOMER

COMMENTS

23465

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10-13-98 TIME 2:24 AM _____ PM ✓

CSR NAME Amber Garza BADGE # 11982

CUSTOMER NAME Alberto Cabrera BTN # 305-265-7446

ADDRESS 12844 S. West 48th Harris APT # _____

CITY Miami STATE FL ZIP CODE 33175-463

IS RESPONSE NEEDED? (YES) NO PROJECT? _____

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer was switched w/out her consent in sometime in August and she put a customer complaint in about a month ago and never received a response. Customer wants a response SOON!

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1998 - Ø

DMSS-N|O

RETURN CALL TO CUSTOMER

COMMENTS

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/13/98 **Time:** 6:00 **AM** (PM) **(Circle One)**

CSR Name: Jennifer Scott **Badge #:** 1641

Customer Name: Daniel R LaRoche **BTN:** 954-782-1728

Address: 2071 NE 1st Ter **Apt.#:**

City: Pompano Beach **ST:** FL **ZIP:** 33060 **INFI** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) / NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cx Slammed. Told Rep he did not want GTECD

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

23467

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/13/98 Time: 4:30 AM (PM) (Circle One)

CSR Name: SAKITA Badge #:

Customer Name: JESUS JULIA BTN:

Address: 1828 SW 21 TERRACE Apt.#:

City: MIAMI ST: FL ZIP: 33145 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CUSTOMER WAS SWITCHED TO GTE WITHOUT HER AUTHORIZATION AND WOULD LIKE TO KNOW WHO AUTHORIZED THE SWITCH, AND WOULD LIKE SOMEONE TO CONTACT HER AS SOON AS POSSIBLE

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-13-98 Time: ~~PRIOR~~ 1:30 AM PM (Circle One)

CSR Name: Heather Harrison Badge #: _____

Customer Name: Tamara Davidson BTN: 904-246-2331

Address: 255 10th Apt.#: _____

City: Jacksonville ST: FL ZIP: 32233 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Father of Tamara called & wanted to know how we got his daughters name & all the information on her. He said she wasn't even 16 yrs old yet. Father was very upset. I looked in OMF Snyder had placed the order I told Cust I would make this as cancelled & that I also would write up this complaint.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/12/98 **Time:** 12:19 **AM** (PM) **(Circle One)**

CSR Name: Sheila Cramer **Badge #:**

Customer Name: Jose Encinosa **BTN:** CBR 904-693-5884 305-607-7813

Address: 4960 Riviera Dr **Apt.#:**

City: Coral Gbls **ST:** FL **ZIP:** 33146-1739 **INF? OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu says he never spoke to anyone he also never auth any change in his service.

RESEARCH: (For Customer Service Use Only)

QMF = PIC active Ani active

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-12-98 **Time:** 3:34 **AM (PM)** (Circle One)

CSR Name: Erik Williams **Badge #:**

Customer Name: James Oliver **BTN:** 407-862-8660

Address: 336 Starbuck Run **Apt.#:**

City: Longwood **ST:** FL **ZIP:** 32779 **INF? (OOF?)** (Circle One)

PLEASE CIRCLE RESPONSE: (ESCALATION NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Was slammed by GTeLD cus requests that someone contact him about the problem

can contact during the day at 407-521-8660

RESEARCH: (For Customer Service Use Only)

QMF ANI: A PIC: A

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

23471

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/12/98 **Time:** 9:59 (AM) PM **(Circle One)**

CSR Name: Rodney Cummings **Badge #:** _____

Customer Name: Paul Berkow **BTN:** (941) 751-1323

Address: 5103 35th Street West **Apt.#:** _____

City: Bradenton **ST:** FL **ZIP:** 34210 (INF?) OOF? **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer is a GTE local customer, and he was slammed by GTELD. As a happy AT&T customer, he was very happy because he was getting 10¢ per minute. The customer said he talk to Erik, and had a complaint sheet filled out and forwarded to a supervisor, but he was not contacted within the prescribed time of 3 days (Erik's quote). Customer wants to speak with a supervisor ASAP.

RESEARCH: (For Customer Service Use Only)

_____

_____

_____

_____

_____

_____

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

_____

23472

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CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 10/12/98 **Time:** 1:50pm **AM** (PM) (Circle One)

CSR Name: Sonya Brawden **Badge #:** _____

Customer Name: Hector Barrero **BTN:** 407/568-3276

Address: 2023 Melville St **Apt.#:** _____

City: Orlando **ST:** FL **ZIP:** 32833 **INF?** (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer was slammed, tried to verify SSN was a different number. Please contact customer to inform why he was switched.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

23473

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-12-98 **Time:** 9:14 (AM) PM **(Circle One)**

CSR Name: Bayia VanBuren **Badge #:** _____

Customer Name: Manuel Carrido **BTN:** 305 867 1602

Address: 1055 Still water Dr **Apt.#:** _____

City: Miami **ST:** FL **ZIP:** 33153 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) **NOT NEEDED**

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

cu very angry. cu has called the FCC on this. cu must have gave auth. for us & wants to know how we got it.

RESEARCH: (For Customer Service Use Only)

QMF: PIC/ANI R/A

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/12/98 **Time:** 4:36 **AM** (PM) **(Circle One)**

CSR Name: André **Badge #:**

Customer Name: Jorge Bachman **BTN:** (305) 221-4863

Address: 15323 SW 52nd Terrace **Apt.#:**

City: Miami **ST:** FL **ZIP:** 33185 **INF? ~~OOF?~~**
(Circle One)

PLEASE CIRCLE RESPONSE: (ESCALATION NEEDED) NOT NEEDED

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu was slammed & wants a written explanation sent to him. If not he will call Newspaper.

RESEARCH: (For Customer Service Use Only)

Call AT&T to have his service switched

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-12-98 **Time:** 5:50 **AM** (PM) **(Circle One)**

CSR Name: Saul Flores **Badge.#:** _____

Customer Name: Rolando L. Machado **BTN:** 305-226-4124

Address: 1202 SW 140TH Place **Apt.#:** _____

City: Miami **ST:** FL **ZIP:** 33184 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu Never Auth GTELD, would like to know who Auth the switch

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/12/98 **Time:** 4:20 **AM (PM) (Circle One)**

CSR Name: Andre' **Badge #:** _____

Customer Name: Frank Morrison **BTN:** (305) 386-3180

Address: 11018 SW 147th Pl **Apt.#:** _____

City: Miami **ST:** FL **ZIP:** 33196 **INF? (OOF?)** **(Circle One)**

PLEASE CIRCLE RESPONSE: (ESCALATION NEEDED) NOT NEEDED

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu was slammed wants explanation & name of the person who switched him.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10-12-98 TIME 12:25 AM ___ PM ✓

CSR NAME RICK CASTANEDA BADGE # 87064

CUSTOMER NAME MARIA GARCIA BTN # 305 595 8466

ADDRESS OOF APT # ___

CITY ___ ST ___ ZIP ___

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)

Was switched w/o permission - Wants to know who authorized the change. Has already been switched back to AT&T.

DMSS-N/O
10 1998

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)

RETURN CALL TO CUSTOMER

BY WHOM ___ DATE ___ TIME ___

COMMENTS ___

23478

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/10/98 Time: 12:40 AM (PM) (Circle One)

CSR Name: Kelly M. Badge #: B5MKPH1

Customer Name: Deborah Bowman BTN: (305) 251-0435

Address: 9513 SW 189th Ter Apt.#:

City: Miami ST: FL ZIP: 33157 INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust was slammed by GTELD sales rep. She was also given a false S## on their account which is 263-46-2308. Customers husband called and said that they would pursue this issue w/ the FCC because they never auth. the switch.

RESEARCH: (For Customer Service Use Only)

The customer has been deactivated in QLT. I cancelled the bill in SOLVE & gave full credit for the bill which was $97.23. I also routed the bill to GTELD/CSC POB 3097 Bloom, IL 61702 to the Attn of myself & the customer would receive further bills & charges.

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

DATE TURNED IN: ~~10-9~~ 10-12-98 DATE COMPLETED: ___

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10-12-98 TIME 4:31 AM ___ PM ✓

CSR NAME Debra Johnston BADGE # 120220

CUSTOMER NAME Dennis Cines BTN # 9549219860

ADDRESS 580 SE 13th ~~Rd~~ APT # 101

CITY Dania STATE FL ZIP CODE 33004

IS RESPONSE NEEDED? YES / NO PROJECT? GTE long distance

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer was switched to GTE Long distance. Customer wants names of ~~that~~ who authorized this change to GTE Long distance.

Snyder-TC, 360 dom 9/20 Eff 10/05
11/0 1998

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

RETURN CALL TO CUSTOMER

COMMENTS

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/12/98 **Time:** 12:58 **AM** (PM) **(Circle One)**

CSR Name: M. Charles **Badge #:** _____

Customer Name: Nicole Gauthier **BTN:** 954-456-1129

Address: 200 Leslie Dr **Apt.#:** 723

City: Hallendale **ST:** FLA **ZIP:** 33009 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: (ESCALATION) NEEDED **NOT NEEDED**

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

cu slammed - not in town on that date
wants to know who it was that initiated switch
& authorized change

cu stated GTEld
* will recieve payment after she recieves call from
ca complaints w/ phone number so she can call someone back

RESEARCH: (For Customer Service Use Only)

find out how this happened

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

23481

ORIGINAL

BEFORE THE FLORIDA PUBLIC SERVICE COMMISSION

Initiation of Show Cause Proceeding Against GTE Communications Corporation. for Apparent Violation of Rule 25-4.118, F.A.C., Local, Local Toll, of Toll Provider Selection.	Docket No. 990362-TI Filed: January 9, 2001

SUPPLEMNTAL DIRECT TESTIMONY

OF

R. EARL POUCHER

On Behalf of the Citizens of the State of Florida

VOLUME II

Jack Shreve
Public Counsel

Office of Public Counsel
c/o The Florida Legislature
111 West Madison Street
Room 812
Tallahassee, FL 32399-1400

(850) 488-9330

Attorney for the Citizens
of the State of Florida

(Vol. 2 of 4)

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/12/98 **Time:** 4 00 **AM (PM)** (Circle One)

CSR Name: Michael Perez **Badge #:**

Customer Name: Eric & Viviana **BTN:** 305 380 6840

Address: 14729 SW 113 CN **Apt.#:**

City: MIAMI **ST:** FL **ZIP:** 33196 **INF? (OOF?)** (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cx was switched w/out authorization. He is very upset and wants to know who did it. He wants someone to call him. If no one does he will call me call me call. Please call him. I have already cancelled him and routed the bill to our office to be zeroed out.

RESEARCH: (For Customer Service Use Only)

QMF Reactivate

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

(Vol 2 of 4)
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23482

1

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10-9-98 TIME 3:36 AM PM

CSR NAME Melissa Chavez BADGE # 9841

CUSTOMER NAME Kevin Callaway BTN # 9419276456

ADDRESS 3324 Clark Rd APT #

CITY Sarasota ST FL ZIP 3423

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)

got switched w/out permission.

DMSS - 8
DMSS - N/O

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)

RETURN CALL TO CUSTOMER

BY WHOM _____ DATE _____ TIME _____

COMMENTS _____

23483

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

~~DAY'S~~ DATE 10-9-98 TIME 11:48 AM ✓ PM ___

CSR NAME Debra Johnston BADGE # 120220

CUSTOMER NAME José Fernandez BTN # 305 885 8842

ADDRESS 22 W. 32nd St APT # ___

CITY Hialeah ST FL ZIP 33012

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)
Customer wants to know how & why Norvill was switch to GTE Long Distance Customer sta (illegible) this was never authorized ~~the Name of~~

DMSS Ø
DMSS-N/O

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)

RETURN CALL TO CUSTOMER

BY WHOM ___ DATE ___ TIME ___

COMMENTS ___

23484

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10-9-98 TIME 12:00 AM ____ PM X

~~CSR~~ Sup: NAME Wendy Johnson BADGE # 88790

CUSTOMER NAME Allen Leichtman BTN # (305)-666-6395

ADDRESS OFC Address International Telephone Corp. 12257 SW 130th St APT # ____

CITY Miami STATE FL ZIP CODE 33186-6218

IS RESPONSE NEEDED? YES / NO PROJECT? GTE LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

CBR # - 305-238-1009 Received bill showing credit for changing over to GTE - Southern Bell is local carrier - Didn't receive GTE welcome letter Bill does show GTE Order # I6894498. VOR(1)

Need response ASAP - or will contact the FCC. Does not want GTE!! Would like to know how this happened & who did the change (if any tape - get) Also this unauthorized change was done to his Business Account as well!! Thanks - Wendy

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

DMSS - Ø

Snyder - TC, 3100 dom 9103 EFF 9/21

RETURN CALL TO CUSTOMER

COMMENTS

23485

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/9/98 **Time:** 6:48 **AM** (PM) **(Circle One)**

CSR Name: Jennifer C **Badge #:** 1587

Customer Name: Mario Galindo **BTN:** 305 559 8133

Address: 9375 Fountain Blue Blvd. [redacted] **Apt.#:** L308

City: Miami **ST:** FL **ZIP:** 33172 **INF?** **OOF?**
(Circle One)

PLEASE CIRCLE RESPONSE: (ESCALATION NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cx doesn't want to pay any bills because she thought she was still w/ Mci. Please inform her who authorized and when. Cancel service & billing.

Wants copy of authorization. System shows dif address and zip code than customers actual home address.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

DATE 10-8-98 TIME 10:56 AM ✓ PM ___

CSR NAME Sam Alonzo BADGE # 87362

CUSTOMER NAME James Pitchford BTN # 941 349-1493

ADDRESS 3924 Hamilton Club Cir APT # ___

CITY Sarasota ST FL ZIP 34242

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)

Customer wants to know who did unauthorize switch and why

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)

10/98
DMSS-N10

RETURN CALL TO CUSTOMER

BY WHOM ___ DATE ___ TIME ___

COMMENTS ___

23487

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10-8-98 TIME 9:00 AM ✓ PM _____

CSR NAME Jesse Alonzo BADGE # 87141

CUSTOMER NAME Mr. Donald Law BTN # 407-657-2130

ADDRESS 200 St Andrews Blvd APT # _____

CITY Winter Park STATE FL ZIP CODE 32792

COF IS RESPONSE NEEDED? (YES) / NO PROJECT? LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer was changed to GTE without permission. He wants to hear the tape of the sale. There was an order on 8/21 for TC 360D taken by Snyder

CBR#: 407-644-7617

No 1998

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Snyder- TC, 360Dom 9/21 eff 10/06

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10-8-98 TIME 7:36 AM ✓ PM _____

CSR NAME Jesse Alonzo BADGE # 87141

CUSTOMER NAME Robert Orlando BTN # 941-758-2101

ADDRESS 6116 Penny Ln. APT # _____

CITY Bradenton STATE FL ZIP CODE 34207

IS RESPONSE NEEDED? (YES) / NO PROJECT? Long Distance

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Was changed to GTE without permission. Would like to know who changed her service and why and also would like to complain that Someone did call her Sunday night @ 9:45pm

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Customer has been change back to MCI
No 1998
Snyder-TC, 360 dom 10/01 eff 10/16

RETURN CALL TO CUSTOMER

COMMENTS

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

DATE 10-8-98 **TIME** 10:54 **AM** ✓ **PM** ___

CSR NAME Sam Alonzo **BADGE #** ___

CUSTOMER NAME Miguel Alvarez **BTN #** 305 264-1799

ADDRESS 8200 NW 10th St Apt#4 **APT #** ___

CITY Miami **ST** FL **ZIP** 33126

PLEASE CIRCLE RESPONSE: (NEEDED) **NOT NEEDED**

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)

Customer wants to know who did un Authorize Switch and why

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)

No 1998
Snyder - TC, 360 dom 9/19 Eff 9/27

RETURN CALL TO CUSTOMER

BY WHOM ___ **DATE** ___ **TIME** ___

COMMENTS ___

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10-8-98 TIME 6:21 AM PM X
Sup:
CSR NAME Wendy Johnson BADGE # 88790
CUSTOMER NAME John Leore BTN # (305) 757-5187
ADDRESS 315 NE 98th St APT #
CITY Miami Shores ST Fl. ZIP 33138

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)
Southern Bell is local carrier
Didn't receive welcome letter but AT&T keeps calling & asking why he switched his services to GTE. He says he never authorized the change nor would he ever change.
Please contact Mr. Leore & let him know something if possible.
Wendy

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
Cust. already has PIC in place (Freese)
Snyder - TC, 240 min, ICPII 9/08 EFF 9/23
No 1998

P.S.
PLEASE FORWARD to Yvette
AFTER
4 'n
hrough.
305?
LOTS o' problems.

RETURN CALL TO CUSTOMER
BY WHOM DATE TIME
COMMENTS

23491

DATE TURNED IN: _____ DATE COMPLETED: ___

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10/8/98 TIME 6:50 AM ____ PM X

CSR NAME Dael Lindsay BADGE # ____

CUSTOMER NAME Sandra Zambrano BTN # 305-285-9495

ADDRESS 1271 SW 21st St. APT # ____

CITY Miami STATE FL ZIP CODE 33145

IS RESPONSE NEEDED? (YES) NO PROJECT? LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

called by GTE (Snyder-Dmss). Customer declined, but order was placed on 9/9 for 9/24 activation. ATT called customer & she is back, but would like situation looked into.

Nov 1998

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Snyder-TC, 360dom 9/09 Eff 9/24

RETURN CALL TO CUSTOMER

COMMENTS

23492

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/07/98 **Time:** 4:06 **AM** **PM** (Circle One)

CSR Name: Shelia Cramer **Badge #:** _____

Customer Name: Kimberly Deacha **BTN:** 305-1062-8023

Address: 1107 SW 49 ST **Apt.#:** _____

City: Miami **ST:** FL **ZIP:** 33135 **INF?** **OOF?** (Circle One)

PLEASE CIRCLE RESPONSE: **ESCALATION NEEDED** **NOT NEEDED**

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer's long distance was switched w/o her auth. Mrs. Deacha ~~was~~ would like for someone to contact her about this matter ASAP

RESEARCH: (For Customer Service Use Only)

OMF
PIC + ANI ACTIVE.

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/07/98. **Time:** 5:22. **AM (PM)** (Circle One)

CSR Name: Shelia Cramer **Badge #:** _____

Customer Name: Heather Sharp **BTN:** 407-843-0659

Address: 722 Florida ST. **Apt.#:** _____

City: Orlando **ST:** FL **ZIP:** 32806 **INF?** **OOF?** (Circle One)

PLEASE CIRCLE RESPONSE: **ESCALATION NEEDED** **NOT NEEDED**

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu was switched w/o her authorization.
~~Directed~~ Directed Cu to Local + Preferred Long distance co.

RESEARCH: (For Customer Service Use Only)

~~Active~~ Cu active in GMF (PIC + ANI)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

23494

OCT. 8.1998 10:07AM OFNI OUTSOURCING NO.995 P.3/28

CUSTOMER COMPLAINT

)RM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

)day's Date: 10-7-98 Time: 4:25 AM (PM) (Circle One)

)R Name: Tina F. Bathright Badge #:

stomer Name: Vincent Castro BTN: 954-481-3445

dress: 672 Siesta Key Cir Apt.#:

y: Deerfield Beach ST: FL ZIP: 33441 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

OBLEM: (Pls. be very specific and describe thoroughly.)

Cus wants to know where order orginated + Also wants to know who placed the order.

SEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

WHOM: DATE: TIME:

MMENTS:

23495

OCT. 8.1998 10:07AM AFNI OUTSOURCING

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/7/98 Time: 4:57 AM (PM) (Circle One)

CSR Name: Crystal Briggs Badge #: _____

Customer Name: Armando Diamond TN: 305-253-3208

Address: 10470 SW 124 St Apt.#: _____

City: Miami ST: FL ZIP: 33127 INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu was very upset and wants to know how we could place a order without her authorization Cu claims never spoke to anyone.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

OCT. 8.1998 10:07AM GENI OUTSOURCING NO.955 P.5/28

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10-07-98 TIME _____ AM _____ PM _____

CSR NAME Crystal Galindo BADGE # 88387

CUSTOMER NAME Lazaro Pino BTN # 305-558-3052

ADDRESS 3895 W. 9th St APT # _____

CITY ~~Hialeah~~ Hialeah STATE FL ZIP CODE 33012

IS RESPONSE NEEDED? (YES) NO PROJECT? GTE LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

The customer called in regards to his account because he was switched over to GTE without his authorization. He did get a letter and he was charged a switching charge, so that's how the customer found out that he had been switched over. The customer also contacted his local company which is Bell South and they also confirmed that he was with us for long distance. He's wanting for someone to contact him to tell him how he was switched over.

Snyder-TC, 3100 dom 8/25 eff 9/03

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

I apologized ~~about the situation~~ & mentioned to the customer that we could credit his account. I also informed him that he could contact his local company to switch back over.

11, 1998

RETURN CALL TO CUSTOMER

COMMENTS

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10/7/98 TIME 10:11 AM ✓ PM _____

CSR NAME Pamela Walker BADGE # 119730

CUSTOMER NAME Patricia Hurst BTN # 3053869622

ADDRESS 9310 SW 137 Ave APT # 920

CITY Miami STATE FL ZIP CODE 33186

IS RESPONSE NEEDED? YES / NO PROJECT? LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Bell South told customer that she had been switched 8/4/98 to ATE. She did not request this change and would like to find out who authorized this switch.

CBR - 9545701R1

DMSS - Ø

DMSS-N/O

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

RETURN CALL TO CUSTOMER

COMMENTS

Docket No. 990362-TI
Exhibit REP-18
Page 379

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/7/98 Time: 9:10 (AM) PM (Circle One)

CSR Name: John Simmons Badge #: BSMJHS3

Customer Name: Rivero, Joyce BTN: 305-227-0294

Address: 5779 SW. 135 Ave. Miami, FL. 33160 Apt.#:

City: MIAMI ST: FL ZIP: 33160 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly,)

The customer called in and was very upset that some one switch her to GTE without her permission. She said some one called her and asked her would she like to sign up she said NO. But who ever she talked to sign her up anyway. She ask for us to let her hear the recording. The person that signed her up is at SNYDER GENERAL IN language there code is: (T4CCKP5) This is who signed this lady up.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

23499

DATE TURNED IN: 10/6/98 DATE COMPLETED: ____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10/6/98 TIME 7:00 AM ____ PM ✓

CSR NAME Jon Underwood BADGE # 88360

CUSTOMER NAME Thomas Carter BTN # 805-238-1270

ADDRESS refused to give APT # ____

CITY ____ STATE ____ ZIP CODE ____

IS RESPONSE NEEDED? (YES) / NO PROJECT? GTELD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Was slammed on 9/15/98. Very angry & wants an immediate response as to why, how & who.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Tried to calm customer down. Explained we would investigate immediately.

No 1998

Snyder-TC, 3100 dom 9/09 eff 9/24

RETURN CALL TO CUSTOMER

COMMENTS

23500

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10-6-98 TIME 10 Am AM PM

CSR NAME George Chavarria BADGE # 87601

CUSTOMER NAME Alva CID BTN # 305-229 1118

ADDRESS OOF APT #

CITY ST ZIP

PLEASE CIRCLE RESPONSE: NEEDED NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)

Was switched without her authorization, she wants to know how GTE switched her service the Account is Listed under Miguel Solis GTE send her a bill under Alva CID 305-229-1118.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)

Snyder-TC, 360 dom 8/30 Eff 9/15

No 1998

RETURN CALL TO CUSTOMER

BY WHOM DATE TIME

COMMENTS

23501

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TOP ANTS

DATE October, 6, 1998 TIME 9:56 AM X PM

CSR NAME Rosa A Martinez BADGE # 88223

CUSTOMER NAME Caridad Cordoves BTN # 305 823 5639

ADDRESS 9849 NW 127 Terra APT #

CITY Hialeah Garden ST Fl ZIP 33018

PLEASE CIRCLE RESPONSE: NEEDED NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)
She was switched from AT&T to GTE
without Authorization

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
DMSS=0
Snyder-TC, 240min, ICPTT 9101 Eff 9/17

RETURN CALL TO CUSTOMER

BY WHOM _____ DATE _____ TIME _____

COMMENTS _____

23502

DATE LOGGED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

DATE 10-06-98 TIME 11:24 AM ✓ PM _____

CSR NAME Brandi BADGE # 87708

CUSTOMER NAME Blanche Dillon BTN # 941-349-8475

ADDRESS 263 Island Cir APT # _____

CITY Sarasota STATE FL ZIP CODE 34242

IS RESPONSE NEEDED? (YES) NO PROJECT? LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer was switched to GTE LD without authorization. Would like a callback letting her know who authorized this switch

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

No 1998
Snyder- TC, 360 dom 10/01 Eff 10/16

RETURN CALL TO CUSTOMER

COMMENTS

23503

DATE TURNED IN: 10/16/98 DATE COMPLETED: ___

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE October 16, 1998 TIME 5:25 AM ___ PM ✓

CSR NAME Cheryl Scott BADGE # 119217

CUSTOMER NAME Eduardo Rodriguez BTN # (305) 649-9329

OOF ADDRESS 3603 SW. 3rd St APT # ___

CITY Miami STATE FL ZIP CODE 33135

IS RESPONSE NEEDED? (YES/NO) PROJECT? GTE LD.

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Mr. Rodriguez was irate because he was switched to GTE LD w/o his consent. He wants to know who switched him, when and why. He didn't know he had GTE until we sent him a bill for $7.00.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

I tried to call his local carrier to change back to his current choice.

DMSS Ø

DMSS-N/O

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: 10/6/98 DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10/6/98 TIME 12:25 AM _____ (PM)

CSR NAME Sandra Cabrera BADGE # 119367

CUSTOMER NAME Armando Izquierdo BTN # (305) 836-9179

ADDRESS _____ APT # _____

CITY _____ STATE _____ ZIP CODE _____

IS RESPONSE NEEDED? (YES) / NO PROJECT? LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Cust says ~~he's~~ been switched to GTE LD w/out his authorization and wants to know who placed order & why the order was placed ; Cust wants to be called back by GTE's

11/0 1998

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

told cust to call LD company of his choice and sign up again, and that GTE will be calling w/in the ~~10~~ next few days (3 or 4 days)

DMSS-N/O

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: _____ TIME COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE Oct 16, 1998 TIME 1:00 AM _____ PM ✓

CSR NAME Amanda Gilley BADGE # 87959

CUSTOMER NAME Tony Casarez BTN # 813 855 7178
813 814 9043

ADDRESS 541 Lakeview Dr. APT # —

CITY Oldsmar STATE FL ZIP CODE 34677-4521

IS RESPONSE NEEDED? (YES) NO PROJECT? Long Distance

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Mr Casarez was switched to GTE w/out his authorization. He wants to know who authorized the switch. He would also like a letter of apology.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

I transferred him to LD billing and had them rerate the calls.

813-855-7178-No 1998 DMSS-N/O

813-814-9043-No 1998 DMSS-N/O

RETURN CALL TO CUSTOMER

COMMENTS

23506

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 6 Oct 98 TIME 8:22 AM ___ PM X

CSR NAME Cari Hanson BADGE # 142155

CUSTOMER NAME Gary [redacted] LEVESQUE BTN # 941-729-0509

ADDRESS 5425 80th Ave Circle East APT # ___

CITY [redacted] PALMETTO ST FL ZIP 34221

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

941-729-0509

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)

customer requests AT+T for long distance. keeps getting switched back to GTE it has happened 2 to 3 times. Customer wants to know who keeps switching her LD back to GTE. Customer does not wish to fill out a PIC restriction

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)

DMSSED
DMSS-NHO

RETURN CALL TO CUSTOMER

BY WHOM ___ DATE ___ TIME ___

COMMENTS ___

DATE TURNED IN: 10/6/98 DATE COMPLETED: ___

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10/6/98 TIME 3:30 AM ___ PM ✓

CSR NAME Jon Underwood BADGE # 88360

CUSTOMER NAME Lamercie Pierre BTN # 954-746-9288

ADDRESS 5966 NW 28th St APT # ___

CITY Sunrise STATE FL ZIP CODE 33313

IS RESPONSE NEEDED? (YES) NO PROJECT? GTELD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Was slammed w/out her knowledge or permission. Would like an answer as to how this happened & when.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Spoke to customer, assuring her would solve this problem.

10/6 1998

DMSS-N/O

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: _____ DATE COMPLETED: ____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10-6-98 TIME 7:31 AM ____ PM X

CSR NAME Janet - Sup BADGE # 87195

CUSTOMER NAME Louisa Gomez BTN # 813-684-0021

ADDRESS _____ APT # _____

CITY _____ STATE _____ ZIP CODE _____

IS RESPONSE NEEDED? YES / NO PROJECT? 4001

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Sept 30, was switched to GTELD w/o permission - wants to know who authorized - [redacted]

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

she said she has already called AT&T back

No 1998

DMSS-N/O

RETURN CALL TO CUSTOMER

COMMENTS

23509

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-06-98 Time: 4:24 AM PM (Circle One)

CSR Name: Neina F Badge #:

Customer Name: Theodore Wilson BTN: 941-383-4086

Address: 569 Bayview Dr Apt.#:

City: Longboat Key ST: FL ZIP: 34228 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer was activated with GTE CD on September 26, and did not request to do so. Customer had been contacted several times by GTECD Sales, but he declined the offer.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-06-98 Time: 2:45 AM (PM) (Circle One)

CSR Name: Neina F Badge #:

Customer Name: Barry Messer BTN: 941-383-7894

Address: 5010 Gulf of Mexico Dr Apt.#:

City: Longboat Key ST: FL ZIP: 34228 (INF?) OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: (ESCALATION NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer did not authorize GTECD, to switch her, she was very angry, and wants a reply as to who authorized the switch.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/06/98 Time: 11:27 (AM) PM (Circle One)

CSR Name: Sheila Cramer (Supervisor call) Badge #: _____

Customer Name: Mrs. Labelle. BTN: 944-923-8057 CBR 944 922- 6609

Address: 1931 Pierce ST. DUPL FRNT. Apt.#: _____

City: Hollywood ST: FL ZIP: 33020 4024 INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: (ESCALATION NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu would like to have someone contact her asap as possible. She mentioned that state of Florida has slamming laws. Please have someone contact this cu. Exp. it would be a week - week 1/2. Ani deactivated 10/06/98. Cu already placed order to go back to AT+T.

RESEARCH: (For Customer Service Use Only)

Active in QMF.

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

23512

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/06/98 **Time:** 1:39 **AM** (PM) **(Circle One)**

CSR Name: Sheila Cramer (supervisor call) **Badge #:** _____

Customer Name: William Patino **BTN:** 305-386-3262

Address: 11282 SW. 115T PL. **Apt.#:** _____

City: Miami **ST:** ~~FL~~ **ZIP:** 33196. **INF?** **(OOF?)** **(Circle One)**

PLEASE CIRCLE RESPONSE: (ESCALATION NEEDED) **NOT NEEDED**

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Mr. Patino was switched w/o his auth. Contacted Bellsouth & AT+T to get him switched back Mr. Patino did say he would be writing a letter to the FCC. concerning this "Slamming". Did walk & Mr Patino through all steps to get his service switched back.

RESEARCH: (For Customer Service Use Only)

BMF Active / Active.
Will place order to deactivate ani.

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

23513

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-6-98 **Time:** 9:09 **(AM) PM (Circle One)**

CSR Name: Jeanette Lee **Badge #:** _____

Customer Name: Buford Moore **BTN:** (305) 232-8589

Address: 8001 SW 160th St **Apt.#:** _____

City: Miami **ST:** FL **ZIP:** 33157 **INF? (OOF?)**
(Circle One)

PLEASE CIRCLE RESPONSE: (ESCALATION NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

This customer was taken over by GTE and wants to know why and how. Also, when the service was signed up, not only was the wrong person contacted but it was also signed up under his ex-wife's name who had not lived at this address for 6 years. CME shows he is active/active.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

23514

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-6-98 Time: 5:12 AM (PM) (Circle One)

CSR Name: B.X. L Badge #:

Customer Name: Maria Nunez BTN: 305 - 823 7358

Address: 1840 W. 62 St Apt.#:

City: Hialeah ST: FL ZIP: 33012 INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

(1) C.U was slam without authorization
(2) G.T.E still taking C.U calls.
(3) G.T.E changing rate out of the Y.O.F to Cuba.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

[redacted]

23515

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/06/98 **Time:** 3:21 pm **AM (PM)** (Circle One)

CSR Name: SAUL Flores **Badge #:**

Customer Name: SALVADOR VALDEZ **BTN:** (305)557-5997

Address: 1331 W 40 ST **Apt.#:**

City: Hialeah **ST:** FL **ZIP:** 33012 **INF? (OOF?)** (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu Never Auth GTELD. Would like to Know who Auth the switch.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/05/98 **Time:** 10:30 (AM) PM **(Circle One)**

CSR Name: Kelly McClay **Badge #:** B5MKPM1

Customer Name: Thomas Abbatiello **BTN:** (305) 255-5098

Address: 940 SW 172nd St. **Apt.#:** —

City: Miami **ST:** FL **ZIP:** 33157 **INF?** (OOF?) **(Circle One)**

Please Escalate!!

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Mr. Abbatiello called in very upset stating that he was slammed by GTE LD & he plans to file a formal complaint w/ the FCC. Not only was he slammed, he was given a false S.S.# on his acct. Fees applied for the actions of the sales rep. Mr. Abbatiello was shocked at these illegal & unethical practices by GTELD, especially since he holds stock w/ GTE. He is a very prominent business man w/ GE company, who intends to see this matter through.

RESEARCH: (For Customer Service Use Only)

C.S.G. acct in Q.M.F. Order 6666372 has a false S.S.#. Mr. Abbatiello's last 4 digits of his S.S.# is 1429. I placed a C-order in Solar and put the bill to my attn, and routed it back to GTELD CC, P.O. Box 3097, Bloomington, IL 61704.

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-05-98 **Time:** 10:26 (AM) PM (Circle One)

CSR Name: Sonia Estrada **Badge #:** CSC

Customer Name: Maria Barbeito **BTN:** 813-877 5897

Address: 2814 Comanche AV W. **Apt.#:**

City: Palm Harbor **ST:** FL **ZIP:** 34682 **INF? OOF?** (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer call very irate claims she never req. BTEL & she would like to be cancel & refuse to pay bill then call her local & switch back to her LD carrier. then cust request supervisor & tell her same thing she would like to investigate who & how she was switchd to this company.

RESEARCH: (For Customer Service Use Only)

QMF - Deactived 10/3/98

Sorces Orders.

MOS - She had bill for $60.99

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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Exhibit REP-18
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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/5/98 **Time:** 2:59 **AM (PM) (Circle One)**

CSR Name: ~~Marie Vola-Stein~~ Diane Burdett **Badge #:**

Customer Name: Marie Vola-Stein **BTN:** 954-746-8795

Address: 8661 ~~NW~~ NW 26th St **Apt.#:**

City: Sonrise **ST:** FL **ZIP:** 33322 **INF? (OOF?)** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Was switched to GTE LD without her authorization
I already put in O order and She's deactivated
and She has no charges - She wants to
not be contacted by GTE again

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

23519

DATE TURNED IN: 10-05-98 DATE COMPLETED: ___

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10-5-98 TIME 11:50 AM ✓ PM ___

CSR NAME Edith Dawson BADGE # 11951I—

CUSTOMER NAME Shirley Richmond BTN #: -561-586-25

ADDRESS 3589 S Ocean Blvd APT # ___

CITY Palm Beach STATE FL. ZIP CODE 33480

IS RESPONSE NEEDED? (YES) / NO PROJECT? ___

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

9/26/98 - Was switched without her authorization. - Has BellSouth for Local & Suppose to have MCI

Tape # 834710493

No 1998

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

DMSS - 9/28 DUE 10/7 CCF SNY T/C w/ 360 DOM

RETURN CALL TO CUSTOMER

COMMENTS

23520

DATE TURNED IN: [redacted] DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10-5-98 TIME 12:25 AM ____ PM X

CSR NAME Sylvia Arteaga BADGE # 8896

CUSTOMER NAME Joseph Gari BTN # 727-938-8018

ADDRESS 3319 Stonecrab Dr. APT # ____

CITY Holiday STATE FL. ZIP CODE 34691

IS RESPONSE NEEDED? (YES) / NO PROJECT? 4001 - DNIS 311

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Mr. Gari, wants to know who switch his service over to GTE L.D. His local CSC told him he was switch over on Sept. 8, 98 - Mr. Gari in between Sept 10th - 21st was in Germany so he wants to know who switch his service.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

No 1998

MISS-N/O

RETURN CALL TO CUSTOMER

COMMENTS

23521

DATE TURNED IN: 10-05-98 DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10/05/98 TIME 900 AM X PM _____

CSR NAME C. RONDON BADGE # 87937

CUSTOMER NAME GEORGE IVES BTN # 941-923-1808

ADDRESS 1411 KIMBERLY LN APT # _____

CITY SARASOTA STATE FL ZIP CODE 34231

IS RESPONSE NEEDED? (YES) / NO PROJECT? LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Cust was switched to GTE 9/0 he received a letter stating thank you for switching. Very upset wants to know who gave permission to switch

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

No 1998

DMSS - N/O

RETURN CALL TO CUSTOMER

COMMENTS

23522

DATE TURNED IN: 10-5-98 DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10-5-98 TIME 5:40 AM _____ PM ✓

CSR NAME W. Burton BADGE # 87136

CUSTOMER NAME George Salzberg BTN # 305-251-9454 / 305-233-6374

ADDRESS 15425 SW 78th Ct. APT # _____

CITY Miami STATE FL ZIP CODE 33157-234

9¢ minute IS RESPONSE NEEDED? (YES) NO PROJECT? GTELD

28Sep

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer's long distance service was changed without his permission. Service changed effective 9-28-98. His previous LD carrier charged 9¢ per minute and wants his changed at that rate.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

305-251-9454 – No 1998

305-233-6374 – No 1998

305-9454 # - N/O, 6374 # N/O

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10-5-98 TIME 11:20 AM ✓ PM _____

CSR NAME Jesse Alonzo BADGE # 87141

CUSTOMER NAME Gloria Melendez BTN # 407-854-9176

ADDRESS 144 St. Johns Cr APT # _____

CITY Fern Park STATE FL ZIP CODE 32750

IS RESPONSE NEEDED? (YES) NO PROJECT? LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Was changed to GTE LD without permisson wants credit for switching fee's and any LD charges that maybe charged to thier account through GTE. They also want to hear the tape to find out who gave the autherization to change account

No 1998

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

DMSS-N/O

RETURN CALL TO CUSTOMER

COMMENTS

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-6 **Time:** 4:50 **AM** (PM) **(Circle One)**

CSR Name: K Work **Badge #:** _____

Customer Name: Caridad Drago **BTN:** 305-559-1870

Address: 9321 SW 4th St., Apt. 224 **Apt.#:** _____

City: Miami **ST:** FL **ZIP:** 33174 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

cy did not request service, upset she has to contact her long distance & local carriers to make sure her service is correct

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

23525

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

)DAY'S DATE 10-1-98 TIME 11:24 AM √ PM ___

CSR NAME Dana Johnston BADGE # 120220

CUSTOMER NAME Jeneta Gil BTN # 954 785 4899

ADDRESS 2931 NE 1st Ave APT # ___

CITY Pompano Beach ST FL ZIP 33064

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)
Customer wants to know how & why she was switched to GTE long distance without permission.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
- 10/1998 -
Snyder - TC, 360dom 9/20 Eff 10/05

RETURN CALL TO CUSTOMER

BY WHOM ___ DATE ___ TIME ___

COMMENTS ___

23526

DATE TURNED IN: _____ DATE COMPLETED: ____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10-02-98 TIME 8:30 AM ~~PM~~ PM X

CSR NAME Janet - 3rd Sup BADGE # 87195

CUSTOMER NAME Nicholas Davies BTN # 305-895-55[illegible]

ADDRESS 1165 NE 127th St APT # _____

CITY North Miami STATE FL ZIP CODE 33161

IS RESPONSE NEEDED? (YES) / NO PROJECT? LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Mr Davies was switched to GTELD on Sept 1[illegible] without his permission. He wants to know ASAP who authorized this and said he will take legal action. He also wants to get the bill he will be receiving from us re rated at AT&T rates.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Apologized - he already switched back to AT&T - gave his customes service # to get bill re rated once it is received Dmss & Snyder-TC, 360dom 9/09 eff 9/24

RETURN CALL TO CUSTOMER

COMMENTS

23527

DATE TURNED IN: 10-2-98 DATE COMPLETED: 10-2-98

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10-2-98 TIME 11:35 AM ✓ PM

CSR NAME Stacy Reed BADGE # 120734

CUSTOMER NAME Irma Gonzalez BTN # (305) 251-1367

ADDRESS 19348 SW 118th Place APT # 801

CITY Miami STATE FL ZIP CODE 33177

IS RESPONSE NEEDED? (YES)/NO PROJECT? Customer Service

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer was transferred from AFNI to put in a complaint. She was switched from AT&T to GTE without her permission. She would like to know who authorized the change due to the she was on vacation. She is an OOF customer who wants GTE to credit the charge on her bill from her local carrier for switching LD carriers.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

All I could do is take the complaint as the customer requested. The order was not placed through Site1.

DMSS #

Snyder-TC, 360dom 9/08 Eff 9/23

RETURN CALL TO CUSTOMER

COMMENTS

23528

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10-2-98 TIME 8:15 AM _____ PM ✓

CSR NAME Roberta Vasquez BADGE # 119304

CUSTOMER NAME Linda & Aviles BTN # 407 251-1264

ADDRESS 327 Isle of Sky Circle APT # —

CITY Orlando STATE FL ZIP CODE 32828

IS RESPONSE NEEDED? (YES) / NO PROJECT? GTE LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Cust. says she never authorized or gave any verbal / written consent to switch to GTE LD. She has switched back to Sprint. She is very upset & wants to know & who did the switch & why.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Dnss ø
Snyder-TC, 360 dom 9/24 EFF 10/09

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: _____ DATE COMPLETED: 10/2/98

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10/2/98 TIME _____ AM _____ PM 2ish/pm

CSR NAME Heidi Allison BADGE # 14233

CUSTOMER NAME Faithe Costa BTN # 9544347270

ADDRESS 5231 SW 88 Terrace APT # _____

CITY Cooper City STATE FL ZIP CODE 33328

IS RESPONSE NEEDED? YES (NO) PROJECT? _____

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

She was slammed and was put on wait. There was a confirmation order and there wasn't an order put through. She doesn't want GTE.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Transfer, Bell South put her back.
DMSS #
Snyder-TC, 360 dom 9/24 Eff 10/09

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: _____ TIME COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10-2-98 TIME 7:35 AM _____ PM ✓

CSR NAME Roberta Vasquez BADGE # 119304

CUSTOMER NAME Eduardo Huergo BTN # 305 642-9705

ADDRESS 1390 SW 24th Ave APT # 4

CITY Miami STATE Fl ZIP CODE 33145

IS RESPONSE NEEDED? (YES / NO) PROJECT? GTELD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Cust. claims they never authorized to switch to us. They were very upset because their calls to Cuba were very high + said they wouldn't pay that GTE bill. They have switched back to AT+T + want to know who made the change.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

DMSS Ø
Snyder-TC, 240 min, ICP II 9/14 Eff 9/29

RETURN CALL TO CUSTOMER

COMMENTS

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

DAY'S DATE 10-2-98 TIME 4:03 AM__ PM /

CSR NAME Debra Johnston BADGE # 120220

CUSTOMER NAME Ms. Marilyn Kane BTN # 941 927 2311

ADDRESS 1718 Peregrine Pt. Dr. APT #

CITY Sarasota ST FL ZIP 34231

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)
Customer States she was switched without permission to GTE long distance. Mrs Kane stated she received a letter confirming she was with GTE long distance. The letter was addressed to the Kane residents but no letter box stated Daniel Rodriguez. Mrs Kane has sent the letter to the Sarasota Herald Tribune and spoke to Gregory ~~Hoyt~~ Evans in the business editor. Mrs Kane is requesting the tape pulled. Customer also stated that the local rep called 1-888# & the rep would not assist them

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
DMSS - Ø
Snyder - TC, 360 dom 9/15 cancelled - already on account

RETURN CALL TO CUSTOMER

BY WHOM _____ DATE _____ TIME _____

COMMENTS _____

23532

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/2/98 Time: 3:30 AM (PM) (Circle One)

CSR Name: Francisco X Cossio Badge #:

Customer Name: Erika, Mendoza BTN: (305) 829 4895

Address: 9050 NW 192 Ter Apt.#:

City: Hialeah ST: FL ZIP: 33015 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust never req GTELD, she was switch W/A
She req Information about how the Customer
was change to GTELD.

RESEARCH: (For Customer Service Use Only)

I order in Solar.
CMF is Deactivate 9/10/98
MSOS Bill for 6.49 we gave full Credit.

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

23533

Docket No. 990362-TI
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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-3-98 Time: 9:46 (AM) PM (Circle One)

CSR Name: Rick Goins Badge #: 1629

Customer Name: Carmen Ayala BTN: 305-261-8488

Address: 2950 SW. 77 Pl. Apt.#: —

City: Miami ST: FL ZIP: 33155 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: (ESCALATION NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Was slammed and just wanted to report and put a complaint on.

RESEARCH: (For Customer Service Use Only)

Order # 17155666
Changed Sept. 18

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

23534

DATE TURNED IN: 10-3-98 DATE COMPLETED: ____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE ____ TIME ____ AM ____ PM ____

CSR NAME Kenny Snyders BADGE # 57911

CUSTOMER NAME Marina Santiago BTN # (941) 353-3961

ADDRESS 641 9th SW APT # ____

CITY Naples STATE FL ZIP CODE 34117

IS RESPONSE NEEDED? YES / NO PROJECT? ____

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Switched to GTE without customers permission, customer like to switched back to ATT without having pay any charges to be switched ~~Back~~ back.

Snyder- TC 3600dom 9/20 Eff 10/05

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Told customer to call back to local phone company to be switched back to ATT. Customer would stay like for someone to give her a call for follow-up on the matter. Miss Q

RETURN CALL TO CUSTOMER

COMMENTS

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-03-98 **Time:** 9:37 (AM) PM **(Circle One)**

CSR Name: Veronica R. **Badge #:**

Customer Name: Peggy Sue Heller **BTN:** 561-793-2734

Address: 1171 63rd Sn N **Apt.#:**

City: West Palm Beach **ST:** FL **ZIP:** 33412 **INF?** **OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu Service was taken over w/out permission. Cu would really like to know how this happened.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/05/98 **Time:** 6:32 **AM** (PM) **(Circle One)**

CSR Name: Shelia Cramer **Badge #:**

Customer Name: Barbera Johnson **BTN:** (305) 233-6123

Address: 8465 SW 185 ST Reax **Apt.#:**

City: Miami **ST:** FL **ZIP:** 33197 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: (ESCALATION NEEDED) **NOT NEEDED**

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CU was switched w/o their authorization. Mrs. Johnson explained that her long distance service with Sprint, also had benefits through her insurance co. She also hopes these things will not be affected. Contacted Sprint & Bellsouth to get Mrs. Johnson back to Sprint

might. 7 p.m. 9½ / mic

7am 23.

RESEARCH: (For Customer Service Use Only)

[redacted] Pic - Active
Hnu - Active.

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

OMMENTS:

23537

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-5 **Time:** 1:57 **AM** (PM) **(Circle One)**

CSR Name: KWook **Badge #:**

Customer Name: Virginia Perez **BTN:** 305-445-8839

Address: 4600 SW 2nd Terr **Apt.#:**

City: Miami **ST:** FL **ZIP:** 33134 **INF?** (QOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

no phone calls from telemarketers, got talk to phone wants to switched without permission has a proxy - what she has on 1 line she has on the other - both the same

Please call Cus Homer

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE October 14, 1998 TIME 11:21 AM X PM _____

CSR NAME Becca Roan BADGE # 88877

CUSTOMER NAME Joseph Vitagliano BTN # 305 756-9429

ADDRESS 8860 N.E. 2nd Ave APT # 116

CITY Miami STATE FL ZIP CODE 33138

IS RESPONSE NEEDED? (YES) NO PROJECT? GTLD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer was switched to GTE 9-30-98. He is very irate! It was a Snyder order taken 9-15-98. Mr. Vitagliano wants to know how & who switched him to GTE & he wants some action taken. He is going to the FCC & making a formal complaint.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1998 - C
Snyder - TC, 360 dom 9/15 Eff 9/30

RETURN CALL TO CUSTOMER

COMMENTS

DATE TAKEN IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10-14-98 TIME 9:58 AM _____ PM X

CSR NAME Connie Contant BADGE # 120832

CUSTOMER NAME Ruben Sanvedra BTN # 305 822 3610

ADDRESS 2750 W. 26th St. APT # 202

CITY Hialeh STATE FL ZIP CODE 33016

IS RESPONSE NEEDED? (YES) NO PROJECT? Customer Service

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Mr. Sanvedra was changed to GTE without his consent. Is very upset this happened Would like to know how this happened?

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Apologized! Took ~~complaint~~ complaint.
1998-C
Snyder-TC, 240 min.; ICP II 10/04 Eff 10/19

RETURN CALL TO CUSTOMER

COMMENTS

23540

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-14-98 **Time:** 9:28 **(AM) PM (Circle One)**

CSR Name: Eric Williams **Badge #:**

Customer Name: Charles Odoms **BTN:** 954-485-2621

Address: 4940 NW 13th CT **Apt.#:**

City: Lauderdale LA **ST:** FL **ZIP:** 33313 **INF? OOE?** **(Circle One)**

PLEASE CIRCLE RESPONSE: (ESCALATION NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cus was slammed by GTCD says will not pay bill

contact Clementine Odoms
work # 954-894-7500

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-14 98 Time: 10:34 AM PM (Circle One)

CSR Name: Erik Williams Badge #:

Customer Name: James C Miles BTN: 407 - 322 - 8331

Address: 449 Silver Dewst Apt.#:

City: Lake Mary ST: FL ZIP: 32746 INF? (OOE)
(Circle One)

PLEASE CIRCLE RESPONSE: (ESCALATION NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cus was slammed by GTEC would like the matter investigated
contact Betty Miles
327-4931 (407)

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-14-98 Time: 11:38 (AM) PM (Circle One)

CSR Name: Jennette Lee Badge #:

Customer Name: Suzanne Bower BTN: (561)243-0488

Address: 791 Andrews Ave Apt.#:

City: Boyton Beach ST: FL ZIP: 33483 INF? (OF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

This customer's service was switched over to GTE without her authorization. One day she received a notice in the mail stating that she would be switched to GTE unless she responded within a certain amount of time. She called in within that time only to discover that her service had already been switched. She wants to know why and how this happened and by whom.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-15-98 **Time:** 8:36 (AM) PM **(Circle One)**

CSR Name: Deina-F **Badge #:** _____

Customer Name: Thomas MaleK **BTN:** 305-255-5221

Address: 7761 SW 134 TER **Apt.#:** _____

City: Miami **ST:** FL **ZIP:** 33156 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer did not authorize an order with GTEL, this number is not even in the customers name. Wants to know who authorized the order.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

8:15 J Meaghe

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/15/98 Time: 1:57 AM (PM) (Circle One)

CSR Name: Tanika Rodgers Badge #:

Customer Name: Arael Sosa BTN: 305-553-4092

Address: 11005 SW 80th St. Apt.#:

City: Sweetwater ST: FL ZIP: 33174 INF? (OOF?) (Circle ~~One~~)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cx was slammed by telemarketers

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

23545

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE October 15, 1998 TIME 3:57 AM PM ✓

CSR NAME Rosa A. Martinez BADGE # 88223

CUSTOMER NAME SARA CHAVEZ (JAVIER CHAVEZ) BTN # 305 235 5762

ADDRESS 13967 SW 161 Terrace APT #

CITY Miami ST Fl ZIP 33177

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)
She was switched without autorization, and She wants to Know who did it

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
I apologize and Transfered her to Cust. Servi Dept. Apni (Spanish) because she received a bill from us.
1998-0
DMSS-N/O

RETURN CALL TO CUSTOMER

BY WHOM _____ DATE _____ TIME _____

COMMENTS _____

23546

DATE TURNED IN: 10/15/98 DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

Jackie

TODAY'S DATE 10/15/98 TIME 11:30 (AM) _____ PM _____

CSR NAME ~~RAUL~~ ~~CRUZ~~ STACY CESTER BADGE # 142156

CUSTOMER NAME RAUL CRUZ BTN # 305/557/4681

ADDRESS 1075 WEST 68TH STREET APT # 106

CITY HIALEAH STATE FL ZIP CODE 33014

IS RESPONSE NEEDED? (YES) / NO PROJECT? CUSTOMER SERVICE

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

CUSTOMER SOLICITED TO GTE LD WITHOUT PERMISSION.
WANTS A RESPONSE AS TO HOW THIS OCCURRED

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

TOOL COMPLAINT FORM.
1998 - 0
DMSS-N/O

RETURN CALL TO CUSTOMER

COMMENTS

23547

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/15 Time: 2:00pm AM PM (Circle One)

CSR Name: ERIC F Badge #:

Customer Name: Wendy GRILLA BTN: 407-582-8171

Address: 2327 River Park Cir Apt.#: 1414

City: Orlando ST: FL ZIP: 32817 INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu was switched w/out authorization and would like to be contacted concerning how the order was placed. She has been taken out of the system Order was placed 9/22

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-15-98 Time: 2:35 AM (PM) (Circle One)

CSR Name: F. Chatwright Badge #:

Customer Name: Marcia Zecivitz BTN:

Address: 12000 N Bayshore Dr Apt.#: 209

City: N. M Beach ST: FL ZIP: INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cus upset because he was switched w/o permission. Would like an explanation of how this took place.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE Oct. 15, 1998 TIME 6:16 AM _____ PM ✓

CSR NAME Sara Chavez BADGE # _____

CUSTOMER NAME Julie Lelievre BTN # (954) 430-9113

ADDRESS 3791 N.W. 78th Ave APT # 26

CITY Hollywood STATE FL ZIP CODE 33024

IS RESPONSE NEEDED? (YES) / NO PROJECT? Long Distance After 6:00 pm.

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer was Changed to GTE without her permission. She wants to know who it was that Changed her over. Please give her a call back after 6:00 pm.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

DMSS - Order on 9-24-98 by Snyder for Total Call 360 acct. or order under Vasquez.

1998 - 0

Snyder - TC, 360 dom 9/24 Eff 10/09

Name on order Peter & Gloria Vazquez

RETURN CALL TO CUSTOMER

COMMENTS

23550

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10-15-98 TIME _____ AM _____ PM _____

CSR NAME Deborah Fisher BADGE # 119172

CUSTOMER NAME Lillian Elonda BTN # (305) 665-6202

ADDRESS 4200 University Dr APT # _____

CITY Coral Gables STATE FL ZIP CODE 33146

IS RESPONSE NEEDED? (YES) NO PROJECT? _____

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

~~A~~ Cust received first bill notifying her that she was switched to GTEFD w/o her auth. She would like to know how & why.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1998-0
Snyder-TC, 360 dom 9/09 eff 9/24

RETURN CALL TO CUSTOMER

COMMENTS

23551

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-15-98 **Time:** 10:29 **(AM) PM (Circle One)**

CSR Name: Erik Williams **Badge #:** _____

Customer Name: Luis Fernandez **BTN:** 305-383-4658

Address: 13734 SW 107th ter **Apt.#:** _____

City: Miami **ST:** FL **ZIP:** 33186 **INF? (OOF?)**
(Circle One)

PLEASE CIRCLE RESPONSE: (ESCALATION NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cus shorted by Gtel0 while on vacation, said will contact the FCC, would be keen who put the order in

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-15-98 Time: 3:52 AM (PM) (Circle One)

CSR Name: Jeanette Lee Badge #:

Customer Name: Thomas Christian BTN: (305) 882-6912

Address: 6671 SW 137th Ct Apt.#:

City: Miami ST: FL ZIP: 33183 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

This customer's service was switched to GTE, w/out his knowledge - he was never contacted to be asked if he would like to switch - he wants to know why and how it was switched if he never even knew about it.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-16-98 **Time:** 9:53 (AM) PM (Circle One)

CSR Name: Augusta Hoffstatter **Badge #:** _____

Customer Name: Joel, Duran **BTN:** 305-991-9511

Address: 13858 SW 155 Ter **Apt.#:** _____

City: Miami **ST:** FL **ZIP:** 33197 **INF?** (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer wants to know how she got switched without her permission. She doesn't want GTE.

RESEARCH: (For Customer Service Use Only)

Cust needs a call back with the answer to the problem

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

DATE TURNED IN: _____ TIME COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9-16-98 TIME 6:45 AM ✓ PM _____

CSR NAME Ellen Hartlaub BADGE # 87068

CUSTOMER NAME Hermaine Pollard BTN # 305-255-6629

ADDRESS 15325 Southwest 99th Ave APT # _____

CITY Miami STATE FL ZIP CODE 33197

IS RESPONSE NEEDED? (YES) NO PROJECT? GTE KD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Cust. has unauthorized charges to GTE KD called on for the 2x to be removed. Cust called World-Com and had this # switched back. Cust had bill for $53.00. Her local carrier is Bell South.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Called OOF billing

1998-0

Snyder-TC, 360 dom 8/10-cancelled-pic restr.

RETURN CALL TO CUSTOMER

COMMENTS

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-16-98 Time: 1:48 AM (PM) (Circle One)

CSR Name: _____ Badge #: _____

Customer Name: Scott T Cohen BTN: 305-386-5332

Address: 1811 SW 78th St Apt.#: _____

City: Miami ST: FL ZIP: 33183 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cus would like to know what why his service was switched. Very upset w/ATT

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

23556

Spanish

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10-16-98 TIME 3:20 AM ____ PM ✓

CSR NAME Silvester R Perez BADGE # 119293

CUSTOMER NAME (Alfredo) Felipe F. Perez BTN # (305) 893-9973

ADDRESS 12875 NE 3rd Ave APT # ——

CITY N Miami STATE FL ZIP CODE 33161

IS RESPONSE NEEDED? (YES) NO PROJECT? ____

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Cust would like to know who switched him w/out his permission. And of course he wants credit for the calls he made while using GTE LD.

PRE=05483

(COF) Southern Bell Tel 41871 } 09/26/9
CO. 42244
(SNYDER) 44762 } DD=10/0

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1998-0
Snyder-TC,300dom 9/23 EFF 10/08

RETURN CALL TO CUSTOMER

COMMENTS

23557

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-19-98 **Time:** 8:50 (AM) PM (Circle One)

CSR Name: Michelle Tomlinson **Badge #:** _____

Customer Name: Florence Bastien **BTN:** 561-684-3786

Address: 960 Lake Victoria **Apt.#:** A

City: West Palm Beach **ST:** FL **ZIP:** 33411 **INF?** (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

cu LD was changed w/o her authorization
cu wants to know who authorized the
change. Release call ASAP cu will be
moving.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-17-98 Time: 11:50 (AM) PM (Circle One)

CSR Name: Rachel Badge #:

Customer Name: Diane Aguilar BTN: 561-278-3432

Address: 239 NW 1st Ave Apt.#:

City: Delray Beach ST: FL ZIP: 33444 INF? (QOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer was slammed by GTE and wants an explanation. They want to know how the order was placed.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-17-98 Time: 6:40 AM (PM) (Circle One)

CSR Name: Rachel A. Badge #:

Customer Name: Herbert Isaacs BTN: 561-496-6661

Address: 16742 Rose Apple Dr Apt.#:

City: Delray Beach ST: FL ZIP: 33445 INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Switched to GTE w/o permission, he wants an explanation and a letter of apology.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10-17-98 TIME 4:19 AM PM ✓

CSR NAME Shawn Moser BADGE #

CUSTOMER NAME Leslie Donahay BTN # 305 75 95 709

ADDRESS 582 NE 107 St APT #

CITY Miami ST FL ZIP 33161

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)
Customer was switched to GTEL without her approval. She wishes to know who authorized the change of ~~the~~

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
1998-0
Snyder-TC, 360 dom 10/04 Eff 10/19

RETURN CALL TO CUSTOMER

BY WHOM DATE TIME

COMMENTS

23561

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-25-98 **Time:** 4:20 **AM (PM)** (Circle One)

CSR Name: Dan Serradilla **Badge #:**

Customer Name: EMILIO PALMA **BTN:** 305-388-8723

Address: 7233 SW. 133 PL **Apt.#:**

City: MIAMI **ST:** FL **ZIP:** 33183 **INF? (OF?)** (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CUST WAS CHANGED TO GTE L/D W/O AUTHORIZATION. HE IS VERY UPSET AND A FOLLOW-UP, HE WANTS TO KNOW HOW DID THIS ~~AND~~ HAPPEND, AND WHO DID IT.

RESEARCH: (For Customer Service Use Only)

I ORDER: 9-16-98. CUST IS "A" SINCE 9-18-98, BOTH PIC/ANI BILL FOR $46.79

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/26/98 Time: 4:04 AM (PM) (Circle One)

CSR Name: Andrd L. Heavens Badge #:

Customer Name: Reynerio Chavez BTN: 305-757-0286

Address: 8050 NW Miami Ct Apt.#:

City: Miami ST: FL ZIP: 33150 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu was switched to GTE. She says she will not pay bills unless someone tells her who switched her. & offered to re-rate to MCI rates. She refused until she is called back.

RESEARCH: (For Customer Service Use Only)

Deactivated service already. O-Order done to stop billing

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-26-98 **Time:** 1:49 **AM** (PM) **(Circle One)**

CSR Name: Deina. F **Badge #:** _____

Customer Name: Janet S. Antenucci **BTN:** 305-252-1952

Address: 15962 SW 78th PL **Apt.#:** _____

City: Perrine **ST:** FL **ZIP:** 33157 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer had her long distance switched to [redacted] without her authorization, the information is coming to her home in her deceased husband's name. Customer wants to know who authorized the order.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

23564

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-26-98 Time: 12:28 AM (PM) (Circle One)

CSR Name: Sonya M. Badge #: _____

Customer Name: Jonah Burr BTN: 305-538-1407

Address: 2931 Sheridan Ave Apt.#: _____

City: Miami Beach ST: FL ZIP: 33138 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: (ESCALATION NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust. was switched w/o authorization and would like info of who put in the order. Please call cu. back w/in 5 days.

RESEARCH; (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-26-98 **Time:** 7:45 **AM** (PM) **(Circle One)**

CSR Name: SAUL FLORES **Badge #:** _____

Customer Name: ~~LEANDRO~~ LANTIGUA LEANDRO **BTN:** 305-278-7186

Address: 15330 SW 134 PL **Apt.#:** _____

City: MIAMI **ST:** FL **ZIP:** 33190 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CU Never Auth GTELD. Would like to know who Auth the switch. will not pay Bill until she is told who ~~was~~ Auth GTELD

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-26-98 Time: 5:19 AM (PM) (Circle One)

CSR Name: Sonya M. Badge #:

Customer Name: Alberique Dorleus BTN: 954-941-9646

Address: 2000 NW 5th Ter Apt.#:

City: Pompano Beach ST: FL ZIP: 33060 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust did not sign up for GTEL.D and wants to know where we got this info from, please call Cust. with this info.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

23567

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/26 Time: 11:10 (AM) PM (Circle One)

CSR Name: Erie F Badge #:

Customer Name: Jennifer Vogl BTN: 941-346-3966

Address: 4910 Commonwealth Dr Apt.#:

City: Sarasota ST: FL ZIP: 34242 (INF?) OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION ~~NEEDED~~ NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cx claims they did not req gteld and the would like to know who placed the order.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-26-98 Time: 11:34 (AM) PM (Circle One)

CSR Name: LAJUNE SHAW Badge #:

Customer Name: SANDRA WERNES BTN: 561-278-5176

Address: 950 LAVERS CIR. Apt.#:

City: DEL RAY Beach ST: FL ZIP: 33444 INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: (ESCALATION NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Upset About being pick-up by GTELD Without Approval

RESEARCH: (For Customer Service Use Only)

Please CALL MR. NGUYEN (Work# 561-278-5615)

EASTERN STANDARD TIME

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-26-98 **Time:** 3:47 **AM** (PM) **(Circle One)**

CSR Name: Veronica Riggs **Badge #:** _____

Customer Name: Samuel Berkowitz **BTN:** 305 667 3126

Address: 6601 SW 80th St **Apt.#:** Suite 112

City: Miami **ST:** FL **ZIP:** 33143 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Mr. Berkowitz is very upset! His service was switched to GTE → without his permission. He demands an explanation and wants action taken. Plans to follow with a lawsuit.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-26-98 Time: 3:54 AM (PM) (Circle One)

CSR Name: Aaron Doty Badge #:

Customer Name: Jean Wright BTN: 305+378-8626

Address: 12255 SW 195th TER Apt.#:

City: Miami ST: FL ZIP: 33177 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Wants to know how she was switched

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-26-98 **Time:** 2'30 **AM** (PM) **(Circle One)**

CSR Name: Aaron Doty **Badge #:** _____

Customer Name: James Lewis **BTN:** 407-331-6256

Address: _____ **Apt.#:** _____

City: Altamonte Springs **ST:** FL **ZIP:** 32701 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Wants to know he was set up on GTELD

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-26-98 **Time:** 2:00 PM **AM** (PM) **(Circle One)**

CSR Name: Aaron Doty **Badge #:** _____

Customer Name: Mary C Burke **BTN:** 941-957-4858

Address: 3376 Ramblewood Dr S **Apt.#:** _____

City: Sarasota **ST:** FL **ZIP:** 34237 (INE?) **OOF?**
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CV wants to know where authorization came from to switch carrier

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-26 **Time:** 4:43 **AM (PM)** (Circle One)

CSR Name: Rick Goins **Badge #:** 1629

Customer Name: Kenneth Lyon **BTN:** 305-754-9637

Address: 46 NE 100 ST **Apt.#:**

City: Miami Shores **ST:** FL **ZIP:** 33138 **INF? (OOF?)** (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust was slammed and said that she is very upset and can't belive this happened now by VS first by ATT. She said she is so used to it she was not upset

RESEARCH: (For Customer Service Use Only)

I did advise her to get a freeze or restrict

Order completed By: T4CSXJ4

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: Oct 26 98 **Time:** 4:14 **AM** (PM) **(Circle One)**

CSR Name: TERESA YATES **Badge #:** _____

Customer Name: DEBORA BROWMAN **BTN:** 305-385-6246

Address: 10700 SW. 139th AV. **Apt.#:** _____

City: MIAMI **ST:** FL **ZIP:** 33186 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION (ASAP! NEEDED) **NOT NEEDED**

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CU WAS SLAMMED TO ATTCD. SHE TRIED TO CANCEL SERVICE SEVERAL TIMES. ALSO - BILL AND CONTACT # IS IN SPANISH. CU WAS OFFENDED & ANGRY.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DEBORA BROWMAN **DATE:** _____ **TIME:** _____

COMMENTS: SHE WANTS A SUP TO CALL ASAP

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10/26/98 TIME 9:30 AM ✓ PM _____

CSR NAME (Gene Lay) (COMPLAINTS) BADGE # (87274)

CUSTOMER NAME Jose R & Nancy Martinez BTN # 305 557 8287

ADDRESS 7381 BIG CYRESS CT APT # _____

CITY HIALEAH STATE FL ZIP CODE 33014-250

IS RESPONSE NEEDED? (YES) NO PROJECT? _____

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Says they dont have GTE - Records show has GTE - appears to be a SLAM.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1998 - d.
DMSS - NO ORDER

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: _____ DATE COMPLETED: ___

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10/26/98 TIME 6:18 AM ____ PM X

CSR NAME Wendy Johnson BADGE # 88790

CUSTOMER NAME Charles Lagueux BTN # (305) 931-7260

ADDRESS 17900 N. Bay Rd APT # (Refused to Answer

CITY Miami Beach STATE Florida ZIP CODE 33160

IS RESPONSE NEEDED? YES / NO PROJECT? GTE LD

Needs To go To Voice Mail when finished

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

No one was at home on that day - Acct is in Father's name - Father does not speak english (is deaf) Father was in Canada on the date of change also. A welcome letter was not sent - Did receive a bill w/ GTE charges on it. Was changed from AT&T. Also the address that was on the bill is not correct.

* Spoke to Francois Lagueux is Customers Son - if you call this is who needs to be spoken to. *

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

*Cust. had PIC put on - And is changed back to AT&T DMSS-N/O 1998-0

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN _____ DATE COMPLETED

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10-26-98 TIME 7:18 AM _____ PM X

CSR NAME Cody Walker BADGE # 120410

CUSTOMER NAME Ramon Hernandez BTN # 305-887-7366

ADDRESS 591 E. 11th St. APT # _____

CITY Hialeah STATE FL ZIP CODE 33010

IS RESPONSE NEEDED? (YES) / NO PROJECT? Long distance - Res

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer was changed without his consent. The change ~~took~~ took effect ~~on~~ ~~of~~ Aug 31st. He wants to know who authorized this change.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

I took His info. and ~~gave~~ gave him the AFNI # to Credit account and remove the LD service 1998-0

DMSS-NO ORDER

RETURN CALL TO CUSTOMER

COMMENTS Spanish speakers only

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/27/98 **Time:** 3:00 CST **AM** (PM) **(Circle One)**

CSR Name: Jami **Badge #:**

Customer Name: Miguel Valdes **BTN:** 561-434-2766

Address: 3870 Park Ln **Apt.#:**

City: W Palm Beach **ST:** FL **ZIP:** 33406 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cx switched w/out authorization. Mrs Valdes wants to be called back before 5:00pm today to know how this happened. Threatening legal action!

RESEARCH: (For Customer Service Use Only)

Pic + Ani active

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10-26-98 TIME 12:11 AM PM A

CSR NAME Sylvia Arteaga BADGE # 88496

CUSTOMER NAME Deborah Chapman BTN # 941-758-6235

ADDRESS 9020 61st Av. Dr. E APT #

CITY Bradenton ST FL ZIP 34202

PLEASE CIRCLE RESPONSE: NEEDED NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)

Mr. Chapman called was upset he recieved a letter from BTF L.D. to transfer him from Sprint. They never ask for the change the replaced the lock

ESP W/ weekend freedom Plan on his record

Customers wants ASAP ~~ASAP~~ on who switched their Service.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)

1998-0

Snyder-TC360dom 10/19 EFF 10/26

RETURN CALL TO CUSTOMER

BY WHOM DATE TIME

COMMENTS

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10-26-98 TIME 9:30 AM ✓ PM ___

CSR NAME Misty Munnig BADGE # 87633

CUSTOMER NAME Mary Chris Ammerman BTN # 941 695 4841

ADDRESS P.O. Box 896 APT # ___

CITY Chokoloskee ST FL ZIP 34138

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)
MS Ammerman was switched from At+t to GTE without her authorization. She wants to know who did this and how. Too I did advise Cust to call At+t and call her local carrier which is Sprint for a PIC form

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
1998- Ø
Snyder- TC, 360 dom 10/19 EFF 11/05

RETURN CALL TO CUSTOMER

BY WHOM ___ DATE ___ TIME ___

COMMENTS ___

DATE TURNED IN: _____ DATE COMPLETED: ___

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10/26/98 TIME 6:36 AM _____ PM X

CSR NAME Janet Sup BADGE # _____

CUSTOMER NAME Kevin Dunn BTN # 954-961-8965

ADDRESS _____ APT # _____

CITY _____ STATE _____ ZIP CODE _____

IS RESPONSE NEEDED? (YES) NO PROJECT? LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

was switched to GTE w/o permission on Oct 20th. wants to know who authorized this

Snyder- TC, 360 dom 10/15 EFF 10/30
Name on order- Lazaro + Luisa Santos

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Apologized - he already switched back to his carrier - he does want us to re rate his bill once he receives it.
1998 - 01

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: _____ DATE COMPLETED: ___

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10/26/98 TIME 7:15 AM ____ PM X

CSR NAME Janet Sup BADGE # _____

CUSTOMER NAME John Boike BTN # 561-795-4838

ADDRESS 10102 Patience Ln. APT # _____

CITY Royal Palm Beach STATE FL ZIP CODE 33411

IS RESPONSE NEEDED? YES NO PROJECT? LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customes was switched to GTE w/o permission
He is very upset & wants to know who authorized this
He said if he does not hear from us in 48 hours
he will be calling back with an Attorney

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

He already switched back to ATT
1998 - 6
Snyder - TC, 360 dom 10/18 EFF 11/02

RETURN CALL TO CUSTOMER

COMMENTS

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-27-98 Time: 11:47 (AM) PM (Circle One)

CSR Name: Jacqueline Little Badge #:

Customer Name: Richard E Buch BTN: 941 439-2098

Address: 432 Aloha DR Apt.#:

City: Haines City ST: FL ZIP: 33844 ~~INF?~~ OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer is upset because he was switched without his authorization. He doesn't want to receive any charges and is willing to seek legal party if his service isn't switched back to AT&T immediately. This customer would like a call back to make a formal complaint.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

23584

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/27/98 **Time:** 3:00 CST **AM** (PM) **(Circle One)**

CSR Name: Jami **Badge #:** _____

Customer Name: Miguel Valdes **BTN:** 561-434-2766

Address: 3870 Park Ln **Apt.#:** ---

City: W Palm Beach **ST:** FL **ZIP:** 33406 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cw switched w/at authorization. Mrs Valdes wants to be called back before 5:00pm today to know how this happened. Threatening legal action!

RESEARCH: (For Customer Service Use Only)

Pic + Ani active

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

DATE TURNED IN: _____ DATE COMPLETED: ___

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10-27-98 TIME 11:15 AM ✓ PM _____

CSR NAME CLENOON BADGE # 7937

CUSTOMER NAME Gerald Buscher BTN # 941 921 2641

ADDRESS 2391 Pinehurst APT # _____

CITY SARASOTA STATE FL ZIP CODE 34231

IS RESPONSE NEEDED? (YES) / NO PROJECT? _____

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

CUST WAS SWITCHED TO GTE CLD W/ OUT PERMISSION CUST WANTS TO ~~FI~~ FIND OUT WHO SWITCHED AND WHY.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

DMSS-N/O 1998-C

RETURN CALL TO CUSTOMER

COMMENTS

23586

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10-27-98 TIME 8:20 AM ✓ PM ___

CSR NAME Kristina Alexander BADGE # 87376

CUSTOMER NAME Carl Herrera BTN # 305-595-8656

ADDRESS 9420 S.W. 106 Ct. APT # ___

CITY Miami ST FL ZIP 33176

PLEASE CIRCLE RESPONSE: NEEDED (NOT NEEDED)

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)
He has been switched to GTE LD twice. Doesn't want a letter of apology he just wants us to stop sending bills & other correspondence.
He also stated he will go to FCC and to NRC show GAI Sunshine will get this up" he stated.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
SENT REQUEST to Remove name from all calling & mailing sites.
1998- C
Snyder- TC, 360 dom 9/23 cancelled-pic restriction
Name on order Raul Sanchez - same address

RETURN CALL TO CUSTOMER

BY WHOM ___ DATE ___ TIME ___

COMMENTS ___

23587

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/27/98 **Time:** 6:00 **AM (PM)** (Circle One)

CSR Name: Sean B / Michelle C (Help Desk) **Badge #:** _____

Customer Name: John M. Lynn **BTN:** 305-248-9026

Address: P.O. Box 1250 **Apt.#:** _____

City: Homestead **ST:** FL **ZIP:** 33090 **INF? (OOF?)** (Circle One)

PLEASE CIRCLE RESPONSE: (ESCALATION NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer Slammed - unauthorized Switch
Cx would like problem taken care of and to know who it was that gave authorization to switch
"this practice Needs to be Stopped!"

RESEARCH: (For Customer Service Use Only)

Returned Cx to Prior Carrier
Rep - Deactivated ani

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/27/98 **Time:** 5:24 **AM** (PM) **(Circle One)**

CSR Name: ~~TAE~~ K. Williams **Badge #:**_____

Customer Name: Natalie Hensel **BTN:** 941-365-8618

Address: 2323 Bahia ~~Vis~~ Vista **Apt.#:**_____

City: Sarasota **ST:** FL **ZIP:** 34239 (INF?) **OOF?**
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CU was slammed, wants to know who authorized switch.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM:_____ **DATE:**_____ **TIME:**_____

COMMENTS:_____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-27-98 Time: 4:57 AM (PM) (Circle One)

CSR Name: Erik Williams Badge #:

Customer Name: Luis Pertinez BTN: 561-842-9816

Address: 5600 Poinsettia Ave Apt.#:

City: West Palm Beach ST: FL ZIP: 33407 INF? (OOE?)
(Circle One)

PLEASE CIRCLE RESPONSE: (ESCALATION NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

slammed by GTEC / very upset

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/27/98 **Time:** 10:00 **(AM)** PM **(Circle One)**

CSR Name: Kelly M. **Badge #:**_____

Customer Name: Eduardo Garcia **BTN:** (941) 744 9369

Address: 18548 S.W. Seahorse LN **Apt.#:**_____

City: Ingleside **ST:** FL **ZIP:** 33469 **INF? (OF?)**
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust never auth GTEL. He got a Welcome letter in the mail (he does to who authorized this service and he wanted to talk to John (Havens) (the signature on the letter). Please look into this issue.

RESEARCH: (For Customer Service Use Only)

No bill info. Order was placed on 10/21/98.

RETURN CALL TO CUSTOMER

BY WHOM:_____ **DATE:**_____ **TIME:**_____

COMMENTS:_____

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-27-98 **Time:** 8:45 **AM** (PM) **(Circle One)**

CSR Name: Auguste Hoffstatter **Badge #:** _____

Customer Name: William H Grover **BTN:** (941) 497-1566

Address: 476 Catalina Isles Cir **Apt.#:** _____

City: Venice **ST:** FL **ZIP:** 34292 **(INT?) OOF?**
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

cust. was switched w/o cust. permission. cust is very upset

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/27/98 Time: 506 AM (PM) (Circle One)

CSR Name: Erica Sams Badge #:

Customer Name: Cynthia A & James LaPorte BTN: 407-647-7307

Address: 5513 Henry Balch Ct. Apt.#:

City: Orlando ST: FL ZIP: 32810 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: (ESCALATION NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer was switched without their permission and wants to know who was responsible for the switch and why.

RESEARCH: (For Customer Service Use Only)

QMF shows active since 10/12/98

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-27-98 **Time:** 12:55 **AM** (PM) **(Circle One)**

CSR Name: Sonya M. **Badge #:**

Customer Name: Luciano Luz arrago **BTN:** 305-665-1991

Address: 4975 SW 64th PL **Apt.#:**

City: Miami **ST:** FL **ZIP:** 33155 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: (ESCALATION NEEDED) **NOT NEEDED**

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust did not authorize being switched to GTELD. She wants someone to call her and tell her who switched her and who authorized the switch.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-27-98 **Time:** 4:20 **AM (PM)** (Circle One)

CSR Name: Haron Doty **Badge #:** _____

Customer Name: Francisco Prince **BTN:** 954-894-7975

Address: 30 Marion Rd. **Apt.#:** _____

City: Hollywood **ST:** FL **ZIP:** 33023 **INF? (OOF?)** (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CU got slammed by GTFLD

SPANISH ONLY

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-27-98 **Time:** 5:53- (AM) PM **(Circle One)**

CSR Name: Sonya M. **Badge #:**

Customer Name: Cynthia Trueba **BTN:** 305-857-0309

Address: 2321 SW 21St St **Apt.#:**

City: Miam **ST:** FL **ZIP:** 33145 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: (ESCALATION NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust was switched a/o authorization and was out of town when order was put in. please call cust back, she would like to know who gave permission to switch her

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-27-98 **Time:** 8:40 **AM (PM)** (Circle One)

CSR Name: Pariska W. **Badge #:** _____

Customer Name: Rolando Barrueco **BTN:** 305-278-2105

Address: 1212 SW 129th Av **Apt.#:** _____

City: Miami **ST:** FL **ZIP:** 331772719 **INF? (OOF?)** (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

cust, wants info on how she was tkn over By GTE.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-22-98 Time: 8:20 (AM) PM (Circle One)

CSR Name: Deina F. v Mike F (Super) Badge #:

Customer Name: William Rehrmann BTN: 904-676-2250

Address: 9 Fox Cliff Way Apt.#:

City: Ormond Beach ST: FL ZIP: 32174 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer was switched to GTEL without his authorization, customer very upset, and wants to know who authorized the order.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-27-98 Time: 11:47 (AM) PM (Circle One)

CSR Name: Dena F Badge #:

Customer Name: Tom Evans BTN: 941-498-7798

Address: 26235 Hickory BLVD Apt.#:

City: Bonita Springs ST: FL ZIP: 34134 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer was switched to GTEC without authorization. Customer said she had a sales rep contacted her, had a 1 sentence conversation, and the rep hung up on her.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

DATE TURNED IN: _____ DATE COMPLETED: ____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10-28-98 TIME 10:58 AM X PM ____

CSR NAME CRONOW BADGE # 87937

CUSTOMER NAME Pedro Diaz BTN # 3058610356

ADDRESS 3217 Abbott AV. APT # 02

CITY MIAMI STATE FL ZIP CODE 33141

IS RESPONSE NEEDED? (YES) / NO PROJECT? CD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Cust was switched to ATT (DW) out authorization cust very upset wants to know WHO made the switch and how. something like this can happen

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

DMSS-N/O 1998-Ø

RETURN CALL TO CUSTOMER

COMMENTS

23600

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10-28-98 TIME _____ AM ✓ PM _____

CSR NAME Darlene Jones BADGE # 88513

CUSTOMER NAME Patricia Santos BTN # 305-595-5707

ADDRESS 10101 Southwest 502 Terr. APT # _____

CITY Miami STATE FL ZIP CODE 33165

IS RESPONSE NEEDED? YES / NO PROJECT? _____

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Her son rec'd a call from a TSR to change LD service. He told the rep he was not authorized on account and they would have to speak to his mother. When Ms. Santos returned from vacation her LD was switched, cust very upset.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

DMSS-N/O 1998-Ø

RETURN CALL TO CUSTOMER

COMMENTS

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10-28-98 TIME 11:00 AM ✓ PM ___

CSR NAME Kristine Alexander BADGE # 87376

CUSTOMER NAME Roger Cumbie BTN # 941-746-1062

ADDRESS 3915 34 Ave E APT # ___

CITY Bradenton ST FL ZIP 34208

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)
He was switched to GTE Total Call Plan on this BTN without permission. He had Frontier on this line and wants to know how this happened - He says that if he wants to switch then he has to write in and do it.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
1498-0
DMSS-N10

RETURN CALL TO CUSTOMER

BY WHOM ___ DATE ___ TIME ___

COMMENTS ___

DATE TURNED IN: 10-28-98 DATE COMPLETED: ____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10-28-98 TIME ____ (AM) ____ PM ____

CSR NAME EDITH (WON'T GIVE FIRST NAME) BADGE # ____

CUSTOMER NAME MRS. LEBORE BTN # 305 235 9294

ADDRESS 14550 SW 95 AVE APT # ____

CITY MIAMI STATE FL ZIP CODE 33176

IS RESPONSE NEEDED? (YES) / NO PROJECT? LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

HAS SOUTHERN BELL FOR LOCAL CUSTOMER VERY VERY IRATE, WAS SWING BECAUSE SHE FEELS A HEART ATTACK COMING BECAUSE SHE GOT SLAMMED. AFNI - SHOWS SNYDER SLAMMED HER ON 10-22-98. SHE WILL NOT PAY ANY CHARGES FOR LD CALLS SHE MADE OR IS GOING TO MAKE UNTIL SHE GET SWITCHED BACK TO MCI

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1998-Ø
Snyder- TC 3160 dom 10/18 Eff 11/02
Name on order- Sandra Peterson

RETURN CALL TO CUSTOMER

COMMENTS

23603

DATE TURNED IN: 10-28-9V DATE COMPLETED: ___

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10-28-9V TIME ___ AM ___ PM ___

CSR NAME Ruth Moore, Sup. BADGE # ___

CUSTOMER NAME JACKIE GROSSO BTN # 305-226-9656

ADDRESS 12354 NW 11th Ln. APT # ___

CITY Miami STATE FL ZIP CODE 33182

IS RESPONSE NEEDED? YES / NO PROJECT? U.D.

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer switched w/o authorization (Snyder Order) - Rec'd no welcome letter but was billed by BTE for $75.75 on bill to date.

(DMSS - Time Cor - 360 Domestic w 9/29 effective 10/14)

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Snyder - TC 360 dom 9/29 Eff 10/14
Name on order - Manuel Oporto
1998 - 0

RETURN CALL TO CUSTOMER

COMMENTS

23604

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10.28.98 TIME 9:10 AM ✓ PM ___

CSR NAME Andrea K. Myers BADGE # 120332

CUSTOMER NAME Roberta D. Gabriel BTN # 904 725 9858

ADDRESS 301 Caravan Ct APT # 2008

CITY Jacksonville ST FL ZIP 32216

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)

Mrs. Gabriels daughters was at the mall when a GTE representative asked her if she would like to receive free minutes. I knew the girl told the rep. she wasn't 18 he said that's ok its just free long distance minutes. A few wks later Mrs Gabriel finds out she was switched to GTE.

Mrs. Gabriel is very upset that GTE changed her service w/out permission from the one authorized on the account.

Would like for someone to call and explain how GTE can do this. ! ! !

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)

1998-0

DMSS-No Order

RETURN CALL TO CUSTOMER

BY WHOM ___ DATE ___ TIME ___

COMMENTS ___

23605

Please fax — copy me on results & notify will need to forward to GTE

DATE TURNED IN: 10-28-98 DATE COMPLETED: 10-28-98

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10-28-98 TIME 7:00 AM ____ PM ✓

CSR NAME Maria Montanez BADGE # 120444

CUSTOMER NAME Harold Smith BTN # (954) 772-292[illegible]

ADDRESS 310 NW 52 St. APT # ____

CITY Fort Lauderdale STATE FL ZIP CODE 33309

IS RESPONSE NEEDED? (YES) / NO PROJECT? ____

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Mr. Smith was switched to GTE without his consent/permisson. He would like to know who was responsible for this. He was with Sprint and has been for 20 yrs.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

He said he wanted to put in a complaint. I told him I would fill out a Customer Complaint Form.

Snyder-TC,3100 dom 10/05 Eff 10/20 1998-0

RETURN CALL TO CUSTOMER

COMMENTS

23606

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/28/98 **Time:** 1:00 **AM** (PM) **(Circle One)**

CSR Name: MARGARET A. HENRY **Badge #:** 1624

Customer Name: John F O Brien **BTN:** 941 739-1874

Address: 6101 34th St W **Apt.#:** APT 1H

City: Bradenton **ST:** FL **ZIP:** 34210 (INF?) OOF? **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer recd 2 letters which he sent back 1st one in red ink DO NOT DISCONNET. AT&T as LD carrier. CU is retired AT&T Service was changed without authorization. Customer has retirement benefits that could be effected by a switch

RESEARCH: (For Customer Service Use Only) Customer says Margaret H. help him with excellent service.

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

DATE TURNED IN: 10-28-98 DATE COMPLETED: ___

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10-28-98 TIME 7:20 AM ✓ PM ___

CSR NAME Ellen Hartlaub BADGE # 87068

CUSTOMER NAME Barbara Scheierman BTN # 305858-4889

ADDRESS 1643 Brickell APT # ___

CITY Miami STATE Fl ZIP CODE 33129

IS RESPONSE NEEDED? (YES) NO PROJECT? GTE FD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Cust had an unauthorized change in Miami Fl. to GTEFD Cust wants to know immediately who changed her. She wants a call back- want's to know rates she has been charged. Cust. switched lost her mileage w. MCI.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Told cust we will adjust her bill when it comes in. Customer Irate.
DMSS-N/O 1998-0

RETURN CALL TO CUSTOMER

COMMENTS

23608

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-28-98 **Time:** 5:09 **AM** (PM) **(Circle One)**

CSR Name: Sonya M. **Badge #:**

Customer Name: Marie Nichola **BTN:** 305-999-3427

Address: 145 NE 91st St **Apt.#:**

City: Miami **ST:** FL **ZIP:** 33179-3710 **INF?** **OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust was switched w/o authorization please call her and let her know who switched her and who gave permission.

305-653-6958 leave message

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-28-98 **Time:** 6:49 **AM** (PM) **(Circle One)**

CSR Name: Sonya M. **Badge #:** _____

Customer Name: Ronald Gagnier **BTN:** 954-771-9287

Address: 138 NW 67th st **Apt.#:** _____

City: Fort Lauderdale **ST:** FL **ZIP:** 33309 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust wants someone to call them back and tal lyin who switched him. Call during evening hours from 5-8pm.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-28-98 Time: 11:10 AM PM (Circle One)

CSR Name: ROZANNE CARLIN Badge #: _____

Customer Name: JULIO JALDAMEZ BTN: 954-776-7916

Address: 710 NE 46th Ct Apt.#: _____

City: OAKLAND PARK ST: FL. ZIP: 33334 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CUS. WAS SLAMMED & TELD BUT WAITED UNTIL HE GOT SECOND BILL BEFORE HE CALLED TO QUESTION THIS B.C. - Re-Rated this Interlata local domestic call to Abt 1 hr. - Very upset as was to pay the Bill

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-28-98 Time: 3:00 AM (PM) (Circle One)

CSR Name: R. Williams Badge #:

Customer Name: Lurie Joseph BTN: 561-498-4346

Address: 624 Lakewood Cir W Apt.#:

City: Delray Beach ST: FL ZIP: 33445 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CU was slammed. Wants to know who authorized switch.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-29-98 **Time:** 11:30 (AM) PM (Circle One)

CSR Name: Aaron Doty **Badge #:**

Customer Name: Dr. David M. **BTN:**

Address: 6160 Mira Mar Pkwy **Apt.#:**

City: Hollywood **ST:** FL **ZIP:** 33023 **INF?** (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Wants to know where Authorization for Switch came from

Shawna Steiner (Wife) 954-436-1603

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-29-98 **Time:** 3:35 **AM** ~~PM~~ **(Circle One)**

CSR Name: Aaron Doty **Badge #:** _____

Customer Name: Agathe Prudente **BTN:** _____

Address: 350 NE 161st ST **Apt.#:** _____

City: NMB **ST:** FL **ZIP:** 33162 **INF?** **OOF?**
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CU wants to know how she got signed up for GTEL

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

23614

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-29-98 **Time:** 134 **AM** (PM) **(Circle One)**

CSR Name: Erik Williams **Badge #:**

Customer Name: Gary Franck **BTN:** 941- 727-1710

Address: 7851 48th Ave E. **Apt.#:**

City: Bradenton **ST:** FL **ZIP:** 34203 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: (ESCALATION NEEDED) **NOT NEEDED**

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cus was slammed by Gteld was upset wants to get to the bottom of this or will take dentist missed / demands someone to contact him back
work # 941- 355-5504
9am - 6pm Et

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/29/98 **Time:** 10:30 **(AM)** PM **(Circle One)**

CSR Name: Kelly M **Badge #:**

Customer Name: Lionel Bouffard **BTN:** (954)454-4748

Address: 820 Cypress LN **Apt.#:**

City: Hallandale **ST:** FL **ZIP:** 33009 **INF? (OOF?)** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust never authorized GTELD. He doesn't speak English, so he couldn't exchange the switch. Furthermore, he doesn't live in the U.S., he lives in Canada and vacations in Florida for the winter. His phone service was suspended during the time his order was placed, because he was in Canada. Also, there's a SS# on the account, 594-09-4858, which is false, because he doesn't have a SS#, because he's not a U.S. resident.

RESEARCH: (For Customer Service Use Only)

Also, an "O"-order has been issued.

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10-29-98 TIME _____ AM _____ PM _____

CSR NAME Ruth Moore (Supv.) BADGE # 7192

CUSTOMER NAME MRS. LINO GUERRA BTN # 305-551-7367

ADDRESS _____ APT # _____

CITY _____ STATE FL ZIP CODE _____

IS RESPONSE NEEDED? YES / (NO) PROJECT? Long Distance

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer switched w/o her authorization to GTE - MRS. GUERRA'S NAME WAS ALSO MISSPELLED ON HER BILL AND WELCOME LETTER. MRS GUERRA DOES NOT TAKE CARE OF HER OWN AFFAIRS - HER daughter, MS. Rocke, is Responsible. We show NO order in our System for this Customer, NO DMSS ORDER (Customer says Bell South got her problem Straightened out on 10/2/98)

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

CALLED AT&T & got Credit for calls made thru GTE. THAT SHE HAS been billed for. (CALLS TO COSTA RICA)

1998-0

DMSS-N/O

RETURN CALL TO CUSTOMER

COMMENTS Ruth said she already took care of it.

23617

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE October 29, 1998 TIME 7:13 AM ✓ PM _____

CSR NAME Amanda Gilley BADGE # 87959

CUSTOMER NAME Bonnie Goodrich BTN # (941 377 2936 / 941 378 0399)

ADDRESS 4341 Marcott Cir APT # _____

CITY Sarasota STATE FL ZIP CODE 34233

IS RESPONSE NEEDED? (YES) / NO PROJECT? LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

MS Goodrich was switched to GTE without her authorization on both numbers. She would like to know who authorized the switch and how it happened. She would also like something in writing saying how it happened.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1998-Ø 1998-Ø

2936-Snyder-TC,360 dom 10/21 cancelled-already on account
Name on order-Arnoldo Villar

0399-DMSS-N/O

RETURN CALL TO CUSTOMER

COMMENTS

23618

DATE TURNED IN: _____ DATE COMPLETED: ____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE October 29, 1998 TIME 2:06 AM ____ PM ✓

CSR NAME Amanda Alley BADGE # 87959

CUSTOMER NAME Helen Miller BTN # (561) 735-6526

ADDRESS 2515 NE 2nd Ct. APT # ____

CITY Boynton Beach STATE FL ZIP CODE 33435

IS RESPONSE NEEDED? (YES) NO PROJECT? LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Ms Miller was switched to GTE without her authorization. She would like to know who authorized the switch and how it happened.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1998 - Ø

Snyder - TC, 360 dom 10/08 Eff 10/23

RETURN CALL TO CUSTOMER

COMMENTS

CUSTOMER COMPLAINT

RM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

ay's Date: 10-29-98 Time: 8:10 (AM) PM (Circle One)

Name: Deina-F. Badge #:

tomer Name: Paul D Johnson BTN: 305-829-4947

ress: 1962 1 w Lake Dr Apt.#:

: Miami ST: FL ZIP: 33015 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

)BLEM: (Pls. be very specific and describe thoroughly.)

Customer was switched without her authorization, wants to know who authorized the order.

SEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

WHOM: DATE: TIME:

M NTS:

23620

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-30-98 **Time:** 9:15 (AM) PM **(Circle One)**

CSR Name: Aaron Doty **Badge #:** _____

Customer Name: Luis Franqui **BTN:** 407 695-9055

Address: 3946 Campfire Way **Apt.#:** _____

City: Casselberry **ST:** FL **ZIP:** 32707 **INF? OOE?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CU Was Slammed - Wants More Info on how it happened

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-30-98 Time: 4:15 AM (PM) (Circle One)

CSR Name: Aaron Doty Badge #:

Customer Name: Nilda Reyes BTN: 954-894-8223

Address: 6641 SW 38th St Apt.#: 9

City: Hollywood ST: FL ZIP: 33023 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CW was slammed by GTELD

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/30/98 **Time:** 11:00 am **AM** PM **(Circle One)**

CSR Name: Crystal C. **Badge #:**

Customer Name: Gregg M Nichols **BTN:** 305-758-3365

Address: 440 NE 92nd St **Apt.#:**

City: Miami **ST:** FL **ZIP:** 33138 **INF? OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Please call custumer back, he wants to know how he got switch to GTE w/o his knowledge

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-30-98 Time: 2:40 AM (PM) (Circle One)

CSR Name: Maron Doty Badge #:

Customer Name: Isaac Kreps BTN: 305+595-2164

Address: 8884 SW 76th Terrace Apt.#:

City: Miami ST: FL ZIP: 33173 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

(U wants to know how he was switched to GTE LD

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

DATE TURNED IN: 10-30-98 DATE COMPLETED: ___

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10-30-98 TIME 9:30 AM ✓ PM ___

CSR NAME Stacy Reed BADGE # 120734

CUSTOMER NAME Edward Zuniga BTN # (305) 858-2085

ADDRESS 2637 SW 24th Terrace APT # ___

CITY Miami STATE FL ZIP CODE 33145

IS RESPONSE NEEDED? (YES) NO PROJECT? ___

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

The customer is very unhappy that he keeps getting switched to GTE without authorization. He had Excel as his LD company and he would like it noted that he works for Excel. He would also like it noted that he is going to file a complaint with the FCC. He said he would like proof that he authorized the switch if there is any. He definitely wants some feedback on this situation.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1998- C
Snyder-TC, 360 dom 9/24 EFF 10/09
Name on order- Carmen Ruiz

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10/30/98 TIME 4:40 AM _____ PM ✓

CSR NAME Monica Rodriguez BADGE # 119392

CUSTOMER NAME Mouhamad Djacke BTN # 305 685 6017

ADDRESS 12125 NW 10TH Ave APT # _____

CITY Miami STATE Fl ZIP CODE 33168

IS RESPONSE NEEDED? (YES) NO PROJECT? 101

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

He was slammed by Lte. Snyder order.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1998; - 0
Snyder - TC, 360 dom 10/22 EFF 11/10
Name on order - Gina Lyzogga

RETURN CALL TO CUSTOMER

COMMENTS

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-30-98 Time: 1:51 AM (PM) (Circle One)

CSR Name: [redacted] Aaron Doty Badge #: _____

Customer Name: Elena Smith BTN: 727-360-8802

Address: 6061 2nd ST E Apt.#: 59

City: St Petersburg ST: FL ZIP: 33706 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific ~~and describe thoroughly.~~)

CW was lied to about long distance rates + also switch before authority was given

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-30-98 Time: 1:19 AM (PM) (Circle One)

CSR Name: Aaron Doty Badge #:

Customer Name: Mike McGilvray BTN: 305+665-3470

Address: 6050 SW 128th ST Apt.#:

City: Miami ST: FL ZIP: 33156 INF? (OOF)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CU was slammed - He wants to know Who (IF ANYONE) Gave Authorization

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-31-98 **Time:** 11:43 (AM) PM **(Circle One)**

CSR Name: Veronica Riggs **Badge #:** _____

Customer Name: Reinaldo Sanchez **BTN:** 305-553-0726

Address: 10400 SW 19 St **Apt.#:** _____

City: Miami **ST:** FL **ZIP:** 33165 **INF? OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cx was switched without her permission!

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10.31.98 TIME 12:40 AM PM

CSR NAME Nancy Bishop BADGE # [redacted]

CUSTOMER NAME Reynaldo Hernandez BTN # 305 883 1680

ADDRESS _____ APT # _____

CITY _____ ST FL ZIP _____

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)
Cust was switched to GTE w/o authorization
Please call Rob @ 3057968287 ASAP

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
1998-0
DMSS-N/O

RETURN CALL TO CUSTOMER

BY WHOM _____ DATE _____ TIME _____

COMMENTS _____

23630

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/19/98 **Time:** 8:37 **(AM) PM (Circle One)**

CSR Name: Rich **Badge #:** _____

Customer Name: Juan Cortez **BTN:** 407-344-1794

Address: 97 Lake Villa Way **Apt.#:** _____

City: Kissimmee **ST:** FL **ZIP:** 34743 **INF? (OOF?)** **(Circle One)**

PLEASE CIRCLE RESPONSE (ESCALATION NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer was taken over by GTELD Customer was very irate would like a letter sent to him stating that he has been cancelled by GTELD

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

23631

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-19-98 Time: 9:45 (AM) PM (Circle One)

CSR Name: _____ Badge #: _____

Customer Name: Miriam Ferrer BTN: _____

Address: 4020 NW 179th St Apt.#: _____

City: OPA LOCKA ST: FL ZIP: 33055 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer request us know she would like to know how the entire happened wants to be notified in writing.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-19-98 Time: 10:45 (AM) PM (Circle One)

CSR Name: Veronica Riggs Badge #:

Customer Name: Louis Tony BTN: 3057592762

Address: 5500 N Miami Ave Apt.#: 8

City: Miami ST: FL ZIP: 33127 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu does not speak English. Person representing Cu is Mr Earnst he can be contacted at 3057582462. Cu was switched to GTE without permission and will not pay bill until he gets information on switch.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/19/98 Time: 2:20 p AM (PM) (Circle One)

CSR Name: Crystal C / DEE Badge #: ____

Customer Name: Nichole Gauthier BTN: 954-486-1129

Address: 200 Leslie DR Apt.#: ____

City: Hallandale ST: FL. ZIP: 33009 7311 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: (ESCALATION) NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

cs taken over by GTE - calls rerated to ATT rates per Crystal - CL @ $36.21 Given Balance Due $38.67. Cs leavy Private - Wants this information in writing of "will not pay the bill"

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: ____ DATE: ____ TIME: ____

COMMENTS: ____

DATE TURNED IN: 10/19/98 DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10/19/98 TIME _____ AM _____ PM 403

CSR NAME Roger Cadlois BADGE # 119930

CUSTOMER NAME Armand Fortin BTN # 4078766933

ADDRESS 11493 Willow garden Dr. APT # N/A

CITY Windermere STATE FL ZIP CODE 34786

IS RESPONSE NEEDED? (YES) NO PROJECT? GTELD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Mrs Fortin called in to complain because she was switched to GTE without permission. She is very upset about this and wants somebody from GTE to call her to explain how this happened.

order No I 7477684 placed Sept 29 effective Oct 14. onss shows SNYDER order. for Total Call /360

She has gone back to ATT, but still wants to know how this happened and why!!

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Called AFNI to give Mrs Fortin credit and gave her AFNI phone number so she can receive credit if we are still on her next bill. Gave her instruction as to how to receive a PIC restriction form. Apologize to customer for the inconvience of this situation.

1998 - C

Snyder-TC, 3600dm 9/29 EFF 10/14

RETURN CALL TO CUSTOMER

COMMENTS

23635

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10-19-98 TIME 4:52 AM ____ PM X

~~CSR~~ Sup! NAME Wendy Johnson BADGE # 88790

CUSTOMER NAME Willy Rund BTN # 305-937-0316

ADDRESS ~~175 6th~~ 17560 Atlantic Blvd. APT # ~~Apt~~ Apt 418

CITY North Miami Beach STATE FL ZIP CODE 33160

IS RESPONSE NEEDED? YES / NO PROJECT? GTE LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Was changed from AT&T to GTE w/out permission - changed to GTE in October.
Has not received a welcome letter.
Was not called either.
Did receive a call that said "Welcoming him to GTE"

Give to Victor when done

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Has put a PIC restriction already on account 1998 - 0.
Snyder - TC, 360 dom 9/28 eff 10/13
Name on order Ben Wilson - same address

RETURN CALL TO CUSTOMER

COMMENTS

23636

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/19/98 **Time:** 2:45 **AM (PM) (Circle One)**

CSR Name: Tanika Rodgers **Badge #:** _____

Customer Name: Juan Columbo **BTN:** 305-267-1323

Address: 1515 Country Club Parado **Apt.#:** _____

City Coral Gables **ST:** FL **ZIP:** 33134 **INF? (OOF?)** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu was switched to GTE & was unaware of the switch he wants to know how it happend & who did it & doesn't want to pay the bill because he didn't authorize the switch

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/19 Time: 1:45 AM (PM) (Circle One)

CSR Name: Michael Fitzgerald Badge #: CSC

Customer Name: LAUDY FLORENTINO BTN: 407-381-6068

Address: 6600 Rose Queen Ct. Apt.#:

City: ORLANDO ST: FL ZIP: 32807 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust. says he was misinformed about the rates & wanted to cancel service.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-19-98 **Time:** 7:21 **AM (PM) (Circle One)**

CSR Name: [redacted] LISA M **Badge #:** LCM /CSC #1689

Customer Name: JUAN Celi **BTN:** 305-936-1413

Address: 3400 NE. 192 ST **Apt.#:**

City: Miami **ST:** FL **ZIP:** 33180 2462 **INF? (OOF?) (Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Taken over by GTE from AT&T. wanted back to AT&T. wants to know how & why

RESEARCH: (For Customer Service Use Only)

I called AT&T AND GOT them switched back. I SAID I would rerate calls TO Venezuela to AT&T rate of .48¢/min AND Peru AT .75¢/min. The credit would be issed of the difference. but GTE prices are the same.

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10-19-98 TIME 10:30 AM ✓ PM ___

CSR NAME Rick CASTANEDA BADGE # 87064

CUSTOMER NAME MRS. HELEN ELLINWOOD BTN # 727-526-42

ADDRESS _____ APT # _____

CITY IF ST _____ ZIP _____

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)
Customer was switched to GTELD w/o permission; Wants to hear the recording on TSR who switched them. Says its against the law to be switched without authorization from the customer. Was getting 10¢ per minute thru EXCEL.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
1998-0
DMSS-NO ORDER

RETURN CALL TO CUSTOMER

BY WHOM _____ DATE _____ TIME _____

COMMENTS _____

23640

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-19-98 Time: 5:21 AM (PM) (Circle One)

CSR Name: Sonya Badge #:

Customer Name: Leonard Francis BTN: 407-422-4237

Address: 3400 Neptune Dr Apt.#:

City: Orlando ST: FL ZIP: 32804 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: (ESCALATION NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cx. was switched w/o auth. He wants in writing who put the order in and how it happened

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

23641

DATE TURNED IN: _____ DATE COMPLETED: ___

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10-19-98 TIME 7:32 AM _____ PM X

CSR NAME Gene Riner BADGE # 159317

CUSTOMER NAME Martha Rivera BTN # 407-242-6534

ADDRESS _____ APT # _____

CITY _____ STATE FL ZIP CODE _____

IS RESPONSE NEEDED? YES / NO PROJECT? 4001

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

was switched to GTE w/o permission
will not pay any bill from GTE, wants to
know who authorized this

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1998-Ø
Snyder-TC, 360dom 10/04 EFF 10/19
Name on order is Paulette Prince

RETURN CALL TO CUSTOMER

COMMENTS

23642

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-20-98 Time: 9:39 (AM) PM (Circle One)

CSR Name: Deina F Badge #:

Customer Name: Dr. David M Steiner BTN: 954-961-4210

Address: 6161 Miramar PKWY Apt.#:

City: Miramar ST: FL ZIP: 33023 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer was switched to GTECH, Dr. Steiner did not authorize the order, wants to know who authorized the switch. Was activated with GTECH on Sep 03 98.

RESEARCH: (For Customer Service Use Only)

Please call Shauna at (954) 436-1603 regarding this matter.

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-20-98 Time: 1:38 AM (PM) (Circle One)

CSR Name: Nina-F. Badge #:

Customer Name: Horace Mchugh BTN: 954-572-6651

Address: 9351 NW 35th PL Apt.#:

City: Sunrise ST: FL ZIP: 33351 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer was activated with GTEL on Sept 23, he did not authorize the switch, he wants to know who, when & why he was switched.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/20 **Time:** 11:35 (AM) PM (Circle One)

CSR Name: Diane Burdett **Badge #:**

Customer Name: Donald Avery **BTN:** 407-381-3062

Address: 5258 Tunbridge Wells CN **Apt.#:** 3

City: Orlando **ST:** FL **ZIP:** 32812 **INF?** (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer was switched to GTE CN without his permission The order date was on 9/27 and he was active on 10/1 I told him about PIC restrictions and how to change it back he is upset and wants to know why he was switched

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/20/98 **Time:** 12:54pm **AM (PM)** (Circle One)

CSR Name: Lynn Ann Bostick **Badge #:**

Customer Name: BARBARA LERENA **BTN:** 305 226 7204

Address: 3099 SW 101 ST CT **Apt.#:**

City: MIAMI **ST:** FL **ZIP:** 33165 **INF? (OOF)** (Circle One)

PLEASE CIRCLE RESPONSE: (ESCALATION NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Changed Service w/out authorization of Customer
NOT FAIR BECAUSE THEY DID NOT ASK TO CHANGE
THEIR LONG DISTANCE SERVICE FROM AT&T/BELL
SOUTH. NEVER REQUESTED ANY CHANGE. EXAMPLE
GETTING A BILL WITHOUT KNOWING THEY HAD THE
SERVICE, THEY NEVER REQUEST AND IN SERVICE
DID NOT SPEAK TO ANYONE, DIFFERENT ADDRESS
THAT DO NOT BELONG TO THEM. WRONG ADDRESS BILL
FORWARD TO CORRECT ADDRESS DUE TO THE NAME.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

23646

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: Oct/20/98 Time: 5:28 AM (PM) (Circle One)

CSR Name: Jorge Rojas. Badge #:

Customer Name: Yanes Mabel BTN: 305 267 1389.

Address: 210 SW 62 ct Apt.#: 8

City: Miami ST: FL ZIP: 33194 INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cst never req serv. w/GTE but she had a Order in solar from 07/24/98., also she had a bill for 43.38 she is not pay the bill. Complaint about GTE

RESEARCH: (For Customer Service Use Only)

Solar I order 07/29/98.
O order 09/17/98. code 2206
MSOS CA - Bill.

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

23647

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10/21/98 TIME 837 AM ✓ PM _____

CSR NAME Customer Joel Gonzalez BADGE # Charlet G. Schaure 87273

~~CUSTOMER NAME~~ _____ BTN # 305-388-6402

ADDRESS 10082 Southwest 147th Place APT # _____

CITY Miama STATE FL ZIP CODE 33196

IS RESPONSE NEEDED? (YES) NO PROJECT? _____

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Switched without authorization to GTE Long Distance very, very very, irraite. Refuses to pay bill, states will file with everyone possible if not resolved. Whats to know who set up, who authorized and who set up.

Called AFNI - spoke to Brian S could not tell

305/242-6506 CBR

When you know who call @ Closing 1.37 Credit

GTE LD ORDERS Credit $25

20572106 ORDER # SNYDER

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1998-Ø

RETURN CALL TO CUSTOMER

COMMENTS

23648

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-21-98 Time: 7:10 AM (PM) (Circle One)

CSR Name: Rachel A. Badge #:

Customer Name: Jesus Pisda BTN: 904-221-1843

Address: 320 S. Scarlett Bugler Ln Apt.#:

City: Jacksonville ST: FL ZIP: 32225 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Want to know WHY they were switched to GTE w/o their permission. Very irate

RESEARCH: (For Customer Service Use Only)

Active PICHANT

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-21-98 Time: 4:15 AM (PM) (Circle One)

CSR Name: Sonya Badge #:

Customer Name: Vincy Larosa BTN: 954-433-7434

Address: 712 SW [illegible] 158th Ter Apt.#:

City: Pembroke Pine ST: FL ZIP: [illegible] 33084 INF? QOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust. was switched w/O auth. please investigate and find out who gave unauthorization to switch this T.N. and call cust back.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-21-98 Time: 3:10 AM (PM) (Circle One)

CSR Name: R. Williams Badge #:

Customer Name: Mary Araiza BTN: 941-657-7554

Address: 550 19th St. N Unit 059 Apt.#:

City: Inmokalee ST: FL ZIP: 34142 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust was switched to GTE without her authorization. She wants to know who authorize this switch in her Name

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-21-98 Time: 5:28 AM (PM) (Circle One)

CSR Name: R. Williams Badge #:

Customer Name: Louis Baquero BTN: 305-595-6468 after 3:00p.M.

Address: 11400 SW. 82ND Ter Apt.#:

City: Miami ST: FL ZIP: 33173 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu wants to know who authorized switch to GTEL. Also was very upset that the bill was put in his Fathers Name who died over a year ago. He wants to know where they got his Fathers name.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-21-98 **Time:** 535 **AM** (PM) **(Circle One)**

CSR Name: Jennifer Knight **Badge #:** _____

Customer Name: Jose Barros **BTN:** 305 552 14 24

Address: 2420 SW 126th Av Miami Fl 33175 **Apt.#:** _____

City: Miami **ST:** Fl **ZIP:** 33175 **INF? OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

customer was taken over 8/13/98 by GTELD. cust did not want GTELD. Cust was very very irate

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/21/98 Time: 3:23 p AM (PM) (Circle One)

CSR Name: Nicolette Lovingood Badge #: 15162

Customer Name: Ivan Diaz BTN: (305) 859-8599

Address: 2333 Brickell Ave Apt.#: 811

City: Miami ST: FL ZIP: 33129 INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu was switched without knowledge, Cu wanted to make a complaint.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

23654

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-21-98 Time: 12:44 AM (PM) (Circle One)

CSR Name: Jennette Lee Badge #:

Customer Name: Adelina Santos BTN: (305)225-2882

Address: 3940 SW 102nd Ave Apt.#: F-217

City: Miami ST: FL ZIP: 33165 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

This customer's service was switched to GTE without her knowledge or authorization. She wants to know why and how it happened. GTE shows the account is active/active but she has already contacted her local to get it cancelled out

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-21-98 **Time:** 12:45 **AM** (PM) **(Circle One)**

CSR Name: Dana Hayes **Badge #:**

Customer Name: Elizabeth Dexter **BTN:** 941-922-9187

Address: 4533 Deer Ridge Pl. **Apt.#:**

City: Sarasota **ST:** Fl. **ZIP:** 34233 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Taken over from AT&T without authorization. Date of switch 10-10-98
Never received phone call or any solicitation
Because of this occurring customer is having GTE internal service, due to dishonest practices.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/21/98 Time: 9:30AM (AM) PM (Circle One)

CSR Name: Kashawn Watson Badge #: 1778

Customer Name: Steven Swanson BTN: 941-792-2923

Address: 6609 27th Ave W. Apt.#:

City: Bradenton ST: FL ZIP: 34209 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer was switched without his permission to GTE HQ. He has GTE for local and has a PIC RESTRICT for the LD company of his choice. ?????????

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

23657

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/21/98 **Time:** 3:03 **AM** (PM) **(Circle One)**

CSR Name: TONY GORDON **Badge #:** _____

Customer Name: HERBERT J GOLDSTEIN **BTN:** 305-932-1427

Address: 251 174th St. **Apt.#:** 806

City: N. MIA. Bch **ST:** FL **ZIP:** 33160 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CUST. WAS SLAMMED, WHATS SOMETHING FOR HIS TIME TO GET THIS PROBLEM RESOLVED. [redacted] HAD POINTS W/ AOL [redacted] MORE THAN LIKELY LOST HIS POINTS BECAUSE OF BEING SLAMMED.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

23658

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10-21-98 TIME 2:37 AM ____ PM ✓

CSR NAME Roberta Vasquez BADGE # 119304

CUSTOMER NAME Sylvia Cohen BTN # 941 379-3204

ADDRESS 1955 N. Honore Ave APT # —

CITY Sarasota STATE FL ZIP CODE 34235

IS RESPONSE NEEDED? (YES) NO PROJECT? 6TE LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Claims she was switched to 6TE from AT&T w/o her permission. She is not paying any billing by us.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1998-Q
Snyder- TC3600dom 10/04 EFF 10/19
Name on order- Allan Torres

RETURN CALL TO CUSTOMER

COMMENTS

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/22/98 **Time:** 10:08 (AM) PM **(Circle One)**

CSR Name: Rich M **Badge #:** _____

Customer Name: Sue Refidi **BTN:** 904-855-1331

Address: 401 Monument Rd. **Apt.#:** 22

City: Jacksonville **ST:** FL **ZIP:** 32225 **INF?** (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust did not request GTEFN, wanted a calling card only. Was called after being approached at the local mall.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

23660

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/22/98 Time: 2:00 AM (PM) (Circle One)

CSR Name: Jami Badge #: ———

Customer Name: Julie Coppola BTN: 954-985-7484

Address: 4991 SW 27th Ave Apt.#: ———

City: Dania ST: FL ZIP: 33004 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cx did not request GTEL. She wants to know how this happened. She never talked to anyone to get switched. Very, very upset. Needs a call back! Threatening legal action!!

RESEARCH: (For Customer Service Use Only)

Pic+ Ani Activated

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE Oct 22, 1998 TIME 1:00 AM ____ PM ✓

CSR NAME Rachael A. Mendez BADGE # 88379

CUSTOMER NAME Maria (Juan) Arjona BTN # 305-232-4004

ADDRESS 12410 SW 184 St APT # ____

CITY Miami STATE Fl. ZIP CODE 33177

IS RESPONSE NEEDED? (YES) / NO PROJECT? Spanish

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Has Southern Bell and At&t. She was switched to A.T.E. She wants to know who did this and what will be done about her bill

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1998-Ø
DMSS-NO

RETURN CALL TO CUSTOMER

COMMENTS

23662

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10-22-98 TIME 8:04 AM ✓ PM _____

CSR NAME Jesse Alonzo BADGE # 87141

CUSTOMER NAME Dorothy [redacted] BTN # 305-947-5624

ADDRESS 3725 NE 169th APT # B410

CITY NorthMiami Beach STATE FL ZIP CODE 33160

IS RESPONSE NEEDED? (YES) / NO PROJECT? ED

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer was changed to GTE without Permissan.
Customer wants the tape pulled and wants to
Know the name of the Rep who took the order.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1998-0
Snyder-TC, 360dom 9/21 EFF 10/06

RETURN CALL TO CUSTOMER

COMMENTS

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-23-98 Time: 4:06 AM (PM) (Circle One)

CSR Name: ROZANNE CARLIN Badge #:

Customer Name: PAUL LEVIN BTN: 305-669-0825

Address: 5890 SW. 102nd Apt.#:

City: Miami, ST: FL ZIP: 33156 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: (ESCALATION NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

never asked to change long distance carrier, Teleworld to change - wanted to know how this could happen - Please return a call to him

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10/22/98 TIME 9:45 AM X PM

CSR NAME Carol Ann Hunt BADGE # 119972

CUSTOMER NAME Heather Lee BTN # 305 829

ADDRESS 18846 NW 77th Court APT #

CITY Hialeah ST FL ZIP 33015

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)

Cust was changed to GTE LD without authorization.

DMSS advised Snyder Order 10/15 effective 10/30/98.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)

No acct found on 10/23/98

RETURN CALL TO CUSTOMER

BY WHOM _____ DATE _____ TIME _____

COMMENTS _____

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/23/98 Time: 1:07 AM (PM) (Circle One)

CSR Name: Andre Badge #:

Customer Name: John Fagg BTN: 305-232-0233

Address: 8757 SW 215th Ter Apt.#:

City: Miami ST: FL ZIP: 33189 INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu would like to know why they were switched.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/23/98 Time: 5:47 AM (PM) (Circle One)

CSR Name: Shelia Cramer Badge #:

Customer Name: Sahsha Cabo BTN: 305-380-0862

Address: 15605 SW 74 CIR DR. Apt.#:

City: Miami ST: FL ZIP: 33193 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: (ESCALATION NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Ms. Cabo was very upset about the change of her service. She said that she saw an ad in the newspaper about tarot card readings. She called & the woman tried to get her signed up for service she declined however the woman cont. to contact her. She believes this is how her service was changed. Ms. Cabo also says she wants ~~the~~ a copy of her contract.

RESEARCH: (For Customer Service Use Only)

Pic = Active
Ani = Active.

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

23667

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/23/98 Time: 6:39 AM (PM) (Circle One)

CSR Name: LAJUNE SHAW Badge #:

Customer Name: Neil Quintero BTN: 407-292-1755

Address: 5343 Windridge LN Apt.#:

City: Orlando ST: FL ZIP: 32810 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: (ESCALATION) NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cus was Pick-up by GTELD Without her Approval

Please Call After 4:30pm Central time.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10-23-98 TIME 7:23 AM X PM ___

CSR NAME Sylvia Arteaga BADGE # 8496

CUSTOMER NAME Bruce Silver BTN # 407-331-1074

ADDRESS 429 Velencia Court APT # ___

CITY Longwood ST FL. ZIP 32750

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)
Mr. Silver phone got switched over to GTE LD without his consent On Sept 19, 1998. He is very upset his service got switched over he wants to know who ~~the~~ authorized Give consent for the change when he has a code and never switched the service himself. ASAP.

Call him on Air Pager on: 407-533-0653

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
1998 - 8
DMSS-NJO

RETURN CALL TO CUSTOMER

BY WHOM ___ DATE ___ TIME ___

COMMENTS ___

23669

DATE TURNED IN: _____ DATE COMPLETED: ____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10-23-98 TIME 8:15 AM X PM _____

CSR NAME Carol Ann Hunt BADGE # 119970

CUSTOMER NAME George Farjardo BTN # 305 220 7383

ADDRESS 11524 SW 6th St APT # _____

CITY Miami STATE FL ZIP CODE 33174

IS RESPONSE NEEDED? (YES) NO PROJECT? _____

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Cust was changed to GTEL on August 11th without authorization

He is to have AT&T for LD carrier.

Cust wants to know who and how was change made.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1998-0

DMSS-N|O

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: _____ DATE COMPLETED: ____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10/23/98 TIME _____ AM _____ PM (PM)

CSR NAME Jose Serna BADGE # 120010

CUSTOMER NAME Rosario BTN # 305 8888964

ADDRESS Did not provide any APT # _____

CITY _____ STATE _____ ZIP CODE _____

IS RESPONSE NEEDED? YES / NO Did not say. PROJECT? _____

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

A representative called the custom offering Long Distance Service and the customer said she did not wan any service at all, because she wanted to continue with AT&T, However the order was placed with out her permission. She wants to know why GTE is doing this to the public.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

I did offered myself to transfe her call to AFNI (so she could get some credit but she was so ru that she hangup on me!

RETURN CALL TO CUSTOMER

COMMENTS 1998- C

DMSS-NO ORDER

23671

DATE TURNED IN _____ DATE COMPLETED

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10-23-98 TIME 6:10 AM _____ PM X

CSR NAME Cheryl Culver BADGE # 120546

CUSTOMER NAME Jose Diaz BTN # 305 261 6460

ADDRESS 7166 SW 21st St. APT # _____

CITY Miami STATE Florida ZIP CODE 33155

IS RESPONSE NEEDED? (YES) / NO PROJECT? GTE-LO

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Marilyn Ruiz called in to say her father Service had been switched from AT&T on 10-18-98 to GTE without ~~permission~~ permission. She would like to know how this happened and would authorize this switch.

Name on order - Esperanza Redondo

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Told her someone would call her back after we researched this problem.

1998 - 0/

Snyder - TC 3600 dom 10/15 eff 10/30

RETURN CALL TO CUSTOMER

COMMENTS

23672

DATE TURNED IN: 10-23-98 DATE COMPLETED: ____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10-23-98 TIME 906 AM ✓ PM ____

CSR NAME CRENDON BADGE # ____

CUSTOMER NAME Angel Velasquez BTN # 954 966 4496

ADDRESS 7530 INIGO St APT # ____

CITY MIRAMAR STATE FL ZIP CODE 33023

IS RESPONSE NEEDED? YES / NO PROJECT? ____

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Cust was switched from AT&T to COE without authorization. Cust wants to know how this happened and does not want any charges on her account of COE CO or there will be problems.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1998 - 4
Snyder - TC, 3600dm 10/12 Eff 10/27

RETURN CALL TO CUSTOMER

COMMENTS

23673

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10-23-98 TIME 5:42 AM _____ PM ✓

CSR NAME SAM Alonzo BADGE # 87362

CUSTOMER NAME Lynn POLLACK BTN # 305 945-1370

ADDRESS 1474 NE 179th St APT # _____

CITY Miami Beach STATE FL ZIP CODE 33162

IS RESPONSE NEEDED? (YES) NO PROJECT? C.S.

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer was switched without Authorization to GTE ↓ wants to know who did it & why

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1998-Ø

Snyder- TC, 240 min, ICP II 10/06 EFF 10/21

RETURN CALL TO CUSTOMER

COMMENTS

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-24-98 Time: 2:32 AM (PM) (Circle One)

CSR Name: Jenette Lee Badge #:

Customer Name: 20284 SW 85TH AVE BTN: (305) 378-6215

Address: Owen Taylor Apt.#:

City: Miami ST: FL ZIP: 33189 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

This customer's service was switched to GTE w/out his knowledge or authorization. She wants to know why and how it was placed and by whom.
OMF shows the account is active/active.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/24/98 Time: 1:41 AM (PM) (Circle One)

CSR Name: Quinsaay Cummings Badge #:

Customer Name: Sol (Kenny) Barber BTN: (305) 653-3154

Address: 18041 NE 9th Court Apt.#:

City: N. Miami Beach ST: FL ZIP: 33162 INF? (OOF?)
(Circle One)
Cont

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customers are elderly and her request is handling their bills. GTECC slammed the customer on 12/6/93 and Sonia Barber (contact name) got in contact with me to explain that his parents did not authorize a switch over, and since pt pays their bills, Sonia is asking that the situation be investigated and he be informed subsequent of that investigation

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

23676

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-24-98 Time: 10:20 (AM) PM (Circle One)

CSR Name: Angelica Vazquez Badge #: _____

Customer Name: Sergio Correa BTN: 305-261-9705

Address: 6037 SW 14 St Apt.#: _____

City: Miami ST: FL ZIP: 33144 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer wants to know who ? switched him to GTE LD thats what he wants only

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

23677

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 12-1-98 TIME 12:06 AM ____ PM X

CSR NAME Deborah Fisher BADGE # 119172

CUSTOMER NAME Maria C Leon BTN # 305 836 5032

ADDRESS 10101 NW 34th Av APT # ____

CITY Miami STATE FL ZIP CODE 33147-1511

IS RESPONSE NEEDED? (YES) NO PROJECT? GTELD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Cust switched w/o auth, cust first noticed on most recent bill, was LCI 1011 - she was slammed to them.
Supposed to have BellSouth for LD, and Att Intl.
wants the name of who auth., the date of switch.

*CBL: (305) 826-0994 ext 113 leave voicemail if no answer.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1998 Ø DMSS-N/O

RETURN CALL TO CUSTOMER

COMMENTS

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 12-1-98 Time: 8:15 (AM) PM (Circle One)

CSR Name: Angelica Vazquez Badge #:

Customer Name: Carolina Sanchez BTN:

Address: 14323 SW 171St Ter Apt.#:

City: Miami ST: FL ZIP: 33177 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

She would like to know how she got switched to GTE.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 12/1/98 Time: 11:39 (AM) PM (Circle One)

CSR Name: Naomi Smith Badge #:

Customer Name: Enrique Lastra BTN: 407-366-0846

Address: 3720 Carlsbad Ct Apt.#:

City: Gul ST: FL ZIP: 32765 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust unauthorized switch. Wants to know how & why? Call back req.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 12-01-98 Time: 4:00 AM (PM) (Circle One)

CSR Name: Norma A. Smith Badge #:

Customer Name: William Alejandro BTN: (954) 450-8875

Address: 661 SW 95 Ter Apt.#:

City: Pembroke Pine ST: FL ZIP: 33025 INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu was switch to GTE LD w/ out Auth.
and he refused to pay the bill
also wands to Know who Switch the LD.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 12/1/98 Time: 2:47 AM (PM) (Circle One)

CSR Name: Naomi Smith Badge #:

Customer Name: GLEN R SCHUMACHER BTN: 407-855-8762

Address: 4502 RAINIER DR. Apt.#:

City: ORLANDO ST: FL ZIP: 32839 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CUST UNHAPPY SWITCH. WOULD LIKE TO KNOW HOW + WHO AUTH SWITCH. CALL BACK REQ

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 12/1/98 Time: 12:30 AM (PM) (Circle One)

CSR Name: Naomi Smith Badge #:

Customer Name: Maria Navarro BTN: 954-974-1396

Address: 1035 NW 68TH TER Apt.#:

City: MARGATE ST: FL ZIP: 33063 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CUST UNAWARE. SWITCH. WHY + HOW?
CALL BACK REQ.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

23683

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 12-4-98 Time: 9:15 (AM) PM (Circle One)

CSR Name: Angelica Vazquez Badge #:

Customer Name: Belen Dominguez BTN: 305 223-5658

Address: 8940 SW 9th Ter Apt.#:

City: Miami ST: FL ZIP: 33174 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer wants to to know who switched her LD.

RESEARCH: (For Customer Service Use Only)

Cust is aware I placed o order and I CR. $4.40. she said she not req serv.

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

23684

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE December 07, 1998 TIME 11:55 AM X PM _____

CSR NAME ROSA A. MARTINEZ BADGE # 88223

CUSTOMER NAME IRMINA RUIZ BTN # 305 825 7058

ADDRESS 1950 W 34 ST APT # 111

CITY HIALEAH STATE FL ZIP CODE 33012

IS RESPONSE NEEDED? (YES) NO PROJECT? GTE 2D.

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Mrs Ruiz was switched to GTE without authorization, she want to know who did it. She is OOF.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

I apologize and offered to fill this form out, she asked if you can answer her in Spanish

thank you.

RETURN CALL TO CUSTOMER

COMMENTS 1998 Ø DMSS-N|O

23685

DATE TURNED IN: 12-8-98 DATE COMPLETED: ____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 12-8-98 TIME 6:04 AM (PM)

CSR NAME Maria Montanez BADGE # 120444

CUSTOMER NAME Casey Bates BTN # (305) 852-6316

ADDRESS 146 Burgandy APT # ____

CITY Taveriner STATE FL ZIP CODE 33070

IS RESPONSE NEEDED? YES (NO) PROJECT? ____

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

He was changed over to GTE long distance, from AT&T. He was unhappy about the change. He also said that he wasn't going to pay the GTE long distance bill.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1998 Ø DMSS-N|O

RETURN CALL TO CUSTOMER

COMMENTS

23686

DATE TURNED IN: 12-9-98 DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 12-9-98 TIME 9:31 AM _____ PM _____

CSR NAME Octavio Vargas BADGE # 119534

CUSTOMER NAME Nancy J Norton BTN # 813 885-7624

ADDRESS 6711 4th Forrestville LN APT # —

CITY Tampa STATE FL ZIP CODE 33634

IS RESPONSE NEEDED? (YES) / NO PROJECT? LD Customer Service

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer was slammed by GTE, according to her. Customer says this happened November 24 1998. Customer requesting to hear tape when of the recording when she was changed. Wants a refund on the charge made to change LD careers. Customer wants to hear response. Customer is home every day after 7:00 p.m.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1998 Ø DMSS-N/O

RETURN CALL TO CUSTOMER

COMMENTS

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 1-18-99 TIME 7:25 AM ____ PM ✓

CSR NAME Larry Welch BADGE # 120519

CUSTOMER NAME "Maria" Garcia In Care of Jose Garcia BTN # 305-226-0756

ADDRESS 3906 S.W. 107th APT # ____

CITY Miami STATE FL ZIP CODE 33165

IS RESPONSE NEEDED? YES / NO PROJECT? Long Distance

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Mrs Garcia called - 1-800-483-8267 - A male Rep Twnsend in Spanish. She began to explain that she had been Slamned 2½ months ago and had not been switched back. The Rep repleyed Sarcastickly that he was not responsable for GTE's actions. He then Refused to help Mrs. Garcia or disclose his name and told her that all charges with GTE would remain and that no Switch would be made Mrs Garcia then put her husband onthe phone and the Rep then hung up.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

~~[redacted]~~ I Filled out this form and put through to C. S.

No 1998 DMSS-N/O

RETURN CALL TO CUSTOMER

COMMENTS Just up date her on the status of the bill

23688

R

DATE TURNED IN: 12-10-98 DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 12-10-98 TIME 7:05 AM _____ PM ✓

CSR NAME Danny Welch BADGE # 120519

CUSTOMER NAME Nancy J. Norton BTN # 813-885-7624

ADDRESS 6711 [redacted] Forestvale APT # _____

CITY Tampa STATE FL ZIP CODE 33634

IS RESPONSE NEEDED? YES / NO PROJECT? long Distance

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

This customer was slammed. She wishes to hear the taped recording of this call. It was Not a telamarketer, somebody called G.T.E. for her and switched the service. She's upset of the fact someone was allowed to change her service without her knowlege. Call Her between 6:45 PM 7:15 P.M. NO EXCEPTIONS!!!

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1998 - C

DMSS - N/D

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: _____ TIME COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 12-14-98 TIME 2:15 AM _____ PM ✓

CSR NAME RICK CASTANEDA BADGE # 87064

CUSTOMER NAME NATALIA SIERRA BTN # 305 513 4847

ADDRESS 9756 NW 32ND ST APT # _____

CITY MIAMI STATE FL ZIP CODE 33172

IS RESPONSE NEEDED? (YES) NO PROJECT? GTELD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL) (IN SPANISH)

WANTS TO KNOW "IN WRITING" HOW AND WHO SWITCHED HER TO GTELD WITHOUT HER PERMISSION. HAS ALREADY SWITCHED BACK TO PREVIOUS CARRIER.

PER CALL HISTORY (ATTACHED) - WAS NOT SWITCHED BY SITEL.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1998 @ DMSS-N|D

RETURN CALL TO CUSTOMER

COMMENTS

23690

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE December 15, 1998 TIME 8:19 AM X PM _____

CSR NAME Rosa A Martinez BADGE # 88223

CUSTOMER NAME Maria L Alfonso BTN # 305 681 3374

ADDRESS 690 Curtis Dr. APT # _____

CITY O Palaca STATE FI ZIP CODE 33054

IS RESPONSE NEEDED? (YES) / NO PROJECT? LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

She was switched without authorization and received a bill, she paid it and called to cancel she received another bill, and now she want us to send her a copy of the authorization to switch company.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

I offered to fill this form out, and then somebody will contact her.

1998 © DMSS-N/O

RETURN CALL TO CUSTOMER

COMMENTS

23691

DATE TURNED IN: 12-31-98 DATE COMPLETED: ___
OOF

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 12-23-98 TIME 11:03 AM ✓ PM ___

CSR NAME JAN PE - EDITH BADGE # ___

CUSTOMER NAME IRVING RAFAL BTN # 305 944 6648

ADDRESS 17090 N.E. 14TH AVE APT # BUILDING 4 APT #312

CITY MIAMI STATE FL ZIP CODE 33162

IS RESPONSE NEEDED? (YES) NO PROJECT? LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

CUSTOMER WAS very upset and ruded, wants TO KNOW WHO SLAMMED IN August AND WILL NOT PAY HIS BILL UNTIL HE HEARS FROM US WITH AN ANSWER. LLC - TOLD HIM THE SPOKE TO NAME WAS HIS WIFE. HE SAID THAT COULDN'T BE TRUE.

1998 - Ø DMSS - N/O

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

RETURN CALL TO CUSTOMER

COMMENTS

5

DATE TURNED IN: 12-28-98 DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 12-28-98 TIME 9:20 AM ✓ PM _____

CSR NAME Mark Gonzales BADGE # _____

CUSTOMER NAME Andrea Miller BTN # 954-983-9872

ADDRESS _____ APT # _____

CITY _____ STATE _____ ZIP CODE _____

IS RESPONSE NEEDED? (YES) / NO PROJECT? LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

LD changed from Excel to GTE without permission
Customer wants to know who changed her service and
action taken to prevent another change.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1998 & DMSS-N/O

RETURN CALL TO CUSTOMER

COMMENTS

23693

DATE TURNED IN: 1-4-99 DATE COMPLETED: ____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 1-4-99 TIME 10:05 (AM) PM ____

CSR NAME Mark Gonzales BADGE # 9882

CUSTOMER NAME Guillermo Gonzales BTN # 305-758-6963

ADDRESS 8660 N.E. Miami Ct. APT # ____

CITY Miami STATE FL ZIP CODE 33138

IS RESPONSE NEEDED? (YES) / NO PROJECT? ____

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer wants to know who changed his service to GTE LD without his permission.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1998-1999 @ DMSS-NIO

RETURN CALL TO CUSTOMER

COMMENTS

5

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 01-11-1999 **Time:** 8:52 (AM) PM **(Circle One)**

CSR Name: Veronica R **Badge #:** N-A

Customer Name: Jill Tyson **BTN:** 305-386-1443

Address: 15021 SW 295T **Apt.#:**

City: Miami **ST:** FL **ZIP:** 33177 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

cu was taken over without her permission. Another LD comp had slammed her previously. So she is extremely upset this time and has informed me that she will no longer be a "victim". She demands a straight answer of how this was done and by whom.

RESEARCH: (For Customer Service Use Only)

Credited bill out ($4.75) Deactivated long distance. Instructed cu to call her local comp to restore her original long distance

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

23695

DATE TURNED IN: 11-12-98 DATE COMPLETED: ____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 11-11-98 TIME 10 10 AM ✓ PM ____

CSR NAME Ellen Hartlaub BADGE # 8068

CUSTOMER NAME Pabl B Derbogssian BTN # 941-922-2009

ADDRESS 7463 Ridge Road APT # ____

CITY Sarasota STATE Fl ZIP CODE 34238

IS RESPONSE NEEDED? YES (NO) PROJECT? GJEKD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Cust had unauthorized charge. Billing credited him but he was very angry

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1998-0 DMSS-N/C

RETURN CALL TO CUSTOMER

COMMENTS

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 8-27-98 **Time:** 9:45 (AM) PM **(Circle One)**

CSR Name: Tim **Badge #:**

Customer Name: CASER FAUARATO **BTN:** 954 983 3162

Address: 5970 SW 33RD AVE **Apt.#:**

City: FT. LAUDERDALE **ST:** FL. **ZIP:** 33212 **INF? OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: (ESCALATION) **NEEDED** **NOT NEEDED**

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

MRS. GUMBEL, CUSTOMERS DAUGHTER, WAS EXTREMELY UPSET THAT HER 90 YEAR OLD FATHER WAS SOLICETED BY G.T.E. SHE LEARNED THAT THROUGH A ~~LET~~ CONFIRMATION LETTER SIGNED BY MR. EDWARD A. MINER. THE CUSTOMER IS ALSO DEAF, WHICH MRS. GUMBEL EMPHASIZED. MRS. GUMBEL CAN BE REACHED AT PHONE NUMBER 954-587-6909. SHE WANTS TO KNOW HOW AND WHEN THE SWITCH OCCURED

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 8/31/98 **Time:** 6:00 **AM** (PM) **(Circle One)**

CSR Name: Amy B **Badge #:** 1865

Customer Name: Marsetta Jean Baptiste **BTN:** 561-733-8778

Address: 3529 Lothair Ave **Apt.#:**

City: Boynton BC **ST:** FL **ZIP:** 33436-3121 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust is very upset about service being taken over

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 11/12/98 Time: 9:15 AM (AM) PM (Circle One)

CSR Name: Brande L. Badge #: 1635

Customer Name: George J. Harrington Jr. BTN: (813) 264-0276

Address: PO Box 271291 Apt.#:

City: Tampa ST: FL ZIP: 33688 (INF?) OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: (ESCALATION NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CH was switched to GTELD w/o authorization - her grandchildren were getting points for their school for new computers by the customer being with AT&T - customer is very upset.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

23699

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 11-3-98 **Time:** 8:44 (AM) PM **(Circle One)**

CSR Name: Lisa Rosich **Badge #:** 1581

Customer Name: Armand Fortin **BTN:** 407-876-6933

Address: 11493 Willow Gardens DR. **Apt.#:**

City: Windermere **ST:** FL **ZIP:** 34786 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu was taken over by GTELD
Cu has Order # I7477684 / Oct. 1, 1998.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 09/01/98 **Time:** 9:15 **(AM) PM (Circle One)**

CSR Name: Brenda **Badge #:** CSC / Project S

Customer Name: Luis Umer **BTN:** 305-557-9101a

Address: 15120 Garnock Pl. **Apt.#:**

City: Miami Lake **ST:** FL **ZIP:** 33014a **INF? (OOF?)**
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Mr Luis Umer is receiving a bill under ~~to~~ his fathers name and his fathers phone number. None of them requested GTE service and would like to know who authorized the service. Luis Umer would like for someone to call him at (954) 846-1437 and let him know what happened.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

23701

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9-2-98 TIME _____ AM 9:35 PM _____

CSR NAME Betty Ann Phair BADGE # 82055

CUSTOMER NAME Debbie Schwartz BTN # 954 450 3220

ADDRESS 6006 N.W. 103 Terrace APT # _____

CITY Pembroke Pines STATE FL ZIP CODE 33026

IS RESPONSE NEEDED? YES / NO PROJECT? GTE ND

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customers uncle was: Eugene Klein, 18021 Biscayne Blvd, Miami, FL 33160, BTN: 305-932-4834 - mr. Klein passed away 10/97, phone disconnected 12/1/97 - mail is being forwarded to ms. Schwartz - rcv'd letter in June, 1998 thanking mr. Klein for choosing GTE ND - ms. Schwartz wrote letter to GTE telling them mr Klein was deceased. ms. Schwartz rcv'd a bill (credit of $4.58) from GTE on 9/1/98 (addressed to mr. Klein) ms Schwartz is very upset that her deceased uncle is getting correspondence from GTE, knowing that he did not choose GTE for ND service →

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

DMSS-NO ORDER

1998 = ZERO

RETURN CALL TO CUSTOMER

COMMENTS

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 9-3-98 **Time:** 1 55 p. **AM (PM) (Circle One)**

CSR Name: Lisa Rosich **Badge #:** 1581

Customer Name: George Ruehle **BTN:** 305-238-1251

Address: 9935 Marlin Rd **Apt.#:**

City: Miami **ST:** FL **ZIP:** 33157 **INF? (OOF?)**
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cw was taken over

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 9-09-98 **Time:** 10:14 (AM) PM **(Circle One)**

CSR Name: Neina F **Badge #:**

Customer Name: Vicky Alejandra Zaja **BTN:** 407-886-7562

Address: 818 Towering Oak Way **Apt.#:**

City: Apopka **ST:** FL **ZIP:** 32712 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE (ESCALATION NEEDED) **NOT NEEDED**

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer very angry because rep called and started to give explanation about GTELD, and when she ask for more information, rep said she had no more info, and hung up on customer, rep did sign customer up for GTELD. Customer wants someone to call her back, to find out who the rep is.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 9-15-98 **Time:** 3:14 **AM** (PM) **(Circle One)**

CSR Name: Jennette Lee **Badge #:** _____

Customer Name: Becky Cassella **BTN:** (305) _____

Address: P.O.Box 172401 **Apt.#:** _____

City: HLA **ST:** FL **ZIP:** 33017 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: (ESCALATION NEEDED) **NOT NEEDED**

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer was taken over by GTE and was very upset. She did not understand why, if she picks up the phone when a sales rep calls, that she is automatically switched over, (@ or w/out her knowledge.
She shows active/active in QME
Also requests to be put on Do Not Solicit List

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 8/5/98 **Time:** 3:50 **AM** (**PM**) **(Circle One)**

CSR Name: Amy Bennt **Badge #:** 1583

Customer Name: Leda Icaza **BTN:** 305-223-1404

Address: 11755 SW 18th st **Apt.#:**

City: Miami **ST:** FL **ZIP:** 33175-8727 **INF?** (**OOF?**) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (**NOT NEEDED**)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer says she went on Vacation & when she returned she found out long distance was hooked up to her 2nd line (this one) - which she normally has no long distance on

* ALSO ACCOUNT HAD SOCIAL SECURITY # WHICH IS NOT THE CUSTOMERS

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 1-10-98 TIME 12:18 (AM) PM _____

CSR NAME JoAnn MARtiner BADGE # 88296

CUSTOMER NAME [redacted] George Murray BTN # 727-521-3420 813

ADDRESS no address taken APT # _____

CITY _____ STATE _____ ZIP CODE _____

IS RESPONSE NEEDED? (YES) / NO PROJECT? GTELD "To make sure he wasn't slammed to GTE.

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Spoke w/ Telemarketer [redacted] Freddy Froes Customer thinks he's a Sup. Customer says Freddy is giving out wrong info. Claimed that he would get it forever on the ESP Plan! Customer wants to make sure he was not changed [redacted] to GTE!! Please call back!!

DMSS: No order No Site/Dmiss 1998 or 1997

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Called Customer Service no order placed!!

RETURN CALL TO CUSTOMER

COMMENTS

23708

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 09·28·98 **Time:** 11:48 (AM) PM **(Circle One)**

CSR Name: OLGA LIDIA BRAVO **Badge #:** CSC

Customer Name: NYDIA MARTY **BTN:** 305·822·9297

Address: 5680 E. 4TH AVE **Apt.#:** ———

City: HIALEAH **ST:** FL **ZIP:** 33013 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

(SPOKE W/GLORIA)
CU CLAIMS SHE CALLED A MONTH AGO CONCERNING BILL SHE RCVD FROM ETE, CLAIMS REP DID NOT RESOLVE ANYTHING. PROBLEM IS, CU NEVER AUTH ETE, REFUSES TO PAY BILL, BUT DOES NOT DENY CALLS, WILL PAY CALLS IF AT&T CHARGES HER FOR THEM. I OFFERED TO RERATE, CU UNWILLING. CU CLAIMS SHE SPOKE WITH HER LAWYER & LAWYER TOLD HER SHE WAS ~~NOT~~ LEGALLY NOT RESPONSIBLE FOR CALLS & PAYING FOR THEM. I CALLED AT&T AND HAD HER SWITCHED BACK TO THEM, AT&T THEN CALLED BELL SOUTH (LEC) TO SWITCH LINE TO THEM. EXPLAINED TO CUSTOMER THE PROCEDURE OF SENDING OUT CUSTOMER COMPLAINT.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 7-29-98 TIME 915 AM ✓ PM

CSR NAME Arteaga, Marta P BADGE # 88274

CUSTOMER NAME Sonny Phan BTN # 813 835 5570
Copy Cop Cleaning

ADDRESS _____ APT # _____

CITY _____ ST _____ ZIP _____

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)
Customer would like the recording of tape where he signed up for GTE LD for his business. Customer wants to switch carriers and says he does not want to pay ETC.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
DMSS - n/o

1997 = Ø
1998 = Ø

RETURN CALL TO CUSTOMER

BY WHOM _____ DATE _____ TIME _____

COMMENTS _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 11/10/98 TIME 10:03 AM ✓ PM _____

CSR NAME Elsa Garcez BADGE # 88908

CUSTOMER NAME Sherry [redacted] BTN # 904 673 3407

ADDRESS 7 twelve Oaks trail APT # _____

CITY Ormond Beach STATE FL ZIP CODE 32174

IS RESPONSE NEEDED? (YES) NO PROJECT? Long Distance

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Snyder placed an order for long distance without authorization from Customer. Customer has AT+T and does not want GTE long distance. Customer wants to know who authorized this change.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1998 Ø
Snyder-TC, 300dom 11/02 Eff 11/17

RETURN CALL TO CUSTOMER

COMMENTS

23711

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 11/09/98 Time: 8:10 AM PM (Circle One)

CSR Name: LAJUNE SHAW Badge #:

Customer Name: RANDY COOK BTN: 954-979-5069

Address: 3180 NW 66th Dr. Apt.#:

City: FORT Lauderda ST: FL ZIP: 33309 INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Who Authorize Switch to GTELD.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

~~Today's Date:~~ 12:05 ~~Time:~~ 11-6 AM (PM) (Circle One)

CSR Name: KWood Badge #:

Customer Name: Carlos de los Damian BTN: 561-840-1494

Address: 225 Lakewind Dr Apt.#:

City: Palm Beach ST: FL ZIP: 33480 INF? (QOF?) (Circle One)

PLEASE CIRCLE RESPONSE: (ESCALATION NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cx core for 6 mos — returned to Sch GTE LD on line w/o perm, Title das Carlos Figueroa to above address

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 11/6 **Time:** 4:05 **AM** (**PM**) **(Circle One)**

CSR Name: K Wood **Badge #:**

Customer Name: Pedro Diaz **BTN:** 305-971-0852

Address: Lot 177, 19800 SW 180th Ave **Apt.#:**

City: Miami **ST:** FL **ZIP:** 33187 **INF?** **OOF?**
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

not talk with anyone to give permission for switch

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11/6/98 **Time:** 12:25 **AM (PM) (Circle One)**

CSR Name: _____

Sales Channel: SNYDER IF / OOF (Circle One)

Customer Type: (Circle One)
Consumer – Long Distance Only
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)

Rudeness	Pricing/Calling Plan Issue	Other Complaint Types:
Unauthorized Switch	Rate Discrepancy	_____
Promotion Discrepancy	Misunderstanding	_____
Billing Issue	Payment Not Received	_____
Repair Problems	Provisioning	_____
Slammed	Cursed Customer	_____
Deceased Person		

Customer Service Group: (Circle One)

SITEL	AFNI
AFNI-TUCSON	BSC
THORNTON	PHONE MARTS
NIAGARA FALLS	REPAIR
ALPHARETTA	Other: _____

Customer First Name: Pablo Ciancio
Customer Last Name: _____
Customer Address: 4863-F Sable Pine Cir
City: N Palm Beach **State** FL **Zip** 33417-3141
Customer BTN: 561-683-4218 **Customer WTN (S):** _____
Social Security #: [redacted]
If Available, Provide:
Birthdate: NA
Language: Spanish
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: CUSTOMER REQUESTED CALLBACK YES / NO CUSTOMER THREATENING ESCALATION YES / NO

PROBLEM: (Please be very specific and describe thoroughly):
C's Complaint is that he called in Dec to cancel & asked to Rate Calls at HT and he still Refuses he says he never authorize this service as Billing Long Distance. Cust wants a letter stating She will be Credited Completely

RESEARCH/RESOLUTION (What action did you take?):

23715

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 11/4/98 Time: 11:13 (AM) - PM (Circle One)

CSR Name: LAJUNE SHAW Badge #:

Customer Name: JESUS EVELYN CORONA CORONA BTN: 941-745-2619

Address: 619 50th St E Apt.#:

City: Bradenton ST: FL ZIP: 34208 (INF?) OOF? (Circle One)

PLEASE CIRCLE RESPONSE: (ESCALATION) NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Please Stop Calling Customer. Have Already Switch CWS DREE Without their Approval. They Switch BACK. GTE (telemarketers) Continue to Call and Upset Customer even today (11/3/98).

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 11-16-98. TIME 10:39 AM _____ PM ✓

CSR NAME Judith Rodriguez BADGE # _____

CUSTOMER NAME _____ BTN # 305 238 7441

ADDRESS 9225 SW 124th APT # _____

CITY Miami STATE FL ZIP CODE _____

IS RESPONSE NEEDED? (YES) NO PROJECT? _____

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Ms Rodriguez says AOL is the LD carrier. STE LD has sent her a bill & she will not pay for it. PLEASE remove her from our phone lists & mail list ASAP. I did suggest she call Bell South & AOL & have them check switches.

Edward at OOF Billing did re-rate her bill

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

DMSS shows no DMSS-N|O

1998 ✓

RETURN CALL TO CUSTOMER

COMMENTS

23717

PROVIDER CUSTOMER

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4944

Today's Date: 8-5-99 Time: 4:15 AM (PM) (Circle One)

CSR Name: Rhonda Cole

Sales Channel: ~~SNYDER~~ Unknown IF/OOF (Circle One)

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- ~~Rudeness~~
- (~~Unauthorized Switch/Slammed~~)
- Pricing/Calling Plan Issue
- Promotion Discrepancy
- Rate Discrepancy
- Order Dispute

Cursed Customer
- Billing Issue
- Provisioning
- Deceased Person
- Miscellaneous

Other Complaint Type: _____

Customer Service Group: (Circle One)
- (SITEL)
- WENTZVILLE
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- AFNI
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Gary
Customer Last Name: Mason
Customer Address: 10714 Hackney Dr
City: Riverview State: Fl. Zip: 33569
Customer BTN: 813 671 5479 Customer WTN (S): _____
Social Security #: _____
Birthdate: _____
Language: _____
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: ESCALATION-YES ESCALATION-NO CALLBACK NEEDED-YES CALLBACK NEEDED-NO

PROBLEM: (Please be very specific and describe thoroughly):

Cust went in & Pd his bill at Local Ph. Mart. GTE Rep in Ph. Mart switched Pic & LD service & GTE Delay upset

RESEARCH/RESOLUTION: (What action did you take?):

23719

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 8-5-99 TIME 4:15 AM (PM)

CSR NAME Rhonda Cole BADGE # 120574

CUSTOMER NAME Gary Mason BTN # 813-671-5479

ADDRESS 10714 Hackney Dr APT #

CITY Riverview ST FL ZIP 33569

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)
Mrs. Mason went into the local GTE mart (Brandon Regiss Square - Brandon Blvd Brandon FL. to pay the bill and a GTE Rep ([redacted]) switch Mrs Mason Long Distrance to GTE without her permissin. This is a Phone Slam.

Service order # C4670857

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
1999
DM35-N/O

RETURN CALL TO CUSTOMER

BY WHOM _____ DATE _____ TIME _____

COMMENTS _____

23720

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/4/98 Time: 4:30 AM PM (Circle One)

CSR Name: Clara Badge #:

Customer Name: Junco Ana Luisa BTN: 305 529 5189

Address: 3194 SW 13 ST Apt.#:

City: Miami ST: FL ZIP: 33145 INF? ~~OOF?~~
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust does not want the Service
She want to cancel order

RESEARCH: (For Customer Service Use Only)

Eader Solar
I ONE

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

23721

31

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/8/98 **Time:** 10:12 **AM** (PM) **(Circle One)**

CSR Name: Elizabeth Medellin **Badge #:** CSC

Customer Name: Francisco Arroyo **BTN:** 305-884-2140

Address: 871 SE 7 PL **Apt.#:**

City: Hialeah **ST:** FL **ZIP:** 33010 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer would like to be cancelled, because she does not want GTE service.

RESEARCH: (For Customer Service Use Only)

Solar "I" order

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

87

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5-7-98 **Time:** 12:30 **AM** (PM) **(Circle One)**

CSR Name: Naomi Ramos **Badge #:** CSC

Customer Name: Mr. Basurco **BTN:** (305) 383-8496

Address: 7664 SW 152 Ave **Apt.#:** 24

City: Miami **ST:** FL **ZIP:** 33193 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Does not want GTE LD
Please Cancel order

RESEARCH: (For Customer Service Use Only)

Told Omf Reist

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED OUT COMPLETELY)
Fax to Michael Lyons - GTECC @ 972/550-8903

Today's Date: 02/18/98 Time: _____ AM (PM) (Circle One)

CSR Name: Luis Henderson Badge #: CBC "S"

Customer Name: Nedra Linquin BTN: (305) 638 3401

Address: Was 1460 NW. 26 AVE. Apt.#: _____

City: Miami St: FL ZIP: 33125 INT: (OUT)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

PROBLEM: (Pls. be very specific and describe thoroughly.)

Snyder. General Cust. Don't Want Site LD.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: Carol DATE: 3-6-98 TIME: _____

COMMENTS: Customer very happy to received a follow up phone call. Customer satisfied.

23726

LD(B)

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
Fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 02/19/98 Time: _____ AM (PM) (Circle One)

CSR Name: Luis Henderson Badge #: CSC "S"

Customer Name: Nedra Linouin BTN: (305) 638 3401

Address: Num 1440 NW. 26 AVE. Apt.#: _____

City: Miami ST: FL ZIP: 33125 INF: (OOS) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

PROBLEM: (Pls. be very specific and describe thoroughly.)

Snyder. General Cust. Don't Want GTE LD.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

23727

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lynch - GTECC @ 972/552-1903

Today's Date: 02/19/98 Time: _____ AM PM (Circle One)

CSR Name: Luis Henderson Badge #: CSC "S"

Customer Name: Gonzalez Ruben H. BTN (305) 821 8345

Address: ~~[illegible]~~ 9269 NW. 12 (TER Apt #: _____

City: Hialeah Gardens ST: FL ZIP: 33018 INT? (OUT)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

PROBLEM: (Pls. be very specific and describe thoroughly.)

Snyder General Dan'll West GTE LD.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: Carol DATE: 3-6-98 TIME: _____

COMMENTS: Call Customer Apologies to the Customer. The Customer was satisfied.

23728

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lynch - GTECC @ 972/550-8903

Today's Date: 02/10/98 **Time:** _____ **AM (PM)** (Circle One)

CSR Name: Luis Henderson **Badge #:** CSC "S"

Customer Name: Gonzalez Ruben H. **BTN:** (305) 821 8345

Address: ~~[illegible]~~ 9269 NW. 121 TER **Apt.#:** _____

City: Hialeah Gardens **ST:** FL **ZIP:** 33018 **INT:** (OOP)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

PROBLEM: (Pls. be very specific and describe thoroughly.)

Snyder General Don't Want GTE LD.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

23729

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lynge - GTECC @ 972/956-8903

Today's Date: 02/26/99 Time: _____ AM (PM) (Circle One)

CSR Name: Luis Henderson Badge #: CSC 3"

Customer Name: Gutierrez Ed. BTN: (305) 649 6535

Address: 66 NW 17 CT 2 Apt #: _____

City: Miami St: FL ZIP: 33125 DIST: (GDT) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

PROBLEM: (Pls. be very specific and describe thoroughly.)

Snyder General Cust Dont Want GTELD Servic

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: Carol DATE: _____ TIME: _____

COMMENTS: call customer, apologies to the customer and was satisfied.

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8803

Today's Date: 02/19/98 **Time:** _____ **AM** (**PM**) **(Circle One)**

CSR Name: Luis Henderson **Badge #:** CSC 3"

Customer Name: Gutierrez Ed **BTN:** (305) 649 6535

Address: 66 SW. 17CT 2 **Apt.#:** _____

City: Miami **ST:** FL **ZIP:** 33125 **INF:** (**OOF**) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

PROBLEM: (Pls. be very specific and describe thoroughly.)

Snyder General Cust Don't Want GTE LD Service

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

23731

010

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED OUT COMPLETELY)
fax to: Michael Lyons - CTECC @ 972/830-[illegible]

Today's Date: 02/19/98 Time: _____ AM (PM) (Circle One)

CSR Name: Luis Henderson Badge #: CSC "S"

Customer Name: Gallard Hitle TEL: (305) 635-8250

Address: 910 E. 29 ST Apt#: _____

City: Hialeah ST: FL ZIP: 33013 DIFF: (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust. Don't Want Site Up. (Snyder General)
He never Rob!

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: Carol DATE: 3-6-98 TIME: _____

COMMENTS: Customer very happy to received a Follow-up Phone Call. Customer was satisfied. Please do not call him back

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 02/19/98 **Time:** _____ **AM** (PM) **(Circle One)**

CSR Name: Luis Henderson **Badge #:** CSC "S"

Customer Name: Gallert Hirle **BTN:** (305) 635-8250

Address: 910 E. 29 ST **Apt.#:** _____

City: HIALEAH **ST:** FL **ZIP:** 33013 **INF:** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust. Don't Want GTE LD. (Snyder General)
He never ROTs!

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

23733

020

CUSTOMER COMPLAINT FORM - ENVIER
(MUST BE FILLED OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8902

Today's Date: 02/19/98 Time: 9:50 AM (PM) (Circle One)

CSR Name: Luis Henderson Badge #:

Customer Name: Gonzalez Lizett BTN: (305) 638 9209

Address: 101 NW 76 ST Apt#:

City: Miami St: FL ZIP: 33127 INT: (OOS) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

PROBLEM: (Pls. be very specific and describe thoroughly.)

Sender General Cust. Don't Unreal GTE LA Service

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: Carol DATE: TIME:

COMMENTS: Call Customer, already to the customer and was satisfied

23734

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10/26/98 TIME 4:44 AM PM X

CSR NAME Cari Hanson BADGE # 142155

CUSTOMER NAME Darla Arellano BTN # 813-654-8852

ADDRESS 5220 State Rd 579 N APT # Lot 59

CITY Seffner ST FL ZIP 33584

PLEASE CIRCLE RESPONSE: NEEDED NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)
Customer wants to notify GTE of a possible fraudulent company billing through GTE. Companies name is Shared Communications associated through BBG. No phone number is available for the company but customer was supplied with an address of BBG Communications, 401 W. A St, Suite 2530, San Diego, Ca 9210[illegible] This is a clearinghouse agent for international Satellite Communicatio Customer does receive collect calls from mexico but fun calls were put on her bill from an area she does not know. Customer was billed for 2 calls, one at 8 minutes for $39.92 and one at 11e min for $53.92. Customer did receive credit for these calls but would just like to make GTE aware of this company. Customer would like a call back if fraud is possibility.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
1998-0
DMSS-NO ORDER

RETURN CALL TO CUSTOMER

BY WHOM _____ DATE _____ TIME _____

COMMENTS _____

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 7/20/98 TIME 3:27 AM _____ (PM)

CSR NAME Jon Underwood BADGE # 88360

CUSTOMER NAME Gregory Booth BTN # 813-620-4488

ADDRESS _____ APT # _____

CITY _____ STATE FL ZIP CODE _____

IS RESPONSE NEEDED? YES (NO) PROJECT? GTELD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Mr Booth was contacted at his business by individuals "representing" GTE, and informed that he was being "upgraded" to a prefered billing service. He was told that this would place a cap of 25¢ on his service (he is being billed less than that by his current carrier, Network) He was then transfered to a third party for verication of his order, and when he asked if they were with GTE, they told him no, then hung up on him. He used *69 to get their number (702-952-2088). Mr. Booth was just like us to know that other companies are using our name fraddulently, in an effort to slam customers.

DMSS-N/O

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1997 = Ø

1998 = Ø

RETURN CALL TO CUSTOMER

COMMENTS

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5-498 Time: 3:34 AM (PM) (Circle One)

CSR Name: Celia Davalos Badge #:

Customer Name: DICIDES CABRERA BTN: 407-381-0879

Address: 1319 TERRE CIA AVE Apt.#:

City: ORLANDO FL ST: FL ZIP: 32087 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CUS CLAIMS HE HAS AT&T QS LONG DCR. CALLED AT&T COULDNT VERIFY BILL CANCEL ORDR - CUS WAS ADVISED THAT IF HE DIDN'T PAY HE

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/6 Time: 11:32 (AM) PM (Circle One)

CSR Name: Jose Pena Budge #:

Customer Name: ARRUA, JASMIN BTN: (305) 674-5439

Address: 801 15 st. 17 Apt.#:

City: MIAMI BEACH ST: FL ZIP: 33139 INT? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CUS claims she had called and canceled twice already not shows in cancel again

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

23740

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7

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/2/98 **Time:** 4:40 **AM (PM)** (Circle One)

CSR Name: Brenda Valenzuela **Badge #:** CSC / Project S

Customer Name: Sergio Hernandez **BTN:** (305) 545-5148

Address: 1040 NW 4TH ST **Apt.#:** 202

City: Miami **ST:** FL **ZIP:** 33128 **INT? (OOF?)** (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer was switched to GTECC and wants the order to be cancelled.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

23741

20

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/2/98 **Time:** 10:17 (AM) PM **(Circle One)**

CSR Name: Marco Peña **Badge #:** CSC

Customer Name: Anabel Ramirez **BTN:** _____

Address: 2070 SW 4 St 5 **Apt.#:** _____

City: Miami **ST:** FL **ZIP:** 33135-1841 **INF? OOF?**
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

She was switched by someone to GTE LD so she was very upset I tried to convince her to stay but she was to mad.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/2/98 Time: 10:17 (AM) PM (Circle One)

CSR Name: Marco Peña Badge #: CSC

Customer Name: Anabel Ramirez BTN:

Address: 2070 SW 4 St 5 Apt.#:

City: Miami ST: FL ZIP: 33135-1841 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: (ESCALATION) NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

She was switched by someone to GTE LD so she was very upset I tried to convince her to stay but she was to mad.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

21

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/2 Time: 2:25 AM (PM) (Circle One)

CSR Name: Jose Peña Badge #: _____

Customer Name: Rene Rodriguez BTN: 305-558-4682

Address: 1714 W 80 St Apt.#: _____

City: HIALEAH ST: Fl ZIP: 33014 INF? (OOF?) ~~(Circle One)~~

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cus was upset that somebody placed order for him. He does not need service of Long Distance.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/11/98 **Time:** 10:23 (AM) PM (Circle One)

CSR Name: Luis Henderson. **Badge #:** CS8/S

Customer Name: Carmen Calvo **BTN:** 305-556 11 61

Address: 7190 W 11 CT **Apt.#:**

City: Hialeah **ST:** FL **ZIP:** 33014 **INF?** (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cst. Was very upset because sales Rep. told her that ~~Figure She~~ he was from. ATaT and Offer. Free min.
She don't wanted GTECO.
Please Cancel. A.S.A.P.

RESEARCH: (For Customer Service Use Only)

Solar 1 order "R"
QMF: She is
MSOS: She have a bill for credit of. -37¢
~~She~~

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 7/15/98 **Time:** 6:33 **AM (PM)** (Circle One)

CSR Name: Stephanie Rudd **Badge #:** _____

Customer Name: Darlene Aleschen **BTN:** 954 584-3616

Address: 7300 NW 1st St **Apt.#:** 206

City: Plntn **ST:** FL **ZIP:** 33317 **INF? (OOF?)** (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust got switched by a Spanish female Snyder Telemarketer. Cust told Snyder Rep that she was not interested in GTE.S. Snyder kept calling cust back cust cont. to refuse. Snyder asked if she could send out info on GTE.S. Cust said yes but only for info!

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 02/19/98 **Time:** 950 **AM** (**PM**) (Circle One)

CSR Name: Luis Henderson **Badge #:** _____

Customer Name: Gonzales Lizett **BTN:** (305) 638 9209

Address: 101 NW 26 ST. **Apt #:** _____

City: Miami **ST:** FL **ZIP:** 33127 **INF?** (**OOF?**) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

PROBLEM: (Plz. be very specific and describe thoroughly.)

Snyder General Cust. Don't want GTE LD Service

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

23735

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/10/98 **Time:** 2:50 **AM** (PM) (Circle One)

CSR Name: Elicabeth Medellin **Badge #:** CSC

Customer Name: Rosa Alfaro **BTN:** 305-446-7750

Address: 0853 SW 24st **Apt.#:** —

City: Miami **ST:** FL **ZIP:** 33145 **INF?** (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer recieved a letter from GTE, and bill of .73; Gave credit for this .73 cents, she does not want the GTE service.

RESEARCH: (For Customer Service Use Only)

Solar "I" order

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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5

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/10/98 **Time:** 9:00 **AM PM (Circle One)**

CSR Name: Elizabeth Medellin **Badge #:** CSC

Customer Name: Griselda Garcia **BTN:** 305-822-9241

Address: 5364 W 14 Ave **Apt.#:** —

City: Hialeah **ST:** FL **ZIP:** 33102 **INF? OOF?**
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer recieved a credit for 3.97, and was cancled in her request.

RESEARCH: (For Customer Service Use Only)

Solar "I" order

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 7/8/98 **Time:** 3:20 **AM** (PM) **(Circle One)**

CSR Name: IRMA MIRAMONTES **Badge #:** _____

Customer Name: Airline Brooks **BTN:** 305-624-6760

Address: 3000 NW 163 St **Apt.#:** _____

City: Miami **ST:** FL **ZIP:** 33054 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

MRS BROOKS CLAIMES SHE WAS APPROACH BY SNY AT SOME STORE, BUT THE ONLY THING SHE ASKED FOR WAS INFORMATION ON RATES.

RESEARCH: (For Customer Service Use Only)

ACTIVE BME - Solar - Bill in MSOS Ca. C.

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 2-23-98 TIME 3:30 AM (PM)

CSR NAME W. BURTON BADGE # 87136

CUSTOMER NAME Christopher Edlund BTN # 305-940-7997

ADDRESS 3657 NE 168TH ST APT # NA

CITY North Miami Beach ST FL ZIP 33160

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)
Customer has received a welcom LTr (conformation of change TO GTELD) and has NOT initiated any action To change his LD carrier (AT&T). He wants any order stopped before the change takes place. He was NOT called by anyone regarding changing To GTELD.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
No occurances in 1998 DMSS file.
No occurances in 1997 DMSS file.
DMSS- TC w/300 mins 2/05 SNY

RETURN CALL TO CUSTOMER

BY WHOM _____ DATE _____ TIME _____

COMMENTS _____

23750

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/27/98 **Time:** 7:30 **AM** (PM) **(Circle One)**

CSR Name: Shelia Cramer **Badge #:**

Customer Name: Jose Vigel **BTN:** 305-255-2297.

Address: 16221 SW 144 CT. **Apt.#:**

City: Miami **ST:** FL. **ZIP:** 33177 **INF?** **OOF?**
(Circle One)

PLEASE CIRCLE RESPONSE: ~~ESCALATION~~ **NEEDED** **NOT NEEDED**

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu was not switched, but would like to know how this order was placed. I did explain to him that he was not w/ GTELD.

RESEARCH: (For Customer Service Use Only)

PIC = Restrict.
TAU = Active.

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10-29-98 TIME 7:11 AM ✓ PM ___

CSR NAME Peggy Crawford BADGE # 87636

CUSTOMER NAME Therese Taylor BTN # 727-321-217[illegible]

ADDRESS ___ APT # ___

CITY St Petersburg ST FL ZIP ___

PLEASE CIRCLE RESPONSE: (NEEDED ASAP) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)
10-28-98 TSR called her 13 YR old son early in morning before he left for school very [redacted] rude told him if he didn't stay on line with [redacted] there Chrs mother would be Chg $50.00. They sent him to third party verifying also made him miss his school bus almost cust up very upset her son was threaten like that not sure if order went through would like to know!!!

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
NO Call Hosti
DMSS-NO 1098-0

RETURN CALL TO CUSTOMER

BY WHOM ___ DATE ___ TIME ___

COMMENTS ___

23752

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-19-98 **Time:** 2:47pm **AM** (**PM**) **(Circle One)**

CSR Name: Lovonia Grant **Badge #:** _____

Customer Name: Elmer Harbin **BTN:** (407) 888-2866

Address: 3030 Peridot Ct. **Apt.#:** _____

City: Orlando **ST:** FL. **ZIP:** 32806 **INF?** (**OOF?**) **(Circle One)**

8-21-98 MSD

PLEASE CIRCLE RESPONSE: (**ESCALATION**) **NEEDED** **NOT NEEDED**

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Mr Harbin rec'd a bill from gte for intl calls to Taiwan. He never orded gte as an IXC carrier. Very moved by the letter threatening action for non-payment. Wants to verify how gte became carrier. Calls must be re-rated to .44 Cents per minute.

This case jeopardizes his current credit rating.

Billed @ 2.50

RESEARCH: (For Customer Service Use Only) 154.56 credit $192.84

44 per min $38.28 2177.28

25.00

179.56

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

23753

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/19/98 **Time:** 5:20 **AM** (PM) **(Circle One)**

CSR Name: Sami **Badge #:** _____

Customer Name: Edletha McClendon **BTN:** 904-443-7428

Address: 4500 Baymeadows **Apt.#:** 22

City: Jacksonville **ST:** FL **ZIP:** 32217 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cx signed up on street with some one, She asked numerous times if he was going to switch her long distance line. he told her no no no not de told her that she could try out the free minutes with GTE and then if she decided to switch she could call. She did not want her long distance switched this!

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-21-98 Time: 5:22 AM (PM) (Circle One)

CSR Name: Yecka Brown Badge #:

Customer Name: Mindy TORRES BTN: 305-940-1895

Address: 1682 NE 176 St Apt.#:

City: Miami ST: FL ZIP: 33162 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: (ESCALATION NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

WORK # OF CU IS 305-418-4800
CU definitely wants to be called back
at home or at work. Wants to know
how older dog contacted. Wants to hear
actual recording herself. Claims no one
up for Immediate contacted order.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10/23/98 TIME _____ AM (PM)

CSR NAME Josie Serna BADGE # 12010

CUSTOMER NAME Ramón Gutiérrez BTN # 3058336857

ADDRESS 10405 NW 32nd Ave APT # _____

CITY Miami ST FL ZIP 3314

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)

I talked to Mrs. Gutiérrez and she said GTE placed an order with her permission. She also said she is not supposed to have any LD at a. She will appreciate if GTE can provide with any information about how this happened. Perhaps any signature or some thing serious. She agreed with the advice.

* customer was very upse

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)

1998 - 0
Snyder - TC 240 min, ICPIL 9/23 EFF 10/08
Name on order is: Eva Villacorta

RETURN CALL TO CUSTOMER

BY WHOM _____ DATE _____ TIME _____

COMMENTS _____

23756

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-24-98 Time: 10:27 (AM) PM (Circle One)

CSR Name: Angelica Vazquez Badge #:

Customer Name: Joe J. Barrera BTN: 305 743-2184

Address: PO Box 500256 Apt.#:

City: Marathon ST: FL ZIP: 33050 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer very angry he doesn't receive the Bill & Dept and so & send it to him has a bal 255.43 will pay when he heass how he got switched, & also sent other bill.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

DATE TURNED IN: 12/14/98 TIME COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 12/14/98 TIME 7:37 AM _____ PM X

CSR NAME Sara Gibbons BADGE # 88029

CUSTOMER NAME Nancy Norton BTN # 8138857624

ADDRESS 6711 Forrestvale Ln APT # _____

CITY Tampa STATE FL ZIP CODE 33634

Order # IS RESPONSE NEEDED? (YES) / NO PROJECT? Customer Service

C1121296 6:30-7:30 M-F anytime sat or sun.

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Says she never placed the order, but wants the tape pulled to see who ordered this on her acct. Order # is C1121296. No order in DUSS. X-fer from AFNI.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1998 Ø DMSS-N/O

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: 10/10/98 DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10/10/98 TIME 8:00 AM ✓ PM _____

CSR NAME Monica Obregon BADGE # 119635

CUSTOMER NAME Kinsing Chiu BTN # 3053866130

ADDRESS 7700 SW 129 Ave APT # _____

CITY Miami STATE FL ZIP CODE 33183

IS RESPONSE NEEDED? (YES) NO PROJECT?

call > VIA - WORK 305 246 0108 Cell# 305 510 4348

er(wife)

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Got Bill - Account Summary ?? Bill Due Sept 28 Local Order #- I6894343 GTE Long D Sept 9 was Signed up for ICP II. She also gave me another # → 61 Y 305415156797606.

She was reffered to cust. serv - was on hold for 45 min no answer. Just very upset. doesn't want to pay charges - Local Comp. says she ~~doesn't~~ wasn't changed - but she wants to know about the bill - and who authorized the change

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

DMSS - Ø

Snyder - TC, 240min, ICP II 9/03 - cancelled pic restriction

RETURN CALL TO CUSTOMER

COMMENTS

23759

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10-7-98 **Time:** 4:01pm **AM** (**PM**) **(Circle One)**

CSR Name: Heather Harrison **Badge #:** 109-17 1558

Customer Name: Leon Frayer **BTN:** 941-953-3752

Address: 2127 Schuralle Way **Apt.#:** _____

City: Sarasota **ST:** FL **ZIP:** 34235 **INF? OOF?** **(Circle One)**

c/o Nancy Frayer

PLEASE CIRCLE RESPONSE **ESCALATION NEEDED** **NOT NEEDED**

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

(Snyder) Representative !! Req. Supervisor Nancy Frayer talked to at Snyder!
(Snyder) Supervisor Tide Sands
Confirmation # 3119559S
Nancy Frayer is the daughter-in-law of Leon Frayer Leon Frayer passed away last Nov. Mrs. Frayer is very upset because she received a confirmation letter saying Thank You For Choosing GTE!!! She has a pic brezy but local & she is also upset because her father-in-law passed away & the letter was in his name. She does not still show the acct deactivated!!

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 07/31/98 TIME 5:18 AM ___ PM ✓

CSR NAME Emmanuel Gonzalez BADGE # 88116

CUSTOMER NAME ~~Julio~~ Julio Cazeres BTN # (305)388-0728

ADDRESS 9310 SW 137th Ave APT # ___

CITY Miami ST FL ZIP 33186

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)
Customer recieved a bill under his name, which by the way was misspelled, and ~~addres~~ address. The phone number on that bill is not his phone number. He wanted to find out who placed the order if possible, and what we can do for him.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
DMSS - Snyder 7/5 TCul 360 Int ICPII act. 7/20

RETURN CALL TO CUSTOMER

BY WHOM ___ DATE ___ TIME ___

COMMENTS ___

23761

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 8-24 **Time:** 11:33 **(AM) PM (Circle One)**

CSR Name: Rick Goins **Badge #:** 1629

Customer Name: Delancy Hortense **BTN:** 305-372-1523

Address: 149 NW 11 ST **Apt.#:** 8

City: Miami **ST:** FL **ZIP:** 33136 **INF? (QOF?)**
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

She was signed up by someone else and said she wants to listen to the conformation Tape.

NEEDS CALL Back

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

23762

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 8-13-98 **Time:** 902 (AM) PM (Circle One)

CSR Name: Leigh H. **Badge #:** B5mlch1

Customer Name: Isabel Farmer **BTN:** 407-895-1512

Address: 3911 Chelsea St **Apt.#:**

City: Orlando **ST:** FL **ZIP:** 32803 **INF?** (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer has called twice wanting a letter sent verifying that serv has been canceled. Customer does not have a phone in her name, so she can not have long distance service. She wants the letter on gte letterhead.

The Order was placed 07-10-98 O# 04822135

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

CLAIMED

4

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-2-98 **Time:** 3:20 **AM** (PM) **(Circle One)**

CSR Name: Joaquin Munoz **Badge #:** _____

Customer Name: Diego Estiz **BTN:** (305) 556 7838

Address: 6680 W 2 CT 402 **Apt.#:** _____

City: Hialeah **ST:** fl **ZIP:** 33012 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust had restriction on long Distance / Actually had NO Long Distance

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 9/14/98 **Time:** 6:39 **AM (PM)** (Circle One)

CSR Name: Shelia Cramer **Badge #:**

Customer Name: Richard Johnson **BTN:** 305-436-5085

Address: 9750 NW. 48th TER. **Apt.#:**

City: Miami **ST:** FL **ZIP:** 33172 **INF? (OOF?)** (Circle One)

PLEASE CIRCLE RESPONSE: (ESCALATION NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer wants someone to contact him back. He would like to speak to the rep that signed him up. Explained that I wasn't sure he would be able to. He was very calm, but expressed how upset he was.

RESEARCH: (For Customer Service Use Only)

GMF PIC = P Pending
ANI Active

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-24-98 **Time:** 10:10 (AM) PM **(Circle One)**

CSR Name: Melecio Alvarez **Badge #:** CSC

Customer Name: AIDA, Lanzs **BTN** (305) 538-8082

Address: 901 7th st **Apt.#:** 2

City: Miami Beach **ST:** FL **ZIP:** 33139 **INF? ~~OOP~~?**
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust recive a letter Thanking her for selecting GTEL but she never request this service so she want To cancel

RESEARCH: (For Customer Service Use Only)

I order in Solar

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 04-24-98 **Time:** 10:01 (AM) PM **(Circle One)**

CSR Name: Luis Henderson **Badge #:** _____

Customer Name: Carballo Aura **BTN** (305) 220-3313

Address: 105 SW 115 ave rear. **Apt.#:** _____

City: Miami **ST:** FL **ZIP:** 33174 **INF? OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust. Req To be Cancel bcz she never auth. to be switcher TO GTE-LD. She have recive a bill for Credit. Please Cancel.

RESEARCH: (For Customer Service Use Only)

QMF. She have Loader by TYCTXD3 04/01/98. MMSDS. bill for Credit

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

23767

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-24-98 **Time:** 10:46 **AM** PM (Circle One)

CSR Name: Melecio Alvarez **Badge #:** _____

Customer Name: Jose Rubio **BTN** (305) 828-9744

Address: 230 E 52 St **Apt.#:** _____

City: Hialeah **ST:** FL **ZIP:** 33012 **INF? OOF?**
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

cust recive a bill for $6.18 From GTELD which I give credit for it because he never request GTELD so please cancel his orders ASAP

RESEARCH: (For Customer Service Use Only)

I order 2bkr MSOS (Cal Con) got a bill

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 04-24-98 **Time:** 1:57 **AM** (PM) **(Circle One)**

CSR Name: Kris Henderson **Badge #:**

Customer Name: Nuria Ramos **BTN:** (305) 324-6395

Address: 6411 SW 1st floor Up Apt RR **Apt.#:**

City: Miami **ST:** FL **ZIP:** 33130 **INF? OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CST Never Req. to TOD before. she call Twice already an she still not cancel. she was very upset & credit Ms. Ramos for full amt $13,97 and she will be Cancel ASAP

RESEARCH: (For Customer Service Use Only)

Solar has order by BSmosU1 02/13/98
Please Cancel. ASAP

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

23769

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-24-98 **Time:** 12:51 AM (PM) **(Circle One)**

CSR Name: Melecio Alvarez **Badge #:** CSC

Customer Name: Beltrani, Roberto **BTN:** (305) 596-6265

Address: 5025 SW 88 ct **Apt.#:**

City: Miami **ST:** Fl **ZIP:** 33165 **INF? OUT?**
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust recive a bill From us but she never Request GTELY so she wants To Cancel ASAP

RESEARCH: (For Customer Service Use Only)

Solar I order

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/24/98 **Time:** 2121 **AM (PM)** (Circle One)

CSR Name: Naomi Ramos **Badge #:** _____

Customer Name: ALONSO, JOSEFINA **BTN:** 305-362-3825

Address: 1810 W 56 St + 3319 **Apt.#:** _____

City: Hialeah **ST:** FL **ZIP:** 33012 **INF? (OOF?)** (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu never req GTELD SERV, req to GTECC SERV.

RESEARCH: (For Customer Service Use Only)

I order Payment Arr, OMF I

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/24/98 **Time:** 3:10 **AM** (PM) **(Circle One)**

CSR Name: Sonia Estrada **Badge #:** _____

Customer Name: Gladys Rojas **BTN:** 305-223 4635

Address: 14497 SW. 44 ST **Apt.#:** _____

City: Miami **ST:** FL. **ZIP:** _____ **INF? OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer call to cancel GTECC did not req. service would like be cancel. she also said she wont pay bill.

RESEARCH: (For Customer Service Use Only)

MSOS - bill for $13.47
Solar - I order and Inter Plan II
QUMF - Active 4/3/98

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/24/98 **Time:** 12:31 **AM** (PM) **(Circle One)**

CSR Name: Sonia Estrada. **Badge #:** _____

Customer Name: Orlando B. Sierra **BTN:** 305-461 9875

Address: 1201 SW 42 AVE **Apt.#:** 2

City: Miami **ST:** FL. **ZIP:** _____ **INF? OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust call to cancel GTECD did not request service.
B is been rcvd letter frm US.

RESEARCH: (For Customer Service Use Only)

QMF - Restriction 4/7/98
Solar - 1 order with TOTA # inter plan
MSDS - credit for = .25.

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/24/98 **Time:** 12:04 (AM) PM **(Circle One)**

CSR Name: Sonia Estrada **Badge #:** _____

Customer Name: Franaisca Lantelas **BTN:** 305 448 8725

Address: 331 Madeira AVE **Apt.#:** 02

City: Miami **ST:** FL **ZIP:** 33134 **INF? OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer call to cancel GTELD she rcvd letter frm GTE but cust said this is not her phone number # is not her last name she said already. Call 2 times to cancel any info & we still sent bills to her. she wont pay any amont because did not have Long dist.

RESEARCH: (For Customer Service Use Only)

QwF - Actve 3/05/98.
Solar - I order with TOTAL $ inter plan mSOS - she has bill for 3.94

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/24/98 **Time:** 2:18 **AM** (PM) **(Circle One)**

CSR Name: Sonia Estrada **Badge #:** _____

Customer Name: Lorenzo Hernandez **BTN:** 305-8368835

Address: 10344 NW 31th AVE **Apt.#:** _____

City: Miami **ST:** FL **ZIP:** 33147 **INF? OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer [redacted] wife's call to cancel GTEFD did not request service & she is been rcvd 2 bills she wont pay also cust wife vrfyd the Lorenzo Hernandez is dead since 4 months ago & is no way he call us to req. service.

RESEARCH: (For Customer Service Use Only)

MSOS -

Solar - "I" order in solar

EWF -

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/05/98 **Time:** 9:55 (AM) PM (Circle One)

CSR Name: Joaquin Munoz **Badge #:** _____

Customer Name: Jaime Jimenez **BTN:** 305-262 7905

Address: 6841 SW 5th TER **Apt.#:** _____

City: Miami **ST:** FL **ZIP:** 33144 **INF?** (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust is active in QMF 3/19/98
Cancel order, cust did not authorize switch

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 04.25 **Time:** 8:30 **AM** (PM) **(Circle One)**

CSR Name: Wendy A Miller **Badge #:** _____

Customer Name: Pedro Leiva **BTN:** (305)6436925

Address: 2368 NW Flagler Ter **Apt.#:** _____

City: Miami **ST:** FL **ZIP:** 33125 **INF?** ~~OOE?~~ (N) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT ~~NEEDED~~ (NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Acct was changed w/o authorization.
It is with ATT.

RESEARCH: (For Customer Service Use Only)

Sales I 03/12
Case # 3/19

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 04.25 **Time:** 7:27 **AM** (PM) **(Circle One)**

CSR Name: Wendy a Miller **Badge #:** _____

Customer Name: Jose Leiva **BTN:** (305) 891 1906

Address: 1515 NE 125th TER **Apt.#:** 208

City: N Miami **ST:** FL **ZIP:** 33161 **INF? OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer never asked for GTELD serv. We was changed w/o authorization.

RESEARCH: (For Customer Service Use Only)

Solar: I 3/12
QMF A 3/19

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/25/98 **Time:** 12:00 **AM** (PM) **(Circle One)**

CSR Name: Francisco Cossio **Badge #:** _____

Customer Name: Mera Ana **BTN:** 305 257 5245

Address: 12425 SW 259 ST **Apt.#:** _____

City: Miami **ST:** FL **ZIP:** 33032 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust claim never req GTEC's she was Angry and need Serv. Disc

RESEARCH: (For Customer Service Use Only)

Solar I order 3/3/98
Q.M.F. Active 3/7/98
Bill 3.47 May 7/98.

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 04-25-98 **Time:** 10.34 (AM) PM **(Circle One)**

CSR Name: FLAVIO ARREOLA **Badge #:**_____

Customer Name: Roberto Gonzalez **BTN:** 305 548 3036

Address: 219 NW 10 AVE 4 **Apt.#:**_____

City: Miami **ST:** FL **ZIP:** 33128 **INF? (OOE?)**
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CUS WAS NOT SASTIFIED WITH THE CALLING CUS WISH TO CANCEL.

RESEARCH: (For Customer Service Use Only)

SOLAR.

RETURN CALL TO CUSTOMER

BY WHOM:_____ **DATE:**_____ **TIME:**_____

COMMENTS:_____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/26/98 **Time:** 10:45 **AM** PM (Circle One)

CSR Name: Francisco Cossio **Badge #:**

Customer Name: Padron Alberto **BTN:** 305 826 6986

Address: 7755 W. 30 LN **Apt.#:**

City: Hialeah **ST:** FL **ZIP:** 33018 **INF?** **OOF?** (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust claim serv. disc ceases soon as possible.

RESEARCH: (For Customer Service Use Only)

Solar Deactive 4/1/98.

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/26/98 **Time:** 11:00 **AM** PM (Circle One)

CSR Name: Francisco Cossio **Badge #:**

Customer Name: Gutierez Pilar **BTN:** 3052270146

Address: 840 NW. 87 Ave **Apt.#:** 402

City: Miami **ST:** Fl. **ZIP:** 33172 **INF?** **OOF?** (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust never reg GTEL's need Serv. Disc.

RESEARCH: (For Customer Service Use Only)

Solar I order 1/26/98
OMFA. 1/30/98
Bill 10.63 Due Date may 10/98

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/26/98 **Time:** 11:10 (AM) PM **(Circle One)**

CSR Name: Francisco Cossio **Badge #:** _____

Customer Name: Chavez Rafael **BTN:** 3055765586

Address: 42 NE 28 ST **Apt.#:** _____

City: Miami **ST:** FL **ZIP:** 33137 **INF? OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust never req GTEC was switch without his permission

RESEARCH: (For Customer Service Use Only)

Solar I order 3/14/98
QMF D. 3/21/98
Bill 30.99 Due Date may/10/98

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/26/98 **Time:** 11:35 (AM) PM **(Circle One)**

CSR Name: Francisco Cossio **Badge #:** _____

Customer Name: Reina Angelica **BTN:** 305 242 2766

Address: 5490 Hayes Ld **Apt.#:** _____

City: Leisure City **ST:** Fl. **ZIP:** 33033 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust claim never req GTEL.

RESEARCH: (For Customer Service Use Only)

QMF A. 3/12/98
Solar I order 3/7/98
Bill 56.29 May/10/98

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/26 **Time:** 4:30 **AM** (PM) **(Circle One)**

CSR Name: MICHAEL FITZGERALD **Badge #:** CSC

Customer Name: JOSE ALVAREZ **BTN:** 305-442-7074

Address: 51 SW 55TH AV **Apt.#:**

City: MIAMI **ST:** FL **ZIP:** 33145 **INF?** **OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) **NOT NEEDED**

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

The caller was switched to GTELD w/o knowledge and wanted the order cancelled.

RESEARCH: (For Customer Service Use Only)

- He had a bill in MSOS
- Active, Acct# in QMF
- I and C orders in Solar

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/26/98 **Time:** 12:12 **AM** **PM** (Circle One)

CSR Name: Brenda Valenzuela **Badge #:** Project S

Customer Name: JORGE MANCO **BTN:** 305-229-6046

Address: 10930 SW 7ST **Apt.#:** 208

City: MIAMI **ST:** FL **ZIP:** 33174 **INF?** **OOF?**
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer received a bill never requested service & wants it cancelled.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/26/98 **Time:** 9:10 (AM) PM (Circle One)

CSR Name: Francisco Cossio **Badge #:** _____

Customer Name: Chopelin Aida **BTN:** 305 324 1176

Address: 1046 NW 3 ST **Apt.#:** A1

City: Miami **ST:** FL **ZIP:** 33120 **INF?** (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust claim never reg GTEL. She need switch back with ATT.

RESEARCH: (For Customer Service Use Only)

Solar I order 01/26/98
@ MFA. 1/30/98
Bill 9.24 - Credit.

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/26/98 **Time:** 10:10 (AM) PM **(Circle One)**

CSR Name: Francisco Cossio **Badge #:**

Customer Name: Gonzalez Pilar **BTN:** 3056948516

Address: 22 W. 56 CT **Apt.#:**

City: Miami **ST:** FL **ZIP:** 33126 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust claim never req GTELS, req. serv. Disc as soon as possible.

RESEARCH: (For Customer Service Use Only)

Solar I order 2/5/98
O-M F R. 2/7/98
Bill 6.96 may 10/98

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/26/98 **Time:** 10:15 (AM) PM (Circle One)

CSR Name: Francisco C0551O **Badge #:**

Customer Name: Ornelas Berando **BTN:** 305 451 5276

Address: 242 Ryan Ave **Apt.#:**

City: Key Largo **ST:** FL **ZIP:** 33037 **INF?** (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust claim never sog GTEL) need serv. Disc.

RESEARCH: (For Customer Service Use Only)

(C) MF A. 4/16/98
Lorder 2/17/98 Corder 4/10/98
Out 5.62 Due Date May/10/98

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/27/98 **Time:** 7:11 (AM) PM **(Circle One)**

CSR Name: Sonia Estrada **Badge #:**

Customer Name: Jesus Olivera **BTN:** 305-888 2498

Address: 250 E 10 ST **Apt.#:**

City: Hideah **ST:** FL **ZIP:** 33010 **INF? OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Costomer did not request service $ is been rcvd letter would like be cancel

RESEARCH: (For Customer Service Use Only)

QMF - NO INFO

Solar - I order w-th TOTAL $ Inter-T. plans

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/27/98 **Time:** _____ **AM PM (Circle One)**

CSR Name: Sonia Estrada **Badge #:** _____

Customer Name: Luis Frias **BTN:** 305-638 9416

Address: 2430 NW 36th ST **Apt.#:** _____

City: Miami **ST:** FL **ZIP:** 33142 **INF? OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust call wry irate would like be cancel because did not req service & this is 2nd time been call'd to cancel. if we do not cancel he will sue GTE.

RESEARCH: (For Customer Service Use Only)

mSOS - bill for .54¢
solar - F3 O order
QUIF - Cust is restriction R

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

Snyder

TODAY'S DATE 7-30-98 TIME 2:35 AM _____ PM ✓

CSR NAME Brian Hester BADGE # _____

CUSTOMER NAME Caridad Fernadez BTN # 561-966-1840

ADDRESS 4793 Kirk APT # _____

CITY Lake Worth STATE FL ZIP CODE _____

IS RESPONSE NEEDED? (YES) / NO PROJECT? _____

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Switched to GTE w/o authorization from @ AT;T. Wants tape researched, wants to hear tape. TC 360 FREE ICPI

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

DMS - n/o
1997 = Ø
1998 = Ø

RETURN CALL TO CUSTOMER

COMMENTS

23792

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 07-29-98 TIME 9:30 AM ✓ PM _____

CSR NAME Crystal Martinez BADGE # 88387

CUSTOMER NAME David Batista BTN # 305-556-8466

ADDRESS 8301 NW 166 Terrace APT # _____

CITY Miami STATE FL ZIP CODE 33016

IS RESPONSE NEEDED? YES / NO PROJECT? GTE LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer called in because he was switched over to GTE LD without his authorization and he's wanting to know how he got switched over and when. He's also out of franchise, so he is expecting an answer to ~~the~~ how he got switched over.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

I told the customer that we do apologize if for some reason that he did get switched over ~~to~~ without his authorization and that we would do research his account to see how he got switched + also notified him on what to do if he wants to get switched back to his current carrier.

DMSS n/o

RETURN CALL TO CUSTOMER

COMMENTS

1997 = Ø

1998 = Ø

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE July 31, 1998 TIME 5:09 AM _____ PM ✓

CSR NAME Gina Espinosa BADGE # 88044

CUSTOMER NAME Alberto Blanco BTN # (305) 825-4108

ADDRESS 6948 Willow Lane APT # _____

CITY Miami Lakes STATE FL ZIP CODE 33014

IS RESPONSE NEEDED? (YES) NO PROJECT? _____

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

On 7/15/98 this customer was switched to GTE LD w/o his consent. He is upset because he has a pic restriction and none of this should have happened.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

I called DMSS and there was an order from Snyder.

DMSS - Snyder 7/13 TCu/360 Intl + ICP II (XLD Pic Res.

RETURN CALL TO CUSTOMER

COMMENTS

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 8/1/98 TIME 9:00 AM X PM ___

CSR NAME Brenda Lewis BADGE # 11992

CUSTOMER NAME Frank Dominguez BTN # 941923602

ADDRESS 6533 Old Ranch Rd APT # ___

CITY Sarasota ST FL ZIP 34241

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)

Customer was slammed to GTE. would like to know How and by whom or he was going to call PUC on Tuesday Aug 4. Informed customer it would take at the very least a week and that we have no way of expiditing the complaint forms he stated we had until Tuesday. Told him to contact AT&T and switch back.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)

DMS- Snyder 8/6/98 TC w/ 360/ntl & ICI II act 7/1

RETURN CALL TO CUSTOMER

BY WHOM ___ DATE ___ TIME ___

COMMENTS ___

DATE TURNED IN: _____ DATE COMPLETED: _____

P.C.

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 7-28-98 TIME 10:46 AM V PM _____

CSR NAME JoAnn MARdiner BADGE # 8896

CUSTOMER NAME Albert Rosillo JR. BTN # 305-551-0947

ADDRESS Refused APT # Refused

CITY Refused STATE " ZIP CODE "

305-643-4616 (office)

IS RESPONSE NEEDED? (YES) / NO PROJECT? GTELD

PUC

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Mr. Rosillo was changed to GTELD w/o his knowled He has already called his local company they explained he was switched electronically and Mr. Rosillo did not request to be changed. He wants to know why he was switched w/o his consent!! Mr Rosillo said he would call the PUC if he does not receive an answer soon!! Call at his office (305-643-4616.) Want one answer as soon as possible!!! Thanks

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

explained he would have to call his local company! which he had already done!! Then filled out Complaint form.

DMSS Snyder 6/22 TC # 3610 Int'l # ICP II oct 7/8

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 7-27-98 TIME 9:37 AM / PM _____

CSR NAME Jesse Alonzo BADGE # 87141

CUSTOMER NAME Mrs Danny Delgado BTN # 352-622-8893

ADDRESS 2412 SE. 5th Cir. APT # _____

CITY Ocala STATE FL ZIP CODE 34471

IS RESPONSE NEEDED? (YES) / NO PROJECT? LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer was changed to GTE LD without permission. Customer wants tape pulled to see who gave the OK and wants the rep's name. She also wants full credit.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Customer has already changed back to Sprint. Bill has not printed out so gave her 1-888-483-7547 for credit.
DM50 - Snyder. 6/28 TC w/ 360 domestic activate 7/14

RETURN CALL TO CUSTOMER

COMMENTS

23797

ATE TURNED IN: _____ DATE COMPLETED: 7-21-98

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 7-21-98 TIME 6:50 AM _____ PM ✓

CSR NAME Miguel BADGE # 88730

CUSTOMER NAME Laura Pardo BTN # 305 554 7916

ADDRESS O.O.F. APT # _____

CITY _____ STATE _____ ZIP CODE _____

IS RESPONSE NEEDED? (YES) / NO PROJECT? Res Spanish

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer's BTN 305 554 7916 was switched to GTE LD without her permission. She wants to know who authorized the change. She can be reached at 305 672 7509.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

NO DMSS - '98 or '97

DMSS - N/O

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: 7-20-98 DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 7-20-98 TIME 100 AM _____ PM X

CSR NAME Carol Ann Hunt BADGE # 119972

CUSTOMER NAME Mary Bongiorno BTN # 954 724 4437

ADDRESS 9644 NW 76th St APT # _____

CITY Tamarac STATE FL ZIP CODE 33321

IS RESPONSE NEEDED? (YES) NO PROJECT? Long Distance

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Cust wants to know how & who authorized the change of LD.

Bill has been credited of $7.39.

OOF cust.

DMSS-N/O

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1997 = Ø

1998 = Ø

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE July 20, 1998 TIME 12:40 AM _____ PM ✓

CSR NAME Amy Sewell BADGE # 88514

CUSTOMER NAME Dorie Pollock (Phonic) BTN # 305 6166-4129

ADDRESS 10320 S.W. 71st Ave. APT # _____

CITY Miami STATE FL ZIP CODE 33156

IS RESPONSE NEEDED? (YES) NO PROJECT? Long Distance

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Was Changed to GTECO Without permission. Wants to know why & how it took Place. She said she received letter that she has been Changed to GTECO.

1997 = Ø

1998 = Ø

DMSS - N/O

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Called local Carrier to Bell South to see if any Changes had been made

RETURN CALL TO CUSTOMER

COMMENTS

23800

DATE TURNED IN: 7-20-98 DATE COMPLETED: ____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 7-20-98 TIME 10:10 AM ✓ PM ____

CSR NAME ____ BADGE # ____

CUSTOMER NAME Manuel Campa BTN # 305 667 7565

ADDRESS 6336 SW 33rd St APT # ____

CITY Miami STATE FL ZIP CODE 33155

IS RESPONSE NEEDED? (YES) NO PROJECT? LD (R)

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer wants to know how this change took place if he didn't request GTE Long Distance

1997 = Ø
1998 = Ø
DMSS-N/O

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Referred him to his local company and took complaint form.

RETURN CALL TO CUSTOMER

COMMENTS

DATE LOGGED IN: _____ DATE COMPLETED: _____

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CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 7-22-98 TIME 11:47 AM ✓ PM _____

CSR NAME Miguel BADGE # 88730

CUSTOMER NAME Isabel Artigas BTN # 904 276 2357

ADDRESS OOF APT # _____

CITY _____ STATE _____ ZIP CODE _____

IS RESPONSE NEEDED? (YES) NO PROJECT? Res

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

The customers daughter Emma Butler called to complain abou her mothers BTN being changed to GTELD without her permission. The customer would like her calls rerated at MCI rates, which was her long distance carrier. She also stated that there were charges from MCI for switching that she would like reviewed. Mrs Butler can be reached at (904) 269 4975.
NO DMSS '98 or '97
DMSS-N/O

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: 7-23-98 DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 7-23-98 TIME 7:35 AM _____ PM ✓

CSR NAME Connie Contant BADGE # 0832

CUSTOMER NAME: Hernan Santamaria BTN # 305 558 8706

ADDRESS 3930 W. 11th Lane APT # _____

CITY Hialeah STATE FL ZIP CODE 33012

IS RESPONSE NEEDED? (YES) NO PROJECT? GTELD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

LD was change without permission!

Wants to know why + how this happened?
Who requested change?

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Took complaint + apologized.
DMSS-Snyder 4/30 TC w/ 360 IntI and ICP II

NO DMSS for '98 or '97

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 7/23/98 TIME 11:30 (AM) PM

CSR NAME ARMANDO BANOA BADGE # 120333

CUSTOMER NAME JOSE A SOLA BTN # 305 826 8154

ADDRESS 743 W 50th Place APT # _____

CITY Hialiah STATE FL ZIP CODE 33012

IS RESPONSE NEEDED? (YES) NO PROJECT? spanish - res

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

He wants to know who switched his service to GTE from Att without his authorization, and also why

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

NO MISS for '98 or '97

DMSS - Snyder 7/1 TC w/ 3600 INTL + ICP II act. 7/17

RETURN CALL TO CUSTOMER

COMMENTS Spanish speaking agent

23804

DATE TURNED IN: July 21-98 DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE July 21-98 TIME 11.13 (AM) PM _____

CSR NAME Teresa BADGE # _____

CUSTOMER NAME Stella Lozano BTN # 305-554-9158

ADDRESS 1970 S.W 139th AVE APT # _____

CITY Miami STATE Florida ZIP CODE 33175

IS RESPONSE NEEDED? (YES) NO PROJECT? _____

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer did not requested GTE
Wants to know why Services were
transferred with authorization

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

NO Miss-'98 or '97
SNyder-TC, 360 dom 6/23 Eff 7/09

RETURN CALL TO CUSTOMER

COMMENTS

23805

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 7/31/98 **Time:** 10:00 (AM) PM **(Circle One)**

CSR Name: Angelica Vazquez **Badge #:**_____

Customer Name: Armando Vilbuena **BTN:**_____

Address: 7102 SW 13th St **Apt.#:**_____

City: Miami **ST:** FL **ZIP:** 33130 **INF? (OOF?)**
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cus wants to know how he could find out how he got switched w/out his authorization. Send him a letter stating how this happen.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM:_____ **DATE:**_____ **TIME:**_____

COMMENTS:_____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: July 31, 1998 **Time:** 6:10 **AM** (PM) **(Circle One)**

CSR Name: Lisa Madlock **Badge #:** 1563

Customer Name: Norman Blandon **BTN:** (305) 666-5151

Address: 6121 S.W. 46th TER **Apt.#:**

City: Miami **ST:** FL **ZIP:** 33155 **INF? OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust was very upset that a telemarketer signed him up for a plan when he/Nor his wife wasn't home. The cust wanted to know who authorized, what time, date, etc. He said that it better not happen again, And in Addition TAKe his name off the list

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

23807

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 9/25/98 **Time:** 8:10 (AM) PM **(Circle One)**

CSR Name: SARITA **Badge #:**

Customer Name: JAMES & GAIL BLACKBURN **BTN:** 407 880 0765

Address: 831 LAKE JACKSON CIRCLE **Apt.#:**

City: APOPKA **ST:** FL **ZIP:** 32703 **INF? OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CUSTOMER WAS ATTEMPTING TO MAKE AN EMERGENCY TELEPHONE CALL USING HER SPRINT CALLING CARD BUT HER SERVICES WITH SPRINT WERE CANCELLED DUE TO AN UNAUTHORIZED SWITCH TO GTEFL.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 9-26-98 **Time:** 2:59 **AM** (PM) **(Circle One)**

CSR Name: Jeanette Lee **Badge #:**

Customer Name: Edward Crane **BTN:** (727) 736-1803

Address: 1440 Coachlight Way **Apt.#:**

City: Dunedin **ST:** FL **ZIP:** 34698 **INF?** (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: (ESCALATION NEEDED) **NOT NEEDED**

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer was told she would get a flat rate of .07/min. She was also told that she would not be switched until she received information and looked over it; then she would could decide if she wanted it. This customer is very upset about being misled about this and will never again consider GTE for her long distance service.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 9-28-98 **Time:** 9:20 (AM) PM **(Circle One)**

CSR Name: Angelica Vazquez **Badge #:** _____

Customer Name: Gustavo Corona **BTN:** 305 387-6704

Address: 84117 SW 147th CT **Apt.#:** _____

City: Miami **ST:** FL **ZIP:** 33193 **INF? OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust wants to know how he got GTECS serv. He made several calls to Cuba for 1 hr free and he stated he would to pay me bill. He also talked to the supervisor, didnt give me any details

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 7-14-98 TIME 8:50 AM 8:50 PM _____

CSR NAME Patricia Harding BADGE # 87079

CUSTOMER NAME Larry Bach BTN # (407) 869 8676

ADDRESS 315 Spring Vally APT # _____

CITY Alta Monte STATE FL ZIP CODE 327.14

WK # (407) 648 8044 (10-5 M-F)

IS RESPONSE NEEDED? (YES) NO PROJECT? Res-LD GTE

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

letter dated July 8th stated he had been changed to GTE TOTAL CALL Plan and had referral # 1-888-289-6320 When he called that # he was on hold for 15 min and hung up and called us. ~~He~~ He wants to know who they spoke to that would have authorized the change and wants to be compensated for having to take time out of his busy schedule to research the letter. (He says his service has not been changed)

Does not want GTE currently paying 9¢ per minute.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Told him it would be researched and someone would call him back to let him know who had placed the order.

(He can be reached at his work # above)

DMSS-NO

RETURN CALL TO CUSTOMER

COMMENTS

1998 = Ø

1997 = Ø

P.C.

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 7-14-98 TIME 750 (AM) PM _____

CSR NAME Jenne Mullins BADGE # 87098

CUSTOMER NAME Laurie Hart. BTN # 941747A323

ADDRESS 2901 Southern Park W. APT # _____

CITY Bradenton STATE FL ZIP CODE 34205

IS RESPONSE NEEDED? (YES / NO) PROJECT? GTEL D.

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Cust. was slammed to GTE from AT+T. The adults in the household did not authorize this. She wants to know who authorized it - & she wants the person who "slammed" them to be in trouble.

ISB - OEP, 30 min for 12m 6/08 Eff 6/18
1998 = Ø
1997 = Ø

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 7-8-98 TIME 8:30 AM ✓ PM _____

CSA
CSR NAME RICK CASTANEDA BADGE # 87064

CUSTOMER NAME EVA TOTH BTN # 813-633-0644

ADDRESS 1608 POPLAR GLEN CT APT # _____

CITY SUN CITY CENTER STATE FL ZIP CODE 33573

IS RESPONSE NEEDED? (YES) NO PROJECT? _____

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer was called by GTE TSR on 7-7-98 at approximately 7:30 P.M. TSR told customer that GTELD had switched her to GTELD from AT&T. She, of course, told TSR she hadn't. Customer said TSR kept arguing with her stating she had been switched to GTELD. Finally customer hung up after a lot of arguing. Customer wants to know what GTE is doing about TSR's who are doing this. Customer was very upset and stated that she would go higher if needed. Customer did not get TSR's name.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

DMSS-NO ORDER No Site/DMSS 1998 or 1997

RETURN CALL TO CUSTOMER

COMMENTS

23813

DATE TURNED IN: _____ TIME COMPLETED: _____

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CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 7 July 98 TIME ~~0~~ 0252 AM _____ PM X

CSR NAME Royce Key BADGE # 142483

CUSTOMER NAME Edith Jons OR Bruce Seeman BTN # 305 758 1639

ADDRESS 630 NE 55TH ST APT # _____

CITY Miami STATE FL ZIP CODE 33137

IS RESPONSE NEEDED? (YES) / NO PROJECT? GTELD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Order 24 April 98 - OMAR Customer wants to know who authorized the switch to GTELD.

1998 = Ø

1997 = Ø

DMSS-N/O - NO DMSS

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

verified with ATN that is had happen, yes it did, informed customer about P.I.C. forms and to contact her local telephone company to be switched back.

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: 7/2/98 DATE COMPLETED: 7/2 98

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

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TODAY'S DATE 7/2/98 TIME 8:50 AM ~ PM.

CSR NAME Tracy Unger BADGE # 142994

CUSTOMER NAME Gail Hudmon BTN # 407984 5408

ADDRESS 7595 21st SW ~~Beaumont~~ APT #

CITY Vero STATE FL ZIP CODE 32968

IS RESPONSE NEEDED? (YES) / NO PROJECT? UPES

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Mrs. Hudmon was switched on Approx 3/31/98 - 4/3/98 to GTE L.D. She would like to find out who switched her and how it was done without her permission. She said another L.D. carrier (Southwest Bell), told her that it was on tape. And she would like to hear the tape.

1998 = Ø

DMSS-NO - NO DMSS 1997 = Ø

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Politely explained to her that we would investigate it and contact her when we found out something. Also apologized to her for the inconvenience.

RETURN CALL TO CUSTOMER

COMMENTS

23815

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 7-10-98 TIME 2:25 AM _____ PM _____

CSR NAME David Highnote BADGE # _____

CUSTOMER NAME Joseph & Marino BTN # 954 938 8777

ADDRESS 2201 NE 66th St. APT # _____

CITY Ft Lauderdale STATE FL ZIP CODE 33308

IS RESPONSE NEEDED? (YES) NO PROJECT? Res LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Mr. Marino recieved a mailer confirming a switch to GTE LD. He thinks his wife talked to an outbound agent an she refused the offer and Mr. Marino thinks that agent "slammed" him. He wants to hear the confirmation.

Snyder-TC, 360 DDM, ICP 6/30 Eff 7/16

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

RETURN CALL TO CUSTOMER

COMMENTS

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 08-17-98 **Time:** 4:00 **AM (PM)** (Circle One)

CSR Name: Brenda Valenzuel **Badge #:** Project S / CSC

Customer Name: INOCENTE FUENTES **BTN:** 305-823-3704

Address: 80 E. 47 ST **Apt.#:**

City: HIALEAH **ST:** FL **ZIP:** 33013 **INF? (OOF?)** (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cs very irate because he received a letter from GTELD. He never requested GTE services to be enacted ASAP. Cs would like to receive a call or a letter letting him know who put the order and who gave the permission.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 8/3/98 **Time:** 5:40 **AM** (PM) **(Circle One)**

CSR Name: Jennifer C. **Badge #:** 1507

Customer Name: Shirley Body **BTN:** 407 699 9569

Address: 3511 Med ford Rd **Apt.#:**

City: Casselberry **ST:** FL **ZIP:** 32707 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu very upset to be taken over by GTEL. Says even if we've good company she wants name removed from our mailing list since we switched her w/out asking. She feels we are rude & bold to do this and want written proof that we have cancelled her w/ GTEL & taken her out of our mailing list

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

23818

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: Aug 10, 1998 **Time:** 4:40 **AM (PM) (Circle One)**

CSR Name Harity R. **Badge #:**

Customer Name: E. Z. Hall **BTN:** (813) 885-4249

Address: 5819 Coventry Dr **Apt.#:**

City: Tampa **ST:** FL **ZIP:** 33615 **(INF?) OOF?**
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Was switch without her athurity for long distance. She would also like to be credit for service for changing. It won't be home until Aug 17, 1998 Please call her then.
+ Would like to talk to that person +

RESEARCH: (For Customer Service Use Only)

I would like to know who did that to her

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 7-12-98 **Time:** 1:45 **AM** (**PM**) **(Circle One)**

CSR Name: Rick Goins **Badge #:**

Customer Name: Permilien Pierre Louis **BTN:** (561) 265-4817

Address: 322 NW 1ST Ave **Apt.#:**

City: Delray Beach **ST:** FL **ZIP:** 33444 **INF?** (**OOF?**) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust has been taken over by GTE twice. States she has never talked to anyone from GTE. The user ID found at end of this order is TXCJXHA. Cust very irate suggesting lawsuit. Wants to know who and why! 1st time she dealt with it, 2nd time in 2 mos; made her very upset.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

23820

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 8/4/98 **Time:** 1:40 **AM** (PM) **(Circle One)**

CSR Name: Samantha DePasse **Badge #:** CSC

Customer Name: Jamaica Duarte **BTN:** (305) 696-4506

Address: 3675 NW 103 rd St **Apt.#:**

City: Miami **ST:** FL **ZIP:** 33147 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cx never heard from GTE and does not know how he was switched from AT+T.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 8/17/98 **Time:** 5:50 **AM** (**PM**) **(Circle One)**

CSR Name: _____ **Badge #:** _____

Customer Name: DANIEL R LAROCHE **BTN:** (954) 782-1728

Address: 2071 NE 1ST TERRACE **Apt.#:** _____

City: POMP BEACH **ST:** FL **ZIP:** 33060-4911 **INF? OOF?** **(Circle ~~One~~)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CH WAS SWITCHED WITHOUT HIS PERMISSION. VERY UPSET WITH GTELD. NEVER ~~WAS~~ REQUESTED GTELD

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 8/24/98 **Time:** 9:04 (AM) PM (Circle One)

CSR Name: Maria L Aispuro **Badge #:** _____

Customer Name: Julian Martinez **BTN:** (305) 821-2741

Address: 7710 W 28st H AV Apt 212 **Apt.#:** _____

City: Hialeah **ST:** FL **ZIP:** 33018 **INF?** (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust did not auth Chng | Cust wants info on who auth Chng. Cust won't pay bill, because he states he did not auth Chng. I offered him an adjustment, but he said I don't need to do any adjustment, he did not auth Chng.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 8/24/98 **Time:** 4:18 **AM (PM) (Circle One)**

CSR Name: Maria L Aispuro **Badge #:** _____

Customer Name: Benito Trejo **BTN:** (305) 246-4495

Address: 796 NW 9st Homestead **Apt.#:** _____

City: Homestead **ST:** FL **ZIP:** 33030 **INF? (OOF?)**
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust did not auth chng / Cust does not want to pay Bill. Cust will like to know who auth chng. Also Cust will like for someone to contact him and explain who auth chng.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

23825

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 8/12/98 **Time:** 3:19 **AM (PM)** (Circle One)

CSR Name: Flavio Arteola **Badge #:**

Customer Name: Rafael Rodriguez **BTN:** 305 828 5621

Address: 985 W 67th ST **Apt.#:**

City: Hialeah **ST:** FL **ZIP:** 33012 **INF? (OOF?)** (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cus was very mad Cus He Resived a letter that thanking Him For Selecting GTE and He also Resived a Bill, 4.34 For the Bill and cancel the order

RESEARCH: (For Customer Service Use Only)

In Solar, and MSOS

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

23826

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 8-12-98 **Time:** 10:38 (AM) PM **(Circle One)**

CSR Name: Neisa.F **Badge #:** _____

Customer Name: Kathy Scham **BTN:** 954-385-6851

Address: 1325 St Trapez Cir **Apt.#:** _____

City: Weston **ST:** FL **ZIP:** 33326 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: (ESCALATION NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cx was very angry. She was switched without authorizing it. Would like to hear a tape to know who authorized the switch.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

23827

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 7-31-98 **Time:** 9:25 A.M. (AM) PM **(Circle One)**

CSR Name: Tim F. **Badge #:** _____

Customer Name: JORGE J DIAGO **BTN:** 305 553 7248

Address: 9707 NW 5 TER **Apt.#:** _____

City: MIAMI **ST:** FL **ZIP:** 33172 **INF? OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: (ESCALATION) **NEEDED** **NOT NEEDED**

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CUSTOMER WOULD LIKE TO KNOW HOW THE SALES LEAD WAS RECEIVED AND WHO WAS RESPONSIBLE FOR IT. - SEE ATTACHED FORM.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

23828

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 8/6/98 **Time:** 5:43 **AM** (PM) **(Circle One)**

CSR Name: Dan Serradilla **Badge #:** _____

Customer Name: ALBERTO BURON **BTN:** 305-822-4779

Address: 1635 W. 44TH PL **Apt.#:** _____

City: HIALEAH **ST:** FL **ZIP:** 33012 **INF?** (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: [ESCALATION] NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CUST NEVER REC GTE. CUST IS VERY UPSET, HE WILL SUE GTE IF WE CHARGE HIM ANYTHING

RESEARCH: (For Customer Service Use Only)

I → 6/4/98 ALSO SS# 156-70-9846 FROM CUST
O → COMP 10/12/98

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 8/24 **Time:** 6:10 **AM** (PM) **(Circle One)**

CSR Name: Amy B **Badge #:** 1583

Customer Name: Cynthia Kooks **BTN:** 954-893-7356

Address: 7607 Coral Blvd **Apt.#:**

City: Miramar **ST:** FL **ZIP:** 33023 **INF?** **OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer was taken over by GTELD would like to speak w/ someone from Sales to find out how it happened

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 8/21/98 Time: 3:40 AM (PM) (Circle One)

CSR Name: Michelle / Nina-Rose Charles Badge #:

Customer Name: Raymond Drainville BTN: (954) 966-1608

Address: 2441 N. 37th Ave. Apt.#:

City: Hollywood ST: Fla ZIP: 33021 INF? (OOF?) 3604 (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

- CL being sent notice of a service switch 3 times
Doesn't want GTEC at all
Very, Very Irate

RESEARCH: (For Customer Service Use Only)

Please Do not solicit this person
Add Be sure no other order is placed or information sent to this person

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: August 25, 1998 **Time:** 8:30 (AM) PM (Circle One)

CSR Name: Kelly McClay **Badge #:** B5MKPM1

Customer Name: Julio Baron **BTN:** (954) 341-8384

Address: 5989 NW 74th St. **Apt.#:**

City: Parkland **ST:** FL **ZIP:** 33067 **INF?** (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer called in very upset. He says he never authorized GTE's office going & take his complaint to the State Attorney's Office because he feels that his rights were violated. I apologized to the customer and told him the needed to call his LEC & get Symphonebank to A+T. I told cust. that once his bill comes, I'd re-rate to A+T.

RESEARCH: (For Customer Service Use Only)

CM7- L/A 8-17 A/A 8-15. Cust. wants service cancelled immediately! PLEASE DO NOT SOLICIT this Customer EJ

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

23832

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: August 25, 1998 **Time:** 8:30 (AM) PM **(Circle One)**

CSR Name: Kelly McClay **Badge #:** B5MKPM1

Customer Name: Julio Baron **BTN:** (954) 341-8334

Address: 5989 NW 74th St. **Apt.#:**

City: Parkland **ST:** FL **ZIP:** 33067 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer called in very upset. He says he never authorized GTE's. He's going to take his complaint to the State Office because he feels that his rights were violated. I apologized to the customer and told him he needed to call his LEC to get switched back to AT+T. I told cust. that once his bill comes, I'd re-rate to AT+T.

RESEARCH: (For Customer Service Use Only)

QM7- P/A 8-17 A/A 8-15. Cust. wants service cancelled immediately! PLEASE DO NOT SOLICIT This Customer SJ

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 8/25/98 **Time:** 8:38 (AM) PM **(Circle One)**

CSR Name: Marea L. **Badge #:** _____

Customer Name: Cristobal Arenal **BTN:** (305) 220-5812

Address: 11056 NW 10th Ln **Apt.#:** _____

City: Miami **ST:** FL **ZIP:** 33172 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust ws real upset / cust said someone from GTE called her home / cust ws not home the GTE rep talk to one of her child got al the info from the child and ded the chng. the child told the rep that her mom + Dad were not home. Rep did not care and ded the order. Cust wants to know who was this rep.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 08/25/98 **Time:** 11:43 **(AM) PM (Circle One)**

CSR Name: Brenda **Badge #:** Project S/CSC

Customer Name: JOSE BERMUDEZ **BTN:** 305-387-2125

Address: 12972 SW 57 TER **Apt.#:**

City: MIAMI **ST:** FL **ZIP:** 33183 **INF? (OOF?)**
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer never requested GTE I.D asst. Mr. Jose Bermudez has passed away 2 yrs ago so Ms. Bermudez old. She wants to know who and why there was an order placed for service w/ GTE.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

23835

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 8/26/98 **Time:** 1:44 **AM** (PM) **(Circle One)**

CSR Name: Maria L. Aispuro **Badge #:** _____

Customer Name: Juan A Alvarez **BTN:** (305) 595-9695

Address: 5501 SW 77 Apt 101-C **Apt.#:** _____

City: Miami **ST:** FL **ZIP:** 33155 **INF?** **OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust did not auth chng/cust is upset and won't pay Bill / Credit was issue.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 8/27/98 **Time:** 1:00 **AM** **PM** **(Circle One)**

CSR Name: Amy B **Badge #:** 1865

Customer Name: James C Hunter **BTN:** 941-644-9318

Address: 1 LA Terraza **Apt.#:**

City: Lakeland **ST:** FL **ZIP:** 33813-2899 **INF?** **OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust said he had a solicitor from GTE call him and offer him a flat rate of .07/min for domestic calls - he asked the sales rep to send him information about the calling plan because he was not agreeing to a switch until he has printed information. The customer the received a confirmation ~~order~~ letter AND IS IRATE THAT HE WAS LIED TO AND HIS SERVICE TAKEN OVER

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 8/27/98 **Time:** 1:35 **AM** (**PM**) **(Circle One)**

CSR Name: ~~Jorge Flores~~ Amy B **Badge #:** 1865

Customer Name: Jorge Flores (Selary) **BTN:** 305-227-0358

Address: 13931 SW 16 ST **Apt.#:**

City: Miami **ST:** FL **ZIP:** 33175 **INF?** **OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (**NOT NEEDED**)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer very angry that an order was put in under her phone number even though she never ordered it and has notified the FCC about this

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE Aug. 24 1998 TIME 3:08 AM _____ PM ✓

CSR NAME Sara Chavez BADGE # 87423

CUSTOMER NAME Armando Madrigal BTN # (305) 822-7220

ADDRESS 4160 W 11e Ave APT # _____

CITY Hialeah STATE FL ZIP CODE 33012

IS RESPONSE NEEDED? (YES) / NO PROJECT? Customer Sec

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer is upset because he never agreed to be changed over to GTE FL. DMSS shows he was changed over to TC W360 Domestic min. in July by Snyder.

SNYDER

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Snyder. TC, 360 dom 7/29 Eff 8/13

RETURN CALL TO CUSTOMER

COMMENTS

23839

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 8/27/98 **Time:** 2:14 **AM** (PM) **(Circle One)**

CSR Name: Brenda **Badge #:** Royce S/CSC

Customer Name: FRANSISCO CASTILLO **BTN:** 305-594-4343

Address: 1005F NW 41ST **Apt.#:**

City: MIAMI **ST:** FL **ZIP:** 33178 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer never requested GTE service would like to know who placed the order that he never requested. would like for someone to call him back and let him know who place and who authorized the service for GTE.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 8/27/98 **Time:** 1:54 **AM** (**PM**) **(Circle One)**

CSR Name: Amy B **Badge #:** 1865

Customer Name: Luis Codoval **BTN:** 305-852-9774

Address: 154 Redwing RD **Apt.#:**

City: Tavernier **ST:** FL **ZIP:** 33070 **INF?** **OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer says he did not order GTEL yet was activated and would like to speak w/ a sales rep to find out ~~what was done~~ how this happened

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

23841

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 8/27/98 **Time:** 6:40 **AM** **PM** **(Circle One)**

CSR Name: Amy B **Badge #:** 1856

Customer Name: Beverly Escoffery **BTN:** 954-437-8326

Address: 9920 SW 12th St **Apt.#:**

City: PMBK PNS **ST:** FL ~~ZIP:~~ 33025-0903 **INF?** **OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust service was taken over by GTEL Customer would like to speak w/ someone from Sales to find out who authorized the switch

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

23842

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 08/25/98 TIME 11:05 AM ✓ PM _____

CSR NAME Contessa Ratcliff BADGE # 120129

CUSTOMER NAME Antionette Sirianni BTN # (954)452-7748

ADDRESS 705 S W 7th Terrace APT # _____

CITY Hallandale STATE FL ZIP CODE 33009

IS RESPONSE NEEDED? (YES / NO) PROJECT? LD - RES.

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer very upset because she was changed to GTE w/out any authorization. She would like for someone to look into this matter and get back in touch with her.

SNYDER

Snyder - TC 3100dom 7/12 EFF 7/27

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Advised customer to call their local provider and get switch back to preferred provider.

1998 = 0

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: 8/25/98 DATE COMPLETED: ___

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 8/25/98 TIME 4:52 AM ___ PM ✓

CSR NAME Bonnie Osure BADGE # 88628

CUSTOMER NAME Vivian Zaldo BTN # (305) 557-3705

ADDRESS 17800 NW 78th Pl APT # ___

CITY Miami STATE FL ZIP CODE 33015

IS RESPONSE NEEDED? (YES) / NO PROJECT? Cust Serv.

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

She rec'd a bill from GTEFL for a call to Cuba & was billed $[redacted] 7.37 to transfer & $10.53 for calls. She never authorized a change to GTE FL & only pays 63¢/min to Cuba w/ ATT. She wants to know how service was changed, who authorized changed, etc.

SNYDER

WHAT DID YOU DO TO SOLVE THIS PROBLEM? Name on order is Mark Cintron

Snyder-FL, 360 int'l, ICP II 6/11 cancelled pic. res.

1998 = ZERO

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE Aug 27, 1998 TIME 11:33 AM ✓ PM _____

CSR NAME Johnny Silvas BADGE # 119536

CUSTOMER NAME JUNIOR FRANCOIS BTN # 305-681-2460

ADDRESS _____ APT # _____

CITY Miami STATE FL ZIP CODE 33054

IS RESPONSE NEEDED? YES / NO PROJECT? _____

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Switched w/out authorization

around April or August 18, 1998

Originally had AT&T

SNYDER

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

DNR55 - Snyder 9/14 TC w/ 3610 INFO w/ ICP II act 8/31

RETURN CALL TO CUSTOMER

COMMENTS

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE August 26, 1998 TIME 3:35 AM ____ PM ✓

CSR NAME Cheryl Scott BADGE # 119217

CUSTOMER NAME Osiris Cartagena BTN # (305) 385-1197

ADDRESS 11202 SW 107 ST APT # ____

CITY Miami STATE FL ZIP CODE 33186

IS RESPONSE NEEDED? (YES) / NO PROJECT? GTE Long Distance

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

This customer was changed without his consent to GTE Long Distance on August 18, 1998. He wants to know the name of the GTE representative that authorized the switch because he said that there is no way that his wife or his son placed the calls to switch to GTE.

SNYDER

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

I pulled out the worksheet from typing it to the customer I gave him the (800) 483 7547 number to call if he has a problem with his bill.

Sply order, TALKED TO LISANDRA MARIN, TC, 360 int, order 8-16, due 8-31

No 1998

RETURN CALL TO CUSTOMER

COMMENTS

23846

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE August 7, 1998 TIME 11:40 AM ✓ PM

CSR NAME Amanda Gilley BADGE # 87959

CUSTOMER NAME Dawkin ; H. W. BTN # (305) 681-1981

ADDRESS 2520 NW 121st St. APT # X

CITY Miami ST FL ZIP 33167

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)
Customer was switched to GTE 4 out his authorization. He wants to know what happened.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
DMSO - Snyder 4/23 TC w/ 360 domestic act 7/9

RETURN CALL TO CUSTOMER

BY WHOM _____ DATE _____ TIME _____

COMMENTS _____

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE August 5, 1998 TIME 2:16 AM _____ PM X

CSR NAME Amiee Cantu BADGE # 14281

CUSTOMER NAME Mr. Vinuela BTN # 305 823 5221

ADDRESS 4405 West 12 lane APT # B

CITY Hialeah STATE Fl. ZIP CODE 33012

IS RESPONSE NEEDED? (YES) NO PROJECT? _____

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

change to GTE without an authorization.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

DMOS - Snyder 7/7 TCul 360 dem. act 7/22

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: 8-5-98 DATE COMPLETED: _____

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CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 8-5-98 TIME 8:30 AM ✓ PM _____

CSR NAME Edith Harmon BADGE # _____

CUSTOMER NAME E. Johnny Vargas Sr BTN # 941-648-0956

ADDRESS 5101 Creekview LN APT # _____

CITY Lakeland STATE FL ZIP CODE 33811-2033

IS RESPONSE NEEDED? (YES) NO PROJECT? _____

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Tape # 8336502 37 - Wants to know who authorized Switch? Telemarketer called him. He told Rep. he did NOT want to switch until he received Brochures in the mail on the Calling Plans. Rep was told this 4 OR 5 times. Stated Rep was Spanish & was having a hard time understanding him. Was Transfered to Local CCC. to switch to carrier of Choice Checked in what I could check and found no ORDERS in our System. IN or Out Bound.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

DMSS - Snyder 7/30 TC w/ 3 leo domestic lccd act 8/14

RETURN CALL TO CUSTOMER

COMMENTS

23849

Ellen Hartman

DATE TURNED IN: 8-5-98 DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 8-5-98 TIME 10:37 AM ✓ PM _____

CSR NAME Jesse Alonzo BADGE # 87141

CUSTOMER NAME Marcy Simon BTN # 561-368-5313

ADDRESS 21602 Coronado Ave APT # _____

CITY Boca Raton STATE FL ZIP CODE 33433

IS RESPONSE NEEDED? (YES) / NO PROJECT? LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer was slamed ~~by~~ ~~by~~ to GTE without her say so, she wants to talk to the person who took the order and wants to hear the tape since all our calls are monitored. She wants a hand written letter (Apology letter) from GTE to Apologize for disturbing her service and her life. If she does not recieve response she will get her attorney and burry GTE.

DMSS: 7/26 TC w/360 Dom. - THIS IS A SNYDER ORDER. THIS CUSTOMER IS EXTREMELY IRATE

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Customer is already back to ATT! Just wants a letter of Apology! - She is Ben South locos or w/e.

Rushmore

DMSS - Snyder 7/26 TC w/ 360 domestic act 8/10

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 08-04-98 TIME 4:11 AM _____ PM ✓

CSR NAME Silvester R Perez BADGE # 141293

CUSTOMER NAME Leandro & Leonor Hernandez TEL # (305) 826-4369

ADDRESS 2282 W. 74th St APT # 202

CITY Hialeah STATE FL ZIP CODE 33016

IS RESPONSE NEEDED? (YES) / NO PROJECT? GTE LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Cust was switched to GTE w/out her permission. She wants to know who did it & when ~~it is done~~ it took place.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

DMSS - Snyder 6/25 TCG 360 domestic act 7/15

RETURN CALL TO CUSTOMER

COMMENTS

23851

DATE TURNED IN: 8-4-98 DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 8-4-98 TIME 2:37 AM _____ PM 2:37

CSR NAME Woody Fox BADGE # 119708

CUSTOMER NAME MRS D H Williams BTN # 8508710143

ADDRESS 319 N. Star Ave APT # _____

CITY Panama City STATE FL ZIP CODE 32404

IS RESPONSE NEEDED? (YES) NO PROJECT? _____

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

She was switched to GTE unauthorized. She would like to know how this happened & a call back

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

DMSS Snyder 7/13 TC w/ Talk to Asia pkn+ promo act. 7/28 name on DMSS acct is Lang Hua not D.H Williams

RETURN CALL TO CUSTOMER

COMMENTS

23852

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 8-3-98 TIME 6:45 AM \ PM X

CSR NAME Janet (Sup) BADGE # 87195

CUSTOMER NAME Lesters Block BTN # 954-747-3341

ADDRESS _____ APT # _____

CITY _____ STATE _____ ZIP CODE _____

IS RESPONSE NEEDED? YES / NO PROJECT? 4001

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer was switched to GTE LD w/o permission on July 28th. He has already contacted AT&T & re-established service. He wants to make sure that any calls between July 28th & Aug 3 get re-rated at what AT&T would have charged him.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

I apologized & told him to call back in when he gets the bill from us & we would get it re-rated.

DISS. @ Snyder 7/14 TC w/ 3600 dcm 1ccd act 7/29

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: August-8-98 DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 08-05-98 TIME 1:17 AM ✓ PM _____

CSR NAME Edith Harmon BADGE # 119511

CUSTOMER NAME Pedro Albarran BTN # FL-# 407-847-8647

ADDRESS 1058 E. Lakeshore Blvd APT # _____

CITY Kissimmee STATE FL ZIP CODE 34744

IS RESPONSE NEEDED? (YES) / NO PROJECT? _____

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL) COE. - Tape # 833650237
Cust. States that BTE slammed him. Wants to know who keeps doing this. He had called several months previous as well to cancel. - No orders found in our System on In-a Net Bound. - No Orders found thru DMS. (for 3 years)
Mr. ALBARRAN is in Puerto Rico working & he is responsible for the bills on this phone #. He would appreciate it if when you find out if you will write him at: Pedro Albarran - P.O. Box 1653 Camoranes, Puerto Rico - 00729
Thanks very much.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

DMS - n/o
1997 = Ø
1998 = Ø

EH

RETURN CALL TO CUSTOMER

COMMENTS

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 8/04/98 **Time:** 11:39 (AM) PM (Circle One)

CSR Name: Crystal Biggs **Badge #:**

Customer Name: Laura Ramirez **BTN:** 305-757-4319

Address: 626 NE 69 St. **Apt.#:**

City: Miami **ST:** FL **ZIP:** 33138 **INF?** (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu was very upset that Shu was changed to GTE LD. Cu said never talk to anyone or have authorization for change.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 8/18/98 **Time:** 6:20 **AM** (**PM**) **(Circle One)**

CSR Name: Amy B **Badge #:** 1865

Customer Name: ARNAUD Apollon **BTN:** 305-688-4826

Address: 1525 NW 124th St **Apt.#:**

City: N. Miami **ST:** FL **ZIP:** 33147 **INF?** **OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED **NOT NEEDED**

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust claims he was taken over by GTELD - says he never spoke w/ anyone from GTELD

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 8/5/98 **Time:** 3:50 **AM (PM)** (Circle One)

CSR Name: Amy Benoit **Badge #:** 1583

Customer Name: Ileda Ibarra **BTN:** 305-559-2839

Address: 11755 SW 184th Apt 109 **Apt.#:**

City: Miami **ST:** FL **ZIP:** 33175-8727 **INF? (OOF?)** (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer went on vacation & when she came back she found that GTELD had taken over her account from AT+T. Also there was a social security number on the account which did NOT MATCH the customers actually social security #

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 8/04/98 **Time:** 1:35 **AM (PM)** (Circle One)

CSR Name: Crystal Biggs **Badge #:** _____

Customer Name: Eduardo Marquez **BTN:** 954-721-5023

Address: 8101 NW 70 Ter Ave **Apt,#:** _____

City: Tamarac **ST:** FL **ZIP:** 33319 **INF? (OOF?)** (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu was very upset because his Service was Changed from MCI to GTEL.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 8-3-98 **Time:** 6-34 **AM** **PM** (Circle One)

CSR Name: IRMA MIRAMONTES **Badge #:** _____

Customer Name: LUIS VILARINO **BTN:** 305-227-2863

Address: 2750 SW 114 AVE **Apt.#:** _____

City: MIAMI **ST:** FL **ZIP:** 33165 **INF?** **OOF?** (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED **NOT NEEDED**

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

MR VILARINO CALLED VERY UPSET. RECIEVED A LETTER FROM GTELD & HE DID NOT REQ SVC WITH GTELD AT ANYTIME. HIS LAST FOUR SS# 3615 & I ORDER 9100

RESEARCH: (For Customer Service Use Only)

I ORDER IN SOLA - ACTIVE IN OME

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 8/10/98 **Time:** 2:00 **AM** (PM) **(Circle One)**

CSR Name: Amy Benoit **Badge #:** 1583

Customer Name: Marcia Eaton **BTN:** 954-370-2985

Address: 9117 SW 20 ST **Apt.#:**

City: Fort Lauderdale **ST:** FL **ZIP:** 33328 **INF?** (OOE?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer says she never spoke w/anyone from GTE LD & certainly never ordered service. Yet there is a pending order for GTE.

[redacted] ** ALSO - The social security # on the account does not match customers

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 8-8-98 **Time:** 3:35 **AM** (PM) **(Circle One)**

CSR Name: Jennette Lee **Badge #:** _____

Customer Name: Mary Santos **BTN** (407) 862-1515

Address: 1111 Post Lake Place **Apt.#:** 101

City: Apopka **ST:** FL **ZIP:** 32703 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer is very upset because she got switched to GTE w/out authorization
Never wanted to be switched over.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 8/17/98 **Time:** 5:56 **AM (PM)** (Circle One)

CSR Name: Amy B **Badge #:** 1865

Customer Name: Jorge Machado **BTN:** 305-556-3295
Miguel Machado

Address: 4245 E 20 Ave ~~Hialeah FL 33012~~ **Apt.#:**

City: Hialeah **ST:** FL **ZIP:** 33012 **INF? OOF?** (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer says he never authorized switch to GTELD ~~BBI~~ Social Security Number on Account does not match customers

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 8/17/98 **Time:** 5:56 **AM (PM)** (Circle One)

CSR Name: Amy B **Badge #:** 1865

Customer Name: Jorge Machado **BTN:** 305-556-3295

Address: 4245 E 2nd Ave Miguel Machado **Apt.#:**

City: Hialeah **ST:** FL **ZIP:** 33012 **INF?** **OOF?** (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer says he never authorized switch to GTELD ~~GTE~~ Social Security Number on account does not match customers

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

23865

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 8-13 **Time:** 12:35 **AM** (PM) **(Circle One)**

CSR Name: Dan Serradilla **Badge #:**

Customer Name: DIAZ **BTN:** 305-825-9287

Address: 1055 W. 77ST **Apt.#:**

City: HIALEAH **ST:** FL **ZIP:** 33014 **INF?** (OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CX NEVER REQ GTE. THE ORDER HAS ALREADY BEEN CANCEL. HOWEVER, IN THE ACCOUNT THERE IS A SS# WHICH DOES NOT BELONG TO THE CUST. THIS IS JUST AN OTHER CASE OF AN UNLAWFULL ACT DONE BY SNYDER TELEMARKETING. THE SS# IS 575-93-0081.

RESEARCH: (For Customer Service Use Only)

I ORDER COM ON 8/5/98 *
O ORDER COM ON 8/12/98.

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

23866

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 8-2-98 **Time:** 1:57 **AM** **PM** **(Circle One)**

CSR Name: Farrah Bathright **Badge #:** _____

Customer Name: Olga Gonzalez **BTN:** 305-649-7785

Address: 1550 SW 7th St **Apt.#:** _____

City: Miami **ST:** FL **ZIP:** 33135 **INF?** **QOF?**
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cus was very upset because her service does switch w/o her permission. Mrs. Gonzalez will be going out of town for a month but expects OOO to have something in written from BTE explaining how this happened.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 8/31/98 **Time:** 4:40 **AM** (**PM**) **(Circle One)**

CSR Name: Amy B **Badge #:** 1865

Customer Name: Carmelot **BTN:** 954-766-8437

Address: 1313 NW 74th Ave FLR **Apt.#:**

City: FT L **ST:** FL **ZIP:** 33311-6059 **INF? OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer wants a sales rep to call him and tell him how he was signed up for GTELD

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

23868

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 8-27 **Time:** afternoon **AM** **PM** **(Circle One)**

CSR Name: K Wood **Badge #:**

Customer Name: St. Franc Ferrier **BTN:** 305-625-4996

Address: 2841 NW 18~~th~~ St. **Apt.#:**

City: Opa Locka, **ST:** FL **ZIP:** 33056 **INF?** **OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

did not request us - slammed by Snyder + billed for many International calls and they didn't make, also not on International plan if were making all these calls

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

23869

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 8-2-98 **Time:** 4:19 **AM** (PM) **(Circle One)**

CSR Name: R. Williams **Badge #:** _____

Customer Name: Joepie Ortiz **BTN:** 954-431-9790

Address: P.O. BOX 824902 **Apt.#:** _____

City: So Florida **ST:** FL **ZIP:** 33082 **INF?** (OOE?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer was slammed, wants to know by whom

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 8/27/98 **Time:** 12:02 **AM** (**PM**) **(Circle One)**

CSR Name: Jennifer Jo Claybourne **Badge #:** 1507

Customer Name: Brenda Bermudez **BTN:** 305 388 2736

Address: 12972 SW 57 Ter **Apt.#:**

City: Miami **ST:** FL **ZIP:** 33183 **INF?** (**OOF?**) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu wants to be called back to find out who authorize the switch to GTE and the date. Told it was through a contest to win a car at a supermarket. Repeatedly asked them to stop soliciting but it has not yet ceased.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

23871

DATE TURNED IN: Aug 27, 1998 DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE Aug 27, 1998 TIME 04:20 AM _____ PM ✓

CSR NAME Sara Chavez BADGE # 87423

CUSTOMER NAME Mickey Quittner BTN # (941) 923-1873

ADDRESS 3888 El Pinier Ct. APT # _____

CITY Sarasota STATE FL ZIP CODE 34232

IS RESPONSE NEEDED? (YES) / NO PROJECT? Customer Service

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer was Charged to GTE FD on 8-18-98 without his permission. He is very upset I didn't pull up an order and see neither did DMSS. He said someone had called him around that time but he told them he didn't want it.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1998 = ZERO

RETURN CALL TO CUSTOMER

COMMENTS

23872

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 8-27-98 TIME 9:40 AM ✓ PM _____

CSR NAME RICK CASTANEDA BADGE # 87064

CUSTOMER NAME ELISEO HERNANDEZ BTN # 3058256210

ADDRESS _____ APT # _____

CITY ODF STATE _____ ZIP CODE _____

IS RESPONSE NEEDED? (YES) NO PROJECT? GTELD Res

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Switched w/o permission 18 Aug 98. Wants to know who or how he got switched to GTELD.

Customer already switched to previous carrier and GTELD Customer Service already closed out his account.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1998 = ZERO

RETURN CALL TO CUSTOMER

COMMENTS

23873

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 8-28-98 TIME 4:15 AM _____ PM ✓

CSR NAME Miguel BADGE # 86730

CUSTOMER NAME Carribbean Trucking Express BTN # 305.636 4468

ADDRESS 9737 NW 31 St Street APT# Suite # 483

CITY Miami STATE FL ZIP CODE 33178

O.O.F

IS RESPONSE NEEDED? (YES) NO PROJECT? GTEFD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

This business was switched to GTEFD without permission on Aug 15, 1998. The customer wants to know who authorized the change and why it was done. The customer also said that they were not going to pay GTE. The customer would like a response ASAP

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

DMSS- No order - No 1998

RETURN CALL TO CUSTOMER

COMMENTS

23874

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE Aug. 31, 1998 TIME 2:20 AM ___ PM ✓

CSR NAME Amanda Gilley BADGE # 87959

CUSTOMER NAME Francis Ingram BTN # (727) 733-4902

ADDRESS 1095 Loch Haven Dr. N APT # ———

CITY Dunedin ST FL ZIP 34698

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)
Customer was switched to GTE 4 out their Authorization. He wants to know what happened.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
DMSS → shows no order
PPR = ZERO

RETURN CALL TO CUSTOMER

BY WHOM _____ DATE _____ TIME _____

COMMENTS _____

23875

DATE TURNED IN: August 28, 1998 DATE COMPLETED: August 28, 1998

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE August 28, 1998 TIME 4:11 AM ____ PM V

CSR NAME Edelmira Mills BADGE # 142600

CUSTOMER NAME Manoo Bolooki BTN # (305)636-4468

ADDRESS _____ APT # _____

CITY _____ STATE Florida ZIP CODE _____

IS RESPONSE NEEDED? (YES / NO) PROJECT? GTE long distance

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer was very upset because he was switched to GTE without his consent. He stated that he had a pic restriction with MCI and wants response on who authorized the switch. Customer also stated that he would under any circumstances pay his bill with out charge) on it.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Apologized repeatedly and filled out complaint form and told the customer we would try to solve this matter for him

RETURN CALL TO CUSTOMER

COMMENTS In Time Request I got but could not on any other information.

23876

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 8-28-98 TIME 4:17 AM _____ PM ✓

CSR NAME Brandi BADGE # 87708

CUSTOMER NAME Marko Bolushi BTN # 305-636-4468

ADDRESS _____ APT # _____

CITY _____ STATE _____ ZIP CODE _____

IS RESPONSE NEEDED? (YES) / NO PROJECT? UD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Business Account. Customer was switched to GTE UD without authorization. Would like a callback letting him know who did this.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Dmss - no order

No 1998

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: _____ DATE COMPLETED: ____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 8-24-98 TIME 4:55 AM ____ PM X

CSR NAME David Highnote BADGE # 119950

CUSTOMER NAME Efrain Enriquez BTN # 305 229 0981

ADDRESS _____ APT # _____

CITY _____ STATE FL ZIP CODE _____

IS RESPONSE NEEDED? (YES) NO PROJECT? LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Mr. Enriquez has recieved two welcome letters from what appears to be Snyder. He has never ordered GTE LD and thinks they are trying to "slam" him. Also the last letter come addressed to the wrong name. He would like to have this stopped.

DMSS-N/O
1998 = ZERO

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Tried to contact Snyder. They were very busy. I gave the customer the #.

RETURN CALL TO CUSTOMER

COMMENTS

ORIGINAL

BEFORE THE FLORIDA PUBLIC SERVICE COMMISSION

Initiation of Show Cause Proceeding Against GTE Communications Corporation. for Apparent Violation of Rule 25-4.118, F.A.C., Local, Local Toll, of Toll Provider Selection.	Docket No. 990362-TI Filed: January 9, 2001

SUPPLEMNTAL DIRECT TESTIMONY

OF

R. EARL POUCHER

On Behalf of the Citizens of the State of Florida

VOLUME III

Jack Shreve
Public Counsel

Office of Public Counsel
c/o The Florida Legislature
111 West Madison Street
Room 812
Tallahassee, FL 32399-1400

(850) 488-9330

Attorney for the Citizens
of the State of Florida

(Vol. 3 of 4)
DOCUMENT NO.
1-9-01
00387-01

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 8-31-98 TIME 10:20 AM ✓ PM _____

CSR NAME J. Lin Pino BADGE # 88510

CUSTOMER NAME Haber Yeast Depot BTN # 305 868 4274

ADDRESS 800 - 8 1ST APT # 2

CITY Miami Beach STATE FL ZIP CODE 33141

IS RESPONSE NEEDED? YES / NO PROJECT? LD (R) Spanish

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer wants to know who authorized the switch from AT&T to GTE LD. Customer speaks Spanish.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Took a complaint and gave it to Supervisor, Snyder - TC, 360 dom 8/17 eff 9/01

RETURN CALL TO CUSTOMER

COMMENTS

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DOCUMENT NO.
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23879

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE Aug. 31, 1998 TIME 8:33 AM ✓ PM _____

CSR NAME Sara Chavez BADGE # 87423

CUSTOMER NAME Yolanda Ramos BTN # (305) 512-8837

ADDRESS 6524 W. 3 Ave APT # _____

CITY Hialeah STATE FL ZIP CODE 33012

IS RESPONSE NEEDED? YES / NO PROJECT? Customer Service

After 6:00

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer was Changed to GTE without their permission they received a bill & they are not going to pay it because they never Changed over.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Snyder - TC, 360 dom 7/26 Eff 8/10

RETURN CALL TO CUSTOMER

COMMENTS

23880

DATE TURNED IN: _____ DATE COMPLETED: ____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 8/21/98 TIME 4:15 AM ____ PM X

CSR NAME Janet (Sup3) BADGE # _____

CUSTOMER NAME Mr Kravetz BTN # 561-582-6038

ADDRESS _____ APT # _____

CITY _____ STATE FL ZIP CODE _____

IS RESPONSE NEEDED? (YES) NO PROJECT? 4001

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Mr Kravetz received a letter saying "per your request ? we will be adding Total Call program with 360 free min to your account. If you have any questions or wish to change your request call 1-888-289-6320 within 14 days of the date of this letter". He called in because he never requested us. And it rang to Snyder. He spoke to A Flora Leguia who said she couldn't find an order And didn't have a Supervisor around. She said she would take care of it for him. His question to us is how many people are receiving this letter out of

over →

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

I apologized and told him I would take this up to a higher level.

Dmss-n/o

1998 = ZERO

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: 17 Aug 98 DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 17 Aug 98 TIME 11 AM ✓ PM _____

CSR NAME Kathy Sanders BADGE # 87911

CUSTOMER NAME Diane K. D'Alessio BTN # (941) 753-2966

ADDRESS 3946 37 ST. Court W. APT # _____

CITY Bradenton STATE FL ZIP CODE 34205

IS RESPONSE NEEDED? YES / NO PROJECT? LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer was switched from Sprint to OTC without her permission. Customer would like to know who did this and why. Customer was very upset about switch

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Customer was told that she would be switched back within 24 hrs back to Sprint by local orders.

DMSS-N/O: No 1998

RETURN CALL TO CUSTOMER

COMMENTS

23882

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 8-20-98 TIME 8:28 AM ✓ PM _____

CSR NAME Brandi BADGE # 87708

CUSTOMER NAME Gilma Pina BTN # 954-983-1434

ADDRESS _____ APT # _____

CITY _____ STATE FL ZIP CODE _____

IS RESPONSE NEEDED? (YES) NO PROJECT? LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer was switched to GTE w/out authorization. She is very upset and would like someone to call her back letting her know who placed this order

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

DMSO n/o
1998 = Ø

RETURN CALL TO CUSTOMER

COMMENTS

TE TURNED IN: 8-19-98 DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 8-19-98 TIME 6:10 AM _____ PM ✓

CSR NAME W. BURTON BADGE # _____

CUSTOMER NAME Christopher Flood BTN # 727-847-9080

ADDRESS Not given APT # _____

CITY _____ STATE _____ ZIP CODE _____

IS RESPONSE NEEDED? YES (NO) PROJECT? GTELD - outbound

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

customer was called regarding GTELD. Customer declined changing. Outbound representative called the customer a "wimp" Customer was very Irate.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

checked for call history within SITEL with negative results.

DNRS n/o - No 1998

RETURN CALL TO CUSTOMER

COMMENTS

23884

DATE TURNED IN: _____ DATE COMPLETED: ____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 8-17-98 TIME 1:15 AM X PM _____

CSR NAME Patricia Harding BADGE # 87079

CUSTOMER NAME Daniel Sanders BTN # 941 365-9236

ADDRESS 2017 Randa Blvd APT # _____

CITY Sarasota STATE FL ZIP CODE 34235

IS RESPONSE NEEDED? (YES / NO) PROJECT? LD RES

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Received a letter of LD confirmation telling him if he had any questions or wanted to make any changes to call 888-289-6320 within 14 days" He did not authorize or want GTE. Wants to know who entered and order for him and who in his home authorized it. (No change was made, but he was angry because if the letter had been misplaced or set aside his LD would have been changed) The letter came from Bethesda MD, ~~Esen~~ signed Edward A Miller director of Int'l Marketing

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Called Local and found out no change has been ~~made~~ made, no order pending that they can see.

DMSS-n/o; No 1998

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 8.20.98 TIME 9:30 (AM) PM _____

CSR NAME Andrea L. Myers BADGE # 120332

CUSTOMER NAME Antonio Vasquez BTN # ~~305.919.0819~~

ADDRESS 17052 NW 56th CT APT # _____

CITY Miami STATE FL ZIP CODE 33055

BTN # 305.620.8760 (Hm)

IS RESPONSE NEEDED? YES / NO PROJECT? _____

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Mr. Vasquez was switched to GTE w/out his permission. He had AT&T and would like to keep them. Mr. Vasquez is requesting that someone let him know how (and who) ~~made~~ this change was made w/out his knowledge.

SNYDER

1998 = ZERO

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

I contacted Jackie (888.483.7547) and she said she would handle it. She was going to ~~take~~ cancel any order and further assist him.

NMSS - (under Rissette Corella) - Sny 7/13 JC w/360 done act 7/28

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: 8-20-98 DATE COMPLETED: ___

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 8-20-98 TIME 4:17 AM ___ PM ✓

CSR NAME Joy Rogers BADGE # 120615

CUSTOMER NAME Deokie Mohan BTN # 305 759 7674

ADDRESS 7800 NW 2nd Ave APT # 10

CITY Miami STATE FL ZIP CODE 33150

IS RESPONSE NEEDED? (YES) NO PROJECT? ___

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Snyder slammed this lady - OOF Please investigate and put her back with the carrier of her choice.

SNYDER

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Advised Ms to call local orders to get carrier changed.
Miss Snyder 8/2 TC 3leo domestic act 8/17

RETURN CALL TO CUSTOMER

COMMENTS

23887

DATE TURNED IN: _____ DATE COMPLETED: _____

69

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 8-20-98 TIME 7:39 AM _____ PM ✓

CSR NAME Jose Bermano BADGE # 119276

CUSTOMER NAME Luis Benitez BTN # 305 363 5312

ADDRESS 10251 SW 132nd AVE APT # _____

CITY Miami STATE FL ZIP CODE _____

IS RESPONSE NEEDED? (YES) / NO PROJECT? _____

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer was switched by Snyder to GTE LD and he did not request the order. He would like to find out who authorized the change.

SNYDER

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

DMSS - Snyder 8/12 TC 360 Intl w/ ICP II act 8/27

RETURN CALL TO CUSTOMER

COMMENTS

23888

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 8/20/98 TIME 10:12 AM ✓ PM _____

CSR NAME Elsa Garcez BADGE # 88908

CUSTOMER NAME Lester Block BTN # 9547473341

ADDRESS 10101 Sunrise Lakes BLVD APT # _____

CITY Sunrise STATE FL ZIP CODE 33322

IS RESPONSE NEEDED? (YES) / NO PROJECT? Long Distance

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer was slammed to GTE. Is very upset mad because of change. Wants to be put back with AT&T. Order taken on ~~Aug~~ July 28. Effective on Aug. 3. Cust. wants a confirmation and explaination of change to AT+T.

SNYDER

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

MISS - Snyd 7/14 X. w/ 360 dom. act 7/29

1998 = ZERO

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: _____ DATE COMPLETED: ____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 8-18-98 TIME 2:02 AM ____ PM ✓

CSR NAME Brandi BADGE # 87708

CUSTOMER NAME Carole Bissonette BTN # 954-791-0485

ADDRESS _____ APT # _____

CITY _____ STATE _____ ZIP CODE _____

IS RESPONSE NEEDED? (YES) / NO PROJECT? LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer was switched to GTE LD w/out authorization Would like a call back letting her know who did this and why. If she isn't home leave a message w/ a number because she wants to speak to someone about this.

SNYDER

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

DMOS - Snyder 6/29 IC w/ 360 doxx, act 7/15

RETURN CALL TO CUSTOMER

COMMENTS

23890

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 8-20-98 TIME 8:33 AM ✓ PM _____

CSR NAME Brandi BADGE # 87708

CUSTOMER NAME Sonia Abay BTN # 305-382-3238

ADDRESS _____ APT # _____

CITY _____ STATE FL ZIP CODE _____

IS RESPONSE NEEDED? (YES) / NO PROJECT? LO

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer was switched to GTE LO w/out authorization. Very upset, and would like a callback letting her know who did this and why.

SNYDER

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

DMSS - Snyder 7/20 TC 3100/1+1 w/ ICPII act. 8/4

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 8-14-98 TIME 10:24 AM ✓ PM _____

CSR NAME Brandi BADGE # 87708

CUSTOMER NAME Mercedes Bakhi BTN # 305-223-1415

ADDRESS 14312 SW 48 LN APT # _____

CITY Miami STATE FL ZIP CODE 33175

IS RESPONSE NEEDED? (YES) NO PROJECT? UN

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer was switched to GTE with out authorization. would like a callback letting her know who did this and why.

SNYDER

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Snyd- TC, 360int., ICP II, ICC 8/05 Eff 8/20 1998 = Ø

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: 8-20-98 DATE COMPLETED: ____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE August TIME 10:10 AM ✓ PM ____

CSR NAME Edith Damon BADGE # 11951

CUSTOMER NAME Mrs. Dan Hedrick BTN # 305 386 3783

ADDRESS ____ APT # ____

CITY ____ STATE ____ ZIP CODE ____

IS RESPONSE NEEDED? YES / NO PROJECT? ____

Tape # 834 330 771

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL) (found in DMSS ~~Agreement~~ this Info not ~~Agreement~~ cust

Andrea Pascoe (Snyder) Aug 10th - Snyder, Order Customer Very irate - Demanded to know right now who switched her L.D. - That she did not authorized the switch. Stated if she did not get the name that was calling PUC. Called recorded. Instructed cust a complaint form ~~was~~ could to be filled out & investigated. Cust Refused. - Call turned over to Supervisor Kay Carter - Cust still refused for complaint to be filled out.

8-18-98 date of change

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

DMSS Snyder 8/10 TC 4 360 domestic act 8/25

RETURN CALL TO CUSTOMER

COMMENTS

SNYDER

23893

DATE TURNED IN: 8/17/98 DATE COMPLETED: ___

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE August 17 '98 TIME 5:15 AM ___ PM ✓

CSR NAME Linda Hernandez BADGE # 120453

CUSTOMER NAME didn't get name - hung up BTN # (305) 383 2120

ADDRESS DAVID LARRAURI 15590 SW 57th St APT # ___

CITY Miami STATE FL ZIP CODE 33193

IS RESPONSE NEEDED? (YES / NO) PROJECT? ~~Inbound~~ LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer was very upset because he recieved a letter from us thanking him for chosing GTE LD. He did not authorize the switch and wanted to know how he was changed w/out his permission. He also said there was no one else in home who would have made the switch. He wanted to know what could be done to find out who switched him & he stated that he wanted them to "get in trouble because it is illegal to change w/out consent." I had tried transfering to other departments but they couldnt help because he's not even a local custom. I told him he could speak to a supervisor (Kenwick) so maybe he could do call history (or get the info. needed to one.)

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

DMCS - Snyder D/G TC w/ 3co domestic act 5/24

RETURN CALL TO CUSTOMER

COMMENTS

SNYDER

23894

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 8-20-98 TIME 3:19 AM _____ PM ✓

CSR NAME Jose Betancourt BADGE # 119276

CUSTOMER NAME Paul Kern BTN # 941 359 9966

ADDRESS 4903 Linsey Ct APT # _____

CITY Sarasota STATE FL ZIP CODE 34243

IS RESPONSE NEEDED? YES / (NO) PROJECT? _____

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Mr Kern is saying that he did not give permission to be switched to GTE LP Snyder placed an order and had him switched. He remembers specifically saying he did not want GTE but they put in an order anyway.

SNYDER

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

He has been switched to his former carrier.

DMSS - Snyder 8/116 TC 3160 domestic act 8/31

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: 8/17/98 DATE COMPLETED: 8/17/98

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

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TODAY'S DATE 8/17/98 TIME 7:35 AM ____ PM ✓

CSR NAME Eva Cabrera BADGE # 142927

CUSTOMER NAME Karen Koenig BTN # 561-278-0848

ADDRESS 3692 Lone Pine Road APT # ____

CITY Del Bay STATE FL ZIP CODE 33445

IS RESPONSE NEEDED? (YES) / NO PROJECT? ____

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer states that she was changed to GTE long distance without her authorizatio on Aug. 14, 1998. Wants proof of taped conversation authorizing change. States that is going to file report with police department

SNYDER

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Dmos - Snyder 8/10 TC w/ 360 Int'l ICPII act. 8/25 No/1998

RETURN CALL TO CUSTOMER

COMMENTS

:TE TURNED IN: 8-17-98 DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 8-17-98 TIME 5:55 AM _____ PM ✓

CSR NAME Connie Contant BADGE # 120832

CUSTOMER NAME Elena Mirabal BTN # 3052275463

ADDRESS 233 NW 132 PL. APT # _____

CITY Miame STATE FL ZIP CODE 33182

IS RESPONSE NEEDED? (YES) / NO PROJECT? _____

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Mrs Mirabal receive GTE as her LD company without her authorization. Is very upset because she has a Freeze on this account w/ local company. Want to know why this happened!

SNYDER

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Took complaint, Apologized, Apologized.
Dmsg - Snyder 8/3 TCW 3600 Intl ICPII CXLD b/c PIC Res.
No 1998

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: 8-12-98 DATE COMPLETED: ____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 8-17-98 TIME 3:39 AM ____ PM ____

CSR NAME Woody Fox BADGE # 119708

CUSTOMER NAME Mrs. Anthony Scire BTN # 7278626271

ADDRESS 9470 Lakeview DR APT # ____

CITY New Port Richey STATE FL ZIP CODE 34654

IS RESPONSE NEEDED? (YES) / NO PROJECT? ____

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Cust. was switched to GTE without permission. She would like a tape pulled to find out how this was done.

NO DVC FOUND 8-19-98.

WHAT DID YOU DO TO SOLVE THIS PROBLEM? ORDERED DVC 8-18-98

DMSS - 7/3 TC w/ 360 domestic; Kup OCL; In Touch; 2 ccds; act 7/0 also changed # 727-869-8188

Site 40, 7/3 Cust Id ID 158272414; DMSSID 4539067

RETURN CALL TO CUSTOMER

COMMENTS I couldn't find anything to back myself with. I couldn't locate a tape or DVC.

Johnny Silvas

23898

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 03/14/03 TIME 10:15 AM ✓ PM _____

CSR NAME Teresa Ratcliff BADGE # 120121

CUSTOMER NAME Tisch - Tamarac BTN # 954-484-9016

ADDRESS 501 Emerald Isle E-101 APT # _____

CITY Lauderdale Lakes STATE FL ZIP CODE 33313

IS RESPONSE NEEDED? (YES / NO) PROJECT? LD-RIS.

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

The customer was charged for July 4th to site LD without authorization. He would like for someone to be out to investigate the charge.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Advised customer to call local carrier and have them switch his line to his current carrier.

SNY - TC, 360 dam 7/01 Eff 7/17
No 1998 DMSS

RETURN CALL TO CUSTOMER

COMMENTS

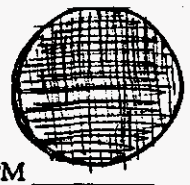
23909

DATE TURNED IN: _____ DATE COMPLETED: _____

Buss acct
Customer wouldn't give name of bus

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)



TODAY'S DATE 8-13-98 TIME 11:42 AM ✓ PM _____

CSR NAME Crystal Schofield BADGE # 120221

CUSTOMER NAME Alina Salumm BTN # 305-470-[redacted]8588

ADDRESS 1414 North West 107th av APT # _____

CITY Miami STATE FL ZIP CODE 33172

IS RESPONSE NEEDED? (YES) / NO PROJECT? _____

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer was switched from ATT to GTE on Aug 1st. Customer is very upset she wants to hear the tape. She's mad because we can't tell her who placed to order by looking at the order

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

DMSG - Snyder 7/29 TC w/ 360 Int'l ICP# act. 8/13 - No 1998

RETURN CALL TO CUSTOMER

COMMENTS

23910

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 8-12-98 TIME 2:20 AM _____ PM ✓

CSR NAME BRIAN HESTER BADGE # 87915

CUSTOMER NAME LUCIEN BLANGER BTN # 954-989-2075

ADDRESS 5461 LAGOON DR APT # _____

CITY FT LAUDERDALE STATE FL ZIP CODE _____

IS RESPONSE NEEDED? (YES) NO PROJECT? GTE LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

BELL SOUTH LOCAL - MCI LD # WAS SWITCHED TO GTE LD W/O AUTHORIZATION. WANTS TO HEAR TAPE & WHO AUTHORIZED CHANGE.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

SNYDER ORDER 7-21-98 TC 360 DOMESTIC TRANSFERRED HIM TO MCI TO GET RE-ESTABLISHED

1998=0

RETURN CALL TO CUSTOMER

COMMENTS

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 8-10-98 TIME 8:35 AM ___ PM X

CSR NAME William Sheridan BADGE # ___

CUSTOMER NAME Miguel Pidera BTN # 305-227-7761

ADDRESS 2991 Southwest 135th Ave APT # ___

CITY Miami ST Fl ZIP 33175

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)
says he was "slammed" by GTE and wants his service switched back to excel. Want complaint filed and bill credited. Wants response promptly.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
DMSS- Snyder 7/14 TC w/ 366 Intl ICPT CXLD b/c of Pic Pos.

No 1998, No 1997

RETURN CALL TO CUSTOMER

BY WHOM ___ DATE ___ TIME ___

COMMENTS ___

23912

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 8-14-98 TIME 2:08 AM ____ PM

CSR NAME Rosa Henderson BADGE # 87374

CUSTOMER NAME Geneva Cruz BTN # 305 827 2614

ADDRESS 375 E. 61 APT # _____

CITY HiALEAh STATE FL ZIP CODE 33013

IS RESPONSE NEEDED? YES / NO PROJECT? _____

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Cust was Slammed to GTE
(Who? Bell South is her Local Co.

After 5:00pm.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

No 1998 Dmss N/O

RETURN CALL TO CUSTOMER

COMMENTS

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE Aug 11, 1998 TIME 10:50 AM ✓ PM ___

CSR NAME Amanda Mulley BADGE # 87959

CUSTOMER NAME Marilyn Morales BTN # (305) 673-4666

ADDRESS 1614 W Ave APT # 503

CITY Miami Beach ST FL ZIP 33139

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)
Customer was switched to ME without authorization they want to know who authorized it.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
DMS-no
1998=0

RETURN CALL TO CUSTOMER

BY WHOM ___ DATE ___ TIME ___

COMMENTS ___

23914

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 8-11-98 TIME 12:51 AM _____ PM ✓

CSR NAME Sup: Wendy Brown BADGE # 88790

CUSTOMER NAME Vickie Gaines BTN # 941-488-0123

ADDRESS 812 Wright St. APT # —

CITY Englewood STATE Fl. ZIP CODE 34223

DNIS 3501 IS RESPONSE NEEDED? YES / NO PROJECT? GTE LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Flyer is about the Value Plan was sent to Customer's 14 yr. old son to ASK if they would like to switch.

Sons name: Eric Whitehead -

Customer is very upset this happened - has also had problems in past w/ being switched to GTE LD w/out permission.

WJ

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

WJ I gave her info. about PIC restriction & DMA's mailing Address

No increase in 1998 Pass file

" " " 1997 " "

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: 8-10-98 DATE COMPLETED: ___

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 8-10-98 TIME 1:25 AM ___ PM ✓

CSR NAME Ellen Hartless BADGE # 87068

CUSTOMER NAME Mrs Battle BTN # 305-266-8190

ADDRESS 5849 N.W. 7th St. APT # ___

CITY Miam Florida STATE Fl ZIP CODE ~~764~~ 33126

IS RESPONSE NEEDED? (YES) NO PROJECT? Cust. Service

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Unauthorized change to GTE HD. This is an elderly mother's hme. Cust wants ATT. Cust out of franchise. Cust very angry. Wants to call Florida PUC Wherever & she can. This has happened before.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Tried to talk to customer could not calm her down

DMSS - N/O 1997 = Ø

1998 = Ø

RETURN CALL TO CUSTOMER

COMMENTS

23916

~~FORM~~ SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4944

Today's Date: 2-2-99 **Time:** 7:30 (AM) PM (Circle One)
Date of Complaint 2-2-99
CSR Name: Richa Castaneda

Sales Channel: ~~SNYDER~~ Unknown IF/OOF (Circle One)

Customer Type: (Circle One)
(Consumer – Long Distance Only)
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)

Rudeness		Cursed Customer	Other Complaint Type:
(Unauthorized Switch/Slammed)		Billing Issue	_____
Pricing/Calling Plan Issue		Provisioning	_____
Promotion Discrepancy		Deceased Person	_____
Rate Discrepancy		Miscellaneous	_____
Order Dispute			

Customer Service Group: (Circle One)

(SITEL)	AFNI
WENTZVILLE	BSC
THORNTON	PHONE MARTS
NIAGARA FALLS	REPAIR
ALPHARETTA	Other: _____

Customer First Name: Barbara
Customer Last Name: Escobedo
Customer Address: _____
City: _____ **State** _____ **Zip** _____
Customer BTN: 305-383-6768 **Customer WTN (S):** _____
Social Security #: _____
Birthdate: _____
Language: _____
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: ESCALATION-YES ESCALATION-NO (CALLBACK NEEDED-YES) CALLBACK NEEDED-NO

PROBLEM: **(Please be very specific and describe thoroughly):**

Customer claims service switched 6 mo. ago & called about it & promised a call back which she never got

23917

RESEARCH/RESOLUTION: (What action did you take?):

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 2-21-98 TIME 12:44 AM ___ PM ✓

CSR NAME Janell Bricker BADGE # 119633

CUSTOMER NAME Helen Queen BTN # 4076563825

ADDRESS 815 Verne Stol no t APT # _____

CITY Ocee Orlve ST FL ZIP 34761

PLEASE CIRCLE RESPONSE: NEEDED NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)

Was slammed by Snuffer Company. I wants some compensation + answers

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)

DMSS-SUY TC,360 DAM 2.03 Still Pending

RETURN CALL TO CUSTOMER

BY WHOM _____ DATE _____ TIME _____

COMMENTS _____

23918

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CUSTOMER COMPLAINT FORM-SYNDER
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE: 02-24-98 **TIME:** 537 **AM** (PM) **(Circle One)**

CSR NAME: Natalie Miller

CUSTOMER NAME: Iria Iglesias **BTN:** 305 854-7524

ADDRESS: 900 SW 13 Ave **APT#**

CITY: Miami **ST:** FL **ZIP** 33135 **INF?** (OOF?) **(Circle one)**

PROBLEM: (Please be very specific and describe thoroughly.)

Did not authorize GTE

RESEARCH: (For customer service use only.)

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CUSTOMER COMPLAINT FORM-SYNDER
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE: 2/24 **TIME:** 8:56 (AM) PM **(Circle One)**

CSR NAME: LINDA

CUSTOMER NAME: ALHELEN CONWAY **BTN:** 305 949 2504

ADDRESS: 400 KINS POINT DR **APT#**

CITY: N MIAMI BCH **ST:** FL **ZIP** 33160 **INF?** (OOF?) **(Circle one)**

PROBLEM: (Please be very specific and describe thoroughly.)

Did not authorize GTE

RESEARCH: (For customer service use only.)

CUSTOMER COMPLAINT FORM-SYNDER
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE: 2-23 **TIME:** 7:10 (AM) PM **(Circle One)**

CSR NAME: CORRAINE Ladd

CUSTOMER NAME: Tom Leslie **BTN:** 305-651-35

ADDRESS: 945 NE 171 ST **APT#**

CITY: Miami **ST:** FL **ZIP** 33160 **INF?** (OOF?) **(Circle one)**

PROBLEM: (Please be very specific and describe thoroughly.)

Did not authorize GTE

RESEARCH: (For customer service use only.)

CUSTOMER COMPLAINT FORM-SYNDER
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE: 2-24-98 **TIME:** 10:15 **AM** **PM** **(Circle One)**

CSR NAME: LORRAINE JOSH

CUSTOMER NAME: Wilma Franco **BTN:** 305-817-1785

ADDRESS: 1085 W. 71 ST #7 **APT#**

CITY: HIALEAH **ST:** FL **ZIP** 33014 **INF?** **OOF?** **(Circle one)**

PROBLEM: (Please be very specific and describe thoroughly.)

Did not authorize GTE

RESEARCH: (For customer service use only.)

CUSTOMER COMPLAINT FORM-SYNDER
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE: 2-24 **TIME:** 10.15 (AM) PM (Circle One)

CSR NAME: LORRAWE

CUSTOMER NAME: Maria Millares **BTN:** 305-324-4635

ADDRESS: 1400 NW 19 St **APT#**

CITY: Miami **ST:** FL **ZIP** 33125 **INF?** (OOF?) (Circle one)

PROBLEM: (Please be very specific and describe thoroughly.)

Did not authorize GTE

RESEARCH: (For customer service use only.)

CUSTOMER COMPLAINT FORM-SYNDER
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE: 2/23 **TIME:** 3:15 **AM** (**PM**) **(Circle One)**

CSR NAME: Linda

CUSTOMER NAME: NESTOR DELACRUZ **BTN:** 305 554-9185

ADDRESS: 11950 SW 47ST St **APT#**

CITY: MIAMI **ST:** FL **ZIP** 33145 **INF?** (**OOF?**) **(Circle one)**

PROBLEM: (Please be very specific and describe thoroughly.)

Did not authorize GTE

RESEARCH: (For customer service use only.)

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CUSTOMER COMPLAINT FORM-SYNDER
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE: 2/23 **TIME:** 3:00 **AM** **PM** **(Circle One)**

CSR NAME: ~~ALBERTO AROZCO~~

CUSTOMER NAME: ALBERTO AROZCO **BTN:** 305 551-1605

ADDRESS: 10307 NW 9 St 202 **APT#**

CITY: MIAMI **ST:** FL **ZIP** 33172 **INF?** **OOF?** **(Circle one)**

PROBLEM: (Please be very specific and describe thoroughly.)

Did not authorize GTE

RESEARCH: (For customer service use only.)

CUSTOMER COMPLAINT FORM-SYNDER
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE: 2-23 **TIME:** _____ **AM** **PM** **(Circle One)**

CSR NAME: JEAN

CUSTOMER NAME: Ruben Gonzolez **BTN:** 305-821-8345

ADDRESS: 9269 NW 121 TER **APT#** _____

CITY: Hialeah Gardens **ST:** FL **ZIP** 33018 **INF?** **OOF?** **(Circle one)**

PROBLEM: (Please be very specific and describe thoroughly.)

Did not authorize GTE

RESEARCH: (For customer service use only.)

CUSTOMER COMPLAINT FORM-SYNDER
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE: 2/23/98 **TIME:** 9:36 (AM) PM **(Circle One)**

CSR NAME: Kanie Williat

CUSTOMER NAME: Duel Liberal **BTN:** 305/945-2824

ADDRESS: 300 NE 164 St **APT#**

CITY: N Miami **ST:** FL **ZIP** 33162 **INF?** (OOF?) **(Circle one)**

PROBLEM: (Please be very specific and describe thoroughly.)

Did not authorize GTE

RESEARCH: (For customer service use only.)

CUSTOMER COMPLAINT FORM-SYNDER
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE: 2/23/98 **TIME:** 11:00 (AM) PM **(Circle One)**

CSR NAME. Karie Willhoit

CUSTOMER NAME: Charles Poux **BTN:** 305 751 6475

ADDRESS: 1100 NW 113 Ter **APT#**

CITY: Miami **ST:** FL **ZIP** 33168 **INF?** (OOF?) **(Circle one)**

PROBLEM: (Please be very specific and describe thoroughly.)

Did not authorize GTE

RESEARCH: (For customer service use only.)

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CUSTOMER COMPLAINT FORM-SYNDER
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE: 2-23 **TIME:** _____ **AM** **PM** **(Circle One)**

CSR NAME: ~~Bernardino Alcalde~~ JEAN

CUSTOMER NAME: Bernardino Alcalde **BTN:** 305-325-8211

ADDRESS: 1911 NW N River Dr **APT#** B101

CITY: Miami **ST:** FL **ZIP** 33125 **INF?** **OOF?** **(Circle one)**

PROBLEM: (Please be very specific and describe thoroughly.)

Did not authorize GTE

RESEARCH: (For customer service use only.)

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CUSTOMER COMPLAINT FORM-SYNDER
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE: 7/23 **TIME:** 9:15 (AM) PM **(Circle One)**

CSR NAME: LINDA

CUSTOMER NAME: SANDRA LOPEZ **BTN:** 305 825-0904

ADDRESS: 6445 W 24 AVE **APT#**

CITY: HIALEAH **ST:** FL **ZIP** 33016 **INF?** (OOF?) **(Circle one)**

PROBLEM: (Please be very specific and describe thoroughly.)

Did not authorize GTE

[redacted]

RESEARCH: (For customer service use only.)

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CUSTOMER COMPLAINT FORM-SYNDER
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE: 2/20/98 **TIME:**_____ **AM PM (Circle One)**

CSR NAME: Nancy

CUSTOMER NAME: Agustin Diaz **BTN:** 305-888-4262

ADDRESS: 725 W 29th St 201 **APT#**_____

CITY: Hialeah **ST:** FL **ZIP** 33012 **INF?** **OOF?** **(Circle one)**

PROBLEM: (Please be very specific and describe thoroughly.)

Did not authorize GTE

RESEARCH: (For customer service use only.)

CUSTOMER COMPLAINT FORM-SYNDER
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE: 2/20/98 **TIME:**_____ **AM PM (Circle One)**

CSR NAME: Nancy

CUSTOMER NAME: Joseph Evans **BTN:** 305-688-2442

ADDRESS: 1115 NW 129 St **APT#**_____

CITY: Miami **ST:** FL **ZIP** 33168 **INF?** **OOF?** **(Circle one)**

PROBLEM: (Please be very specific and describe thoroughly.)

Did not authorize GTE

RESEARCH: (For customer service use only.)

50

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CUSTOMER COMPLAINT FORM-SYNDER
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE: 2/20/98 **TIME:** _____ **AM** **PM** **(Circle One)**

CSR NAME: Nancy

CUSTOMER NAME: Christine Onatario **BTN:** 954-927-9383

ADDRESS: 2140 Monroe St **APT#** _____

CITY: Hollywood **ST:** FL **ZIP** 33023 **INF?** **OOF?** **(Circle one)**

PROBLEM: (Please be very specific and describe thoroughly.)

Did not authorize GTE

RESEARCH: (For customer service use only.)

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CUSTOMER COMPLAINT FORM-SYNDER
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE: 2/20/98 **TIME:**_____ **AM PM (Circle One)**

CSR NAME: Margaret Lassett Nancy

CUSTOMER NAME: Marjorie Laurent **BTN:** 954-438-6153

ADDRESS: 3290 Windward Way **APT#**_____

CITY: Miramar **ST:** FL **ZIP** 33025 **INF?** **OOF?** **(Circle one)**

PROBLEM: (Please be very specific and describe thoroughly.)

Did not authorize GTE

RESEARCH: (For customer service use only.)

CUSTOMER COMPLAINT FORM-SYNDER
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE: 2/19 **TIME:** _____ **AM** **PM** **(Circle One)**

CSR NAME: Linda

CUSTOMER NAME: JOSE BARBOA **BTN:** 305-571-1803

ADDRESS: 405 NE 28 Dr St 405 **APT#** _____

CITY: N MIAMI **ST:** FL **ZIP** 33137 **INF?** **OOF?** **(Circle one)**

PROBLEM: (Please be very specific and describe thoroughly.)

Did not authorize GTE

RESEARCH: (For customer service use only.)

CUSTOMER COMPLAINT FORM-SYNDER
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE: 2/16 **TIME:** _____ **AM PM (Circle One)**

CSR NAME: Linda

CUSTOMER NAME: MINNIE WATSON **BTN:** 305 567-9383

ADDRESS: 3071 HIBISCUS ST **APT#** _____

CITY MIAMI **ST:** FL **ZIP** 33133 **INF?** **OOF?** **(Circle one)**

PROBLEM: (Please be very specific and describe thoroughly.)

Did not authorize GTE

RESEARCH: (For customer service use only.)

CUSTOMER COMPLAINT FORM-SYNDER
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE: 2/16 **TIME:** _____ **AM PM (Circle One)**

CSR NAME: Louise

CUSTOMER NAME: ~~###~~ AHMET PEREDA **BTN:** 352-338-6145

ADDRESS: 710 SW 16TH AV 211 **APT#** _____

CITY: GAINESVILLE **ST:** FL **ZIP** 32601 **INF?** **OOF?** **(Circle one)**

PROBLEM: (Please be very specific and describe thoroughly.)

Did not authorize GTE

RESEARCH: (For customer service use only.)

CUSTOMER COMPLAINT FORM-SYNDER
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE: 2/16 **TIME:** _____ **AM** **PM** **(Circle One)**

CSR NAME: Linda

CUSTOMER NAME: YANET TRENZADO **BTN:** 305 621-4212

ADDRESS: 5595 NW 201 ST **APT#** LOT 43

CITY: MIAMI **ST:** FL **ZIP** 33055 **INF?** **(OOF?)** **(Circle one)**

PROBLEM: (Please be very specific and describe thoroughly.)

DID NOT AUTHORIZE

RESEARCH: (For customer service use only.)

11

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-02-98 **Time:** 6:45 **AM** (PM) **(Circle One)**

CSR Name: Joaquin Munoz **Badge #:** _____

Customer Name: J Ballesteros **BTN:** (305) 860 0108

Address: 528 SW 6 ST 5 **Apt.#:** _____

City: Miami **ST:** FL **ZIP:** 33130 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust slammed, has bill, is restricted

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

6

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-2-98 **Time:** 4:15 **AM** (PM) **(Circle One)**

CSR Name: Joaquin **Badge #:** _____

Customer Name: Luis Sandoval **BTN:** (305) 247 0245

Address: 29864 SW 158 CT **Apt.#:** _____

City: Home stead **ST:** FL **ZIP:** 33033 **INT?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust slammed has LD Restriction, sent Bill

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

4

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-5-98 Time: 10:30 AM (PM) (Circle One)

CSR Name: Joaquin Munoz Badge #:

Customer Name: Luisa Abral BTN: (305) 260 8236

Address: 411 SW 57 Ave 3 Apt.#:

City: Miami ST: FL ZIP: 33144 INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust Slammed
Cancel order

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

7

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-5-98 Time: 9:30 (AM) PM (Circle One)

CSR Name: Joaquin Munoz Badge #:

Customer Name: MAGALY Puga BTN: (305) 826 2543

Address: 10090 NW 80 CT 1453 Apt.#:

City: Hialeah Gardens ST: FL ZIP: 33016 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust slammed, Cancel order
very upset, threatening legal action

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE Sept. 30 1998 TIME 4:57 AM _____ PM —

CSR NAME SARA Chavez BADGE # 87473

CUSTOMER NAME Roberto Chamorro BTN # (305) 895-9331

ADDRESS 1470 NE 123RD St. APT # PH 16

CITY N. Miami STATE FL ZIP CODE 33161

IS RESPONSE NEEDED? (YES) NO PROJECT? Long Distance

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer was Changed w/out his permission & wants to know who Changed him.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

No order in system or DMSS. - No 1998 DMSS-N/O

RETURN CALL TO CUSTOMER

COMMENTS

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 9-30-98 **Time:** 12:23 (AM) PM **(Circle One)**

CSR Name: Esteban Pleda **Badge #:** _____

Customer Name: Francisco Castillo **BTN:** 305 594 4343

Address: 10054 NW 41 St **Apt.#:** _____

City: Miami **ST:** FL **ZIP:** 33178 **INF? OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CSR did not Reg Serv. Claims did not Make calls that are being Charged to him. Dsk all calls

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 9/30/98 Time: 7:53 AM (PM) (Circle One)

CSR Name: D. Cummings Badge #:

Customer Name: George Esperanza BTN: (305) 219-2042

Address: 10801 SW 48th Terrace Apt.#:

City: Miami ST: FL ZIP: 33165 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer was slammed by GTE via TMA's and received an outrageously high bill. Customer doesn't have much concern re: the calls, but he does want to know how he was switched over.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 9-30-98 Time: 8:18 (AM) PM (Circle One)

CSR Name: Jennette Lee Badge #:

Customer Name: Paul Gould BTN: (305)451-3175

Address: 12 Bonefish Ave Apt.#:

City: Key Largo ST: FL ZIP: 33037 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: (ESCALATION) NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

This customer was taken over by BTE and was extremely upset.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 9-30-98 **Time:** 4:02 **AM** (PM) **(Circle One)**

CSR Name: Jeanette Lee **Badge #:** _____

Customer Name: Greg Minnick **BTN:** (305) 681-1557

Address: 12760 NW 2nd Ave **Apt.#:** _____

City: N Miami **ST:** FL **ZIP:** 33168 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: (ESCALATION NEEDED) **NOT NEEDED**

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

This customer was taken over by GTE. He never authorized this switch and wants to get this matter taken care of.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: Sep 30, 1998 **Time:** 11:16 (AM) PM **(Circle One)**

CSR Name: OLGA BRAVO **Badge #:** _____

Customer Name: NIDIA TORRES **BTN:** 305-559-8635

Address: 3901 SW 109TH AVE **Apt.#:** D-12

City: Miami **ST:** FL **ZIP:** 33165 **INF?** (OOF?) **(Circle ~~One~~)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer was taken over
& wants to know who & why.

RESEARCH: (For Customer Service Use Only)

OOF : E-LATA, PIC & AMI both active
ACCNT CODE -- 112439
Rep who did order: T4CMXW2

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 9-30-98 Time: 3:54 AM (PM) (Circle One)

CSR Name: Erik Williams Badge #:

Customer Name: Bernadette Costa BTN: 954-480-6085

Address: 255 sw 3rd Ave Apt.#:

City: Deerfield Beach ST: FL ZIP: 33441 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: (ESCALATION NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cus was slammed by GTEL & told he would rate up to AT+T prices

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: Bernadette DATE: TIME:

COMMENTS: home during the day

(561-734-2022)

DATE TURNED IN: _____ TIME COMPLETED: ____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 09-29-98 TIME 5:58 AM ____ PM X

CSR NAME Nicole Content-Black BADGE # 148145

CUSTOMER NAME Maria Sandoval BTN # 305-273-8856

ADDRESS 9231 52 Terrace SW APT # ____

CITY Miami STATE FL ZIP CODE 33173

IS RESPONSE NEEDED? (YES) NO PROJECT? LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer was slammed and wishes to find out how they were slammed to GTE on 9/1/98

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

apologized and said we would research it and get back to her.

Snyder-TC, 240 min, 1CPTL 9/10 Eff 9/25

RETURN CALL TO CUSTOMER

COMMENTS

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 9-29-98 **Time:** 12:12 **AM** (PM) **(Circle One)**

CSR Name: Veronica R. **Badge #:**

Customer Name: Mike Ruel **BTN:** 305-238-4647

Address: 9360 SW 140th St **Apt.#:**

City: Miami **ST:** FL **ZIP:** 33176 **INE?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu was switched to GTE w/out his permission. Demands to know how the switch was placed and wants to know who gave authorization.

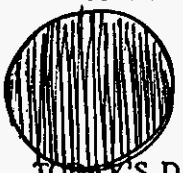
RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

DATE TURNED IN: _____ TIME COMPLETED: ____



CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 09-29-98 TIME 2:50 AM ____ PM ✓

CSR NAME Nelle Contant-Black BADGE # 142145

CUSTOMER NAME Mario J. AEDO BTN # 305-595-6682

ADDRESS 8746 53rd ST SW APT # ____

CITY Miami STATE FL ZIP CODE 33165

IS RESPONSE NEEDED? (YES) NO PROJECT? CD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer wishes to find out by who & how ~~the~~ she was switched to GTE LD w/o her permission

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Tell her we were sorry this happened and that we will research it and get back to her.

NO MSG

DMSS-N/O

RETURN CALL TO CUSTOMER

COMMENTS

23952

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9.29.98 TIME 2:59 AM__ PM ✓

CSR NAME Andrea L Myers BADGE # 120332

CUSTOMER NAME Eloina Sanchez BTN # 407.774.0840

ADDRESS 405 Navarre Way APT #

CITY Alta Monte ST FL ZIP 32714

PLEASE CIRCLE RESPONSE: NEEDED NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)

Mrs. Sanchez was very upset that she was switched to gte w/out her permission. I would like to know how and why she was switched Please call her back at number above.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)

Snyder- TC, 360 dom 9/20 Eff 10/05

RETURN CALL TO CUSTOMER

BY WHOM _____ DATE _____ TIME _____

COMMENTS _____

23953

DATE TURNED IN: 9/29/98 DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9/29/98 TIME 2:57 AM _____ PM ✓

CSR NAME Bonnie Garcia BADGE # 88628

CUSTOMER NAME John McHugh BTN # (407) 862-6928

ADDRESS 124 Valencia Lp. APT # _____

CITY Altamonte Spgs STATE FL ZIP CODE 32714

IS RESPONSE NEEDED? (YES) / NO PROJECT? ES long distance

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

noticed on bill that calls were WRITE UP. Called local office & they said was made on 9/16/98. He wants to know who auth. changed, when order was taken, etc.

11/6 1998

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Snyder-TC, 360dan, 1 cc 9/13 erf 9/28

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9/29/98 TIME 5:16 AM _____ PM ✓

CSR NAME Bonnie Herrera BADGE # 88628

CUSTOMER NAME Joseph Nacci BTN # (941) 377-1818

ADDRESS 3112 Windrush Bourne APT # _____

CITY Sarasota STATE FL ZIP CODE 34235

IS RESPONSE NEEDED? (YES) / NO PROJECT? ~~ES~~ long distance

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Was changed to GTELD. Wants to know when it happened & how.

No 1998

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Snyder - TC, 3160dom 9/17 Eff 10/02

RETURN CALL TO CUSTOMER

COMMENTS

23955

DATE TURNED IN: 9-29-98 DATE COMPLETED: ___

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9-29-98 TIME 12:46 AM (PM)

CSR NAME LORI COLE BADGE # 119396

CUSTOMER NAME DAVID QUICK BTN # 305 232 8467

ADDRESS 12710 SW. 72 AVE APT #

CITY MIAMI STATE FL ZIP CODE 33156

IS RESPONSE NEEDED? (YES) NO PROJECT? LP

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

CUSTOMER WAS VERY IRATE THAT HE WAS ~~SLAMMED~~ SLAMMED BY GTE LD. NO ORDERS WERE SHOWN BY OUR ~~DEPT~~ DEPT. CUSTOMER IS OOF AND HE REFUSES TO CHANGE IT BACK - HE WANTS GTE TO DO THAT. OMSS LOOKED UP THE ORDER IT WAS PLACED AUG 31 AND THE NAME JAMIE ELDER WAS ON THE ORDER.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

No 1998
Snyder - TC, 360 dom 8/31 Eff 9/16

RETURN CALL TO CUSTOMER

COMMENTS

23956

DATE TURNED IN: 9/29/98 DATE COMPLETED: 9/29/98

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE Sept. 29, 1998 TIME 9:20 AM ____ PM ✓

CSR NAME Cheryl Walker BADGE # 87994

CUSTOMER NAME Debra Browman BTN # 305-385-5087

ADDRESS Refused because she was upset. APT # ____

CITY Miami STATE Florida ZIP CODE ____

IS RESPONSE NEEDED? (YES) / NO PROJECT? CeTELD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Mrs. Browman was upset because MCI told her that CeTE switched her over without her consent. She then called 1-800-483-3200 to find out who switched her and talked with a Black male (she said he sounded that way) by the name of Jamal who asked her, "Is your husband mad at you tonite?" Then he hung up on her. She then called the number on the bill she recieved 800-483-8267 and the voice prompts were in Spanish. She is very upset and want someon to call her back with explanations.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

I apologized and told her we pride ourself in customer service and I will report this for her.

DMSS-N/O 1998 = ∅

RETURN CALL TO CUSTOMER

COMMENTS Customer want a call back ASAP.

23957

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9-29-98 TIME 8:40 AM ✓ PM _____

CSR NAME RICK CASTANEDA BADGE # 87064

CUSTOMER NAME Guy Long BTN # 941-749-1527

ADDRESS _____ EF APT # _____

CITY _____ STATE FL ZIP CODE _____

IS RESPONSE NEEDED? [YES] / NO PROJECT? GTELD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer was switched w/o permission by SNDER. Wants to know exactly how this happened w/o his permission. Customer called them up and asked for a supervisor. Rep told him there were none at the time and that the supervisors come in at a later time. Mr. Long wants someone to call him and let him know why he was switched after he tells telemarketers he doesn't want to switch carriers

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

No 1998

DMSS-N/O

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: _____ TIME COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9-29-98 TIME 1005 AM X PM _____

CSR NAME Carol Ann Hunt BADGE # 119972

CUSTOMER NAME Gladys Crespo BTN # 305-443-9017

ADDRESS 488 NW 4th St APT # _____

CITY Miami STATE FL ZIP CODE 33126

IS RESPONSE NEEDED? (YES) NO PROJECT? _____

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

OOF Cust was changed to GTE LD without authorization. Please advise cust of who and why change was made.

AT&T to GTE

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

DMSS-N/O - 10/1998

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE Sept. 29, 1998 TIME 12:35 AM _____ PM ✓

CSR NAME Amanda Gilley BADGE # 87959

CUSTOMER NAME Maria Camara BTN # (305) 364-0137

ADDRESS 5535 W 12th Ct APT # ———

CITY Hialeah STATE FL ZIP CODE 33012

IS RESPONSE NEEDED? (YES) NO PROJECT? LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Ms. Camara was switched without her permission. wants to know who did it.

* ask for Oswaldo Camara - this is her son - he only speaks Spanish

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Called OOF billing had the bill credited. They will call AT&T to switch back

11/6/1998

DMSS-N/O

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: SEPT 29, 1998 DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE SEPTEMBER 29, 1998 TIME 10:40 (AM) PM _____

CSR NAME STACY LESTER BADGE # 14256

CUSTOMER NAME JOHN JACK BTN # 941/922/5114

ADDRESS 3738 SPYGLASS HILL ROAD APT # _____

CITY SARASOTA STATE FL ZIP CODE 34238

IS RESPONSE NEEDED? YES / (NO) PROJECT? CUSTOMER SERVICE

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

MR. JACK WAS CONTACTED BY A TELEMARKETER
HE SAID HE DID NOT WISH TO CHANGE HIS LONG DISTANCE
SERVICE, BUT THE SERVICE WAS CHANGED TO GTE CO.
HE WANTED TO INFORM GTE OF THIS SINCE IT
SHOULD NOT BE IN A POOR LIGHT AS "SCAMMING" THE
CUSTOMER; CUSTOMER COMPLAINED 3 TIMES

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

(1) GOT CUSTOMER INFORMATION (2) ANSWERED QUESTIONS
(3) DISCONNECT
1/0 1998
DMSS-N/O

RETURN CALL TO CUSTOMER

COMMENTS

Docket No. 990362-TI
Exhibit REP-18
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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 09/29/98. **Time:** 9:27. (AM) PM **(Circle One)**

CSR Name: Shelia Cramer **Badge #:** _____

Customer Name: Robert Horton. **BTN:** 305-371-7686.

Address: 540 Brickell Key Dr. **Apt.#:** 1408.

City: Miami **ST:** FL. **ZIP:** 33131 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu never auth. serv. Cu would like to know what rep signed him up & who gave that rep authority. Cu says that when this is discovered he expects GTE to take action to reprimand this rep. Cu also says that he nor his wife spoke to anyone and there are no children in their home. Cu also says "wrong zip code + apt # indications of slamming".

RESEARCH: (For Customer Service Use Only)

PIC = Active
PIU = Active

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

23962

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 10/29, 1998 **Time:** 5:35 **AM** (PM) **(Circle One)**

CSR Name: Troy Bugos **Badge #:**

Customer Name: Esperantz Vianna **BTN:** 305-893-2578

Address: 13100 NE 7th Av **Apt.#:**

City: North Miami **ST:** FL **ZIP:** 33161 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: (ESCALATION NEEDED) **NOT NEEDED**

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

slammed - wants to know who & why

RESEARCH: (For Customer Service Use Only)

PSC & Ani. - Active Interlata - OOF

Order# 20502852 - Snyder

Rep. T4CCXPS

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

23963

DATE TURNED IN: _____ DATE COMPLETED: ____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

(102)

TODAY'S DATE 9/29/98 TIME 3:37 AM _____ PM ✓

CSR NAME _____ BADGE # _____

CUSTOMER NAME Mrs. Henry Hoder BTN # (941) 377-4329

ADDRESS 3407 Teal Av. APT # _____

CITY Sarasota STATE FL ZIP CODE 34232

IS RESPONSE NEEDED? (YES) NO PROJECT? Cust Serv.

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

~~Was~~ was changed to GTELD on 8/27/98. Didn't author. changed. Wants to know who placed order & authorized change.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

12-9-97 Site 39 L00154504 334691

4-28-98 Site 40 1514055 07 4309319

DMSS-N/O

RETURN CALL TO CUSTOMER

COMMENTS

DATE LOGGED IN: _____ DATE COMPLETED: ___

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

693 9867

TODAY'S DATE 9-28-98 TIME 4:25 AM ____ PM ✓

CSR NAME CRISTINE PEÑA BADGE # 119205

CUSTOMER NAME JORGE MARQUEZ BTN # 305-693-9857

ADDRESS _____ APT # _____

CITY (MIAMI) STATE (FL) ZIP CODE (33013)

IS RESPONSE NEEDED? (YES) / NO PROJECT? GTELD - PES

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

CUST IRATE - (SPANISH ONLY)

1) SLAMMED BY GTELD

2) SOME REP - GTE WAS RUDE TO HIM

3) HE REFUSES TO PAY BILL - WE SLAMMED HIM

4) 800-483-8267 REMIND CIR-BY

NO-ONE TO HELP HIM.

- WOULD NOT GIVE CORRECT NAME/ADDRESS

HE WAS THAT UPSET.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

No 1998

Snyder - TC, 240 min, ICP II 9/09 EFF 9/24

RETURN CALL TO CUSTOMER

COMMENTS

23978

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE Sept 28,98 TIME 11:25 AM ✓ PM _____

CSR NAME Olivia Briseno BADGE # 87444

CUSTOMER NAME MRS CARVER, Cry BTN # 407-382-1332

ADDRESS 1221 Roscomare Ave. APT # _____

CITY Orlando STATE FL. ZIP CODE 32806

IS RESPONSE NEEDED? (YES) NO PROJECT? Changed to GTE without permission.

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Changed to G.T.E. without Her permission and wants to know who did this to her. or who make that change?

Snyder - TC, 360dom, ICC 9/07 EFF 9/22 11/6 1998

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

took Complaint form and offered Customer an Answer by mail OR phone call at a late date, By Sup. Advise.

RETURN CALL TO CUSTOMER

COMMENTS

23979

DATE TURNED IN: 9-28-98 DATE COMPLETED: ___

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9-28-98 TIME 7:15 AM ___ PM ✓

CSR NAME [illegible] BADGE # 870 X

CUSTOMER NAME SANDRA MALEK BTN # 305 255 5771

ADDRESS 7761 SW 134 TERRACE APT # ___

CITY MIAMI STATE FL ZIP CODE 33156

IS RESPONSE NEEDED? (YES) / NO PROJECT? GTE SD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

SERVICE SWITCH WITHOUT CUSTOMERS AUTHORITY. WILL Report to Rec BECAUSE THIS IS IN APPROPRIATE BEHAVIOR

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1/0 1998
Snyder- TC, 360 dom 8/27 Eff 9/14

RETURN CALL TO CUSTOMER

COMMENTS

23980

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 09-28-98 TIME 5:15 AM ____ PM X

CSR NAME [redacted] Noelle Contant-Blackc BADGE # 142 145

CUSTOMER NAME Maria Ruiz BTN # 3056692157

ADDRESS ~~70~~ 7700 SW 54 CT APT # D

CITY Miami STATE FL ZIP CODE 33143

IS RESPONSE NEEDED? ~~YES~~ NO PROJECT? CD customer service

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer has been slammed to GTE and wishes to find out how & by who.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

I told her we would research it and let her know.

NO 1998

DMSS-N|O

RETURN CALL TO CUSTOMER

COMMENTS

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 09-28-98 TIME 5:35 AM PM ✓

CSR NAME Noelle Constant-Black BADGE # 142145

CUSTOMER NAME Albdori Doris BTN # 954-941-9646

ADDRESS 2000 NW 5th Terrace APT #

CITY Pompano Beach ST FL ZIP 33066

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)
Customer has been slammed to GTE. Customer doesn't have LD capabilities. He wonders how he was switched and why he received a bill from us for calls he couldn't have made. Customer wishes to be taken out of all our systems and list. He is OOF. He was extremely irrate. He called GTE a bunch of thieves ..... etc. I told him we would credit him for that bill and get him taken off GTE and that we would research how it happened and remove his name/# from all our lists

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
No 1998
DMSS-N/O

RETURN CALL TO CUSTOMER

BY WHOM _____ DATE _____ TIME _____

COMMENTS _____

23982

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9-28-98 TIME 7:30 AM _____ PM ✓

CSR NAME Farah R. Conkel BADGE # 119506

CUSTOMER NAME Kirk Thompson BTN # 9547331607

ADDRESS _____ APT # _____

CITY Fort Lauderdale STATE FL ZIP CODE 33309

IS RESPONSE NEEDED? (YES) / NO PROJECT? LD -

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Wants to investigate why GTE took over LD services Does not want GTE for anything. Also needs to be re-rated for calls made. Most of calls made under GTE-LD were not even dialed from their home.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Asked them to contact ~~GTE~~ AT&T & BellSouth to get rid of GTE.

Nov 1998

OMSS-N/O

RETURN CALL TO CUSTOMER

COMMENTS

23983

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 9/25/98 **Time:** 2:00 **AM** (PM) **(Circle One)**

CSR Name: Kay Butler **Badge #:** 85MKLBD

Customer Name: Lillian Pinho **BTN:** (305) 932 2965

Address: 250 174 St **Apt.#:** 1014

City: Miami **ST:** FL **ZIP:** 33160 **INF?** **OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: (ESCALATION NEEDED) **NOT NEEDED**

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer was slammed by GTEL. Wants to know exactly who gave permission to switch her long distance carrier without her permission.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9-25-98 TIME _____ AM _____ PM _____

CSR NAME [illegible] BADGE # 87915

CUSTOMER NAME Thomas Maggio BTN # 561-736-9015

ADDRESS 850 Horizon ~~East~~ APT # _____

CITY Boynton Beach STATE FL ZIP CODE 33435

IS RESPONSE NEEDED? (YES) NO PROJECT? GTE LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer was switched to GTE LD w/o AUTHORIZATION on 8-30-98
Snyder Total Call 360 domestic EFF. 9-15-98

CBR 973-694-4080

Wayne, New Jersey

Mo. 1998

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Snyder-TC,360dom 8/30 EFF 9/15

RETURN CALL TO CUSTOMER

COMMENTS

23985

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9/25/98 TIME 2:11 AM ____ PM /

CSR NAME Bonnie Garcia BADGE # ____

CUSTOMER NAME Robert Nall BTN # [redacted] (941) 921-82

ADDRESS 3749 Sarasota Sq. Blvd APT # 308

CITY Sarasota STATE FL ZIP CODE 34238

IS RESPONSE NEEDED? (YES) NO PROJECT? Cust. Serv.

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Never authorized a change to GTE US & he wants the charges removed, not rerated - removed

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

No 1998
DMSS-N/O

RETURN CALL TO CUSTOMER

COMMENTS

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 9-23 **Time:** 4:20 **AM** (PM) **(Circle One)**

CSR Name: KWood **Badge #:** _____

Customer Name: Joan Flores **BTN:** _____

Address: 2018 Van Buren St., Apt. B **Apt.#:** _____

City: Hollywood **ST:** FL **ZIP:** 33020 **INF?** OOF? **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer changed w/o permission, never had
Capt from Any and from GTE - not been
Telemarketed

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

23994

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

)DAY'S DATE 9-23-98 TIME 9:30 AM ✓ PM

CSR NAME Debra Johnston BADGE # 120220

CUSTOMER NAME Freddy Diaz BTN # 407 935 0386

ADDRESS 319 W. Columbia St APT #

CITY Kissimee ST FL ZIP 34741

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)
Customer was switched to GTE long distance without consent, Customer wants to know who and how he ~~was~~ this happened.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
Snyder - ESP 7-7 Dec, 1cc 9/15 Eff 9/30

RETURN CALL TO CUSTOMER

BY WHOM _____ DATE _____ TIME _____

COMMENTS _____

DATE TURNED IN: _____ TIME COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9/23/98 TIME _____ AM _____ PM _____

CSR NAME Mandi Ahnberg BADGE # 9275

CUSTOMER NAME Alvin Tyson BTN # 9419241976

ADDRESS ~~8004 Cardinal Dr~~ 5510 America Dr APT # _____

CITY Sarasota STATE FL ZIP CODE 34231

IS RESPONSE NEEDED? (YES) / NO PROJECT? customer service

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

received a letter in mail saying weive received your order for GTE CD + if you have any questions or if you want to cancel call 1-888-279-6320. This # is Snyder. On the letter it is her phone# but the name on the letter is not correct. The name says Barbara Nunez. She said they never placed any order + she wants to find out if this fraud + how that letter was sent to them. I checked DMSS + showed no orders + I told her that. 8139891858 Gail (evenings) She would like a call back. This is a better # to reach her + her name is Gail.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

DMSS - N/O

998 = Ø

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE Sept 23, 1998 TIME 10:52 AM ✓ PM _____

CSR NAME Amanda Gilley BADGE # 87959

CUSTOMER NAME Yolanda La Rosa BTN # 305 693 1701

ADDRESS 3275 E 4th Ave APT # 28

CITY Hialeah STATE FL ZIP CODE 33013

IS RESPONSE NEEDED? (YES) / NO PROJECT? LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Ms La Rosa was switched to GTE without her authorization. She wants to know who authorized the change. She has a bill from GTE due Sept. 25. DOF billing said they will re rate the calls but she doesn't want that. She wants to know who did the change first.

* Ms La Rosa only speaks spanish! *

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

I had a translator call me from DOF billing who said all she would do is re-rate the calls.

DMSS-N/O

RETURN CALL TO CUSTOMER

COMMENTS: _____

23997

DATE TURNED IN: 9-23-98 TIME COMPLETED:

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9-23-98 TIME 8'55 AM ✓ PM

CSR NAME Edith Thomas BADGE # 119511

CUSTOMER NAME Ben Vajaraj BTN # 561 439 5415

ADDRESS 7350 Amalfi Cir. APT #

CITY Lake Worth STATE FL ZIP CODE 33467-7270

IS RESPONSE NEEDED? (YES) NO PROJECT? Cust. Service

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Got a letter after it was switched approx. 2 wks ago. ATT called cust. & asked why he had switched & has switched back to ATT. Wants to know who has done this.

Tape # 831 410 227

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

DMSS-N|O

1998 A

RETURN CALL TO CUSTOMER

COMMENTS

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 9/22/98 **Time:** 4:13 **AM** (PM) **(Circle One)**

CSR Name: Martha C. Covarrubias **Badge #:** _____

Customer Name: Nubia Arrechavala **BTN:** 305-651-1917

Address: 550 NE 175th Ter **Apt.#:** _____

City: NRTH MM BC **ST:** FL **ZIP:** 331621948 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CU said she was slammed & she refuses to pay bill for $109.24 I offer her to rerate call and to DAK some calls, CU claims she did not make. She refused and said she will not pay nothing.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 4-22-98 TIME 1:05 AM _____ PM ✓

CSR NAME BRIAN HESTER BADGE # _____

CUSTOMER NAME ANNA Colmenarez BTN # 305-688-3765

ADDRESS 471 E 43rd ST APT # _____

CITY Hia leah STATE FL ZIP CODE 33013

IS RESPONSE NEEDED? (YES) NO PROJECT? GTE UD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Switched from MCI to GTE w/o Authorization on July 1st. AFNI shows Snyder order on July 1 (Completed date). TC Frees 240 min.

DMSS-N/O

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1998 = Ø

RETURN CALL TO CUSTOMER

COMMENTS

24000

DATE TURNED IN: 9 DATE COMPLETED: ____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9-22-98 TIME 3:29 AM ____ PM ✓

CSR NAME Rohenta Vasquez BADGE # 119304

CUSTOMER NAME Ines Suarez BTN # 305/7665-2705

ADDRESS 6388 SW 31st APT # ____

CITY Miami STATE FL ZIP CODE 33155

IS RESPONSE NEEDED? (YES) / NO PROJECT? GTE LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Claims she was switched from MCI to GTE LD w/o her consent. She has switched back to MCI & would like to know who made the switch.

No 1998

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Snyder-TC, 240min, 1CPII 8130 Eff 9/15

RETURN CALL TO CUSTOMER

COMMENTS

24001

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 9/21/98 **Time:** 9:04 (AM) PM **(Circle One)**

CSR Name: Nevada Bell **Badge #:** _____

Customer Name: Audet, Pierre **BTN:** 954-491-6242

Address: 4231 NE 11th Ave **Apt.#:** _____

City: Oakland Park **ST:** FL **ZIP:** 33334 **INF? OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: (ESCALATION NEEDED) **NOT NEEDED**

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CU was slam by GTELD.

8-5 (954) 723-5558

RESEARCH: (For Customer Service Use Only)

* Order Created CTAXA846
* T4CBXG3 09/17/98 12.35 9140 SL

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

24002

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE SEPT. 21, 1998 TIME _____ AM _____ PM _____

CSR NAME JOHNNY SILVAS BADGE # 119536

CUSTOMER NAME MIRTHA VILLAR BTN # 305-823-8564

ADDRESS _____ APT # _____

CITY _____ STATE _____ ZIP CODE _____

IS RESPONSE NEEDED? YES / NO PROJECT? LONG DISTANCE

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

UNAUTHORIZED SWITCH FROM AT&T TO G.T.E.
ON AUGUST 21, 1998

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

DMSS-N/O

1998 = Ø

RETURN CALL TO CUSTOMER

COMMENTS

24003

DATE TURNED IN: 9-21-98 DATE COMPLETED: _____

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CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9-21-98 TIME 2:30 AM _____ PM ✓

CSR NAME Debra Johnston BADGE # 120220

CUSTOMER NAME Henry Niedorf BTN # 8139353827

ADDRESS 2805 W. Broad St APT # _____

CITY Tampa STATE FL ZIP CODE 33614

IS RESPONSE NEEDED? (YES) NO PROJECT? GTE LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer wants to know how he was switch to GTE long distance Customer stated he was on Vacation 4-27-98 did not return till recently found his service to be with GTE long distance. Customer wants written response on how and when he was placed on GTE long distance also Customer request if GTE does not take action in switching back to previous Carrier

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

No 1998 DMSS-N/O

RETURN CALL TO CUSTOMER

COMMENTS

24004

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 09-21-98 TIME 450 AM (PM)

CSR NAME George Chavarria BADGE # 87601

CUSTOMER NAME Saltovio Quino BTN # 954-925 8293

ADDRESS 00F 2022 Filmore APT #

CITY Hollywood STATE FL ZIP CODE 33020

IS RESPONSE NEEDED? (YES) NO PROJECT? LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

OOF Customer switched without his authorization and is requesting to know who ~~what~~ when and how we switched his service.

No 1998

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Snyder- TC, 360 dom 8/31 EFF 9/16

RETURN CALL TO CUSTOMER

COMMENTS

24005

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 9.21.98 **Time:** 7:39 **AM** (PM) **(Circle One)**

CSR Name: Veronica Riggs **Badge #:** _____

Customer Name: Dara Baren **BTN:** 561-796-1380

Address: 2707 Linkside Dr **Apt.#:** _____

City: West Palm Beach **ST:** FL **ZIP:** 33414 **INF?** O(E)? **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cus was switched w/out permission. IS filing a complaint w/ FCC and just wants to know when, how, and why the order was placed.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

DATE TURNED IN: 9-21-98 TIME COMPLETED: ____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9-21-98 TIME 3:05 AM ____ PM ✓

CSR NAME Kristina Alexander BADGE # ____

CUSTOMER NAME Maribel Abiles BTN # 305-866-764[illegible]

ADDRESS 1219 Marseilles Dr. APT # 2

CITY Miami Beach STATE FL ZIP CODE 33141

IS RESPONSE NEEDED? (YES) / NO PROJECT? Customer Servic

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

DMSS Sept 10 - Snyder
She wants to know who switched her without permission.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

No 1998
Snyder - TC, 360dom 9/10 EFF 9/25

RETURN CALL TO CUSTOMER

COMMENTS

24007

DATE TURNED IN: _____ TIME COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE Sept. 21, 1998 TIME 7:54 AM ✓ PM _____

CSR NAME Amanda Gilley BADGE # 87959

CUSTOMER NAME Leigh Riley BTN # 941 351 6853

ADDRESS 317 Braden Ave. APT # _____

CITY Sarasota STATE FL ZIP CODE 34243-2021

IS RESPONSE NEEDED? (YES) / NO PROJECT? LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Ms Riley was switched to GTE without her authorization. She wants to know when and who authorized the change.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Ms Riley had already called the carrier she wants.

Nc 1998 Snyder-TC3600M 9/09 EFF 9/24

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: _____ TIME COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9-21-98 TIME 8:24 AM / PM _____

CSR NAME Nancy Bosley BADGE # 119370

CUSTOMER NAME EARL ROSE BTN # 941 379 [redacted] 504

ADDRESS 4338 Canton Point LN APT # _____

CITY Sarasota STATE FL ZIP CODE 34233-163

IS RESPONSE NEEDED? (YES / NO) PROJECT? Snyder - LD outbou

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Letter - [redacted] - cust was slamm(by GTE from AT&T.

" Snyder - 9-9 Total call 360 domestic eff 9-24

He is sending letter to FCC & John Harris

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Sent him to GTE Local to go back to AT&T & requested he call AT&T to be established on plan

No 1998 Snyder-TC360 dom 9/09 EFF 9/24

RETURN CALL TO CUSTOMER

COMMENTS

24009

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9/21/98 TIME 3:30 AM ___ (PM)

CSR NAME Bonnie Garcia BADGE # 88628

CUSTOMER NAME Mark Zaccardi BTN # (954) 752-7869

ADDRESS 8405 NW 29th Ct. APT # please

CITY Coral Springs STATE FL ZIP CODE 33075

IS RESPONSE NEEDED? (YES) NO PROJECT? Cust Serv.

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

~~[illegible]~~ Was changed to GTE ND & not sure how. I saw no Sidel orders (couldn't get through to DMSS)

No 1998

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Snyder - TC, 360 dom 9/13 EFF 9/28

RETURN CALL TO CUSTOMER

COMMENTS

24010

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 9/20/98 **Time:** 11:03 (AM) PM **(Circle One)**

CSR Name: Jennifer Claybone **Badge #:** 1507

Customer Name: Margaret L. Warner **BTN:** 407 767 5514

Address: 545 E. Hillcrest St. **Apt.#:**

City: Altamonte Springs **ST:** FL **ZIP:** 32701 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: (ESCALATION NEEDED) **NOT NEEDED**

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Wants to know who authorized her service to be switched to GTEC. Person authorizing used customers nickname Please get back w/ her w/ results. Alt phone bills in husbands name. Says spoke w/ AT&T & was charged for switching. Wants all charges removed for switch & being billed when wasn't suppose to be w/us.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

24011

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: Sep 20 **Time:** 11:00 **(AM)** PM **(Circle One)**

CSR Name: KARINA ESTRADA **Badge #:**

Customer Name: Frances Pernice **BTN:** 305-949-3724

Address: Apt 321 1495 NE 167th St **Apt.#:**

City: Miama **ST:** FL **ZIP:** 33162 **INF? (OOF?)**
(Circle One)

PLEASE CIRCLE RESPONSE: (ESCALATION NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Slammed by GTE twice
WANTS TO BE CALLED ABOUT IT

RESEARCH: (For Customer Service Use Only)

na

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

Docket No. 990362-TI
Exhibit REP-18
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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 9/20/98 **Time:** 11:30 **(AM) PM (Circle One)**

CSR Name: Anita A. **Badge #:**

Customer Name: Louis Velez **BTN:** 954-321-3519

Address: 120 NW 73rd ave **Apt.#:**

City: Plantation **ST:** FL **ZIP:** 33317 **INF? (OOF?)** **(Circle One)**

PLEASE CIRCLE RESPONSE: (ESCALATION NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu switched w/o permission. cu is an AT&T employee. wants to hear taped conversation

RESEARCH: (For Customer Service Use Only)

QMF = PRE = Ani Deactive 9/20/98
~~PCA~~ Pic Active 9/17/98

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 9/20/98 **Time:** 1:00pm **AM PM (Circle One)**

CSR Name: Ozietta Y. Flucker **Badge #:** _____

Customer Name: Elizabeth Mastromari **BTN:** (305) 279-4729

Address: 8065 SW 107th Ave. **Apt.#:** Building 5

City: Miami **ST:** FL **ZIP:** 3317 **INF? OOF?** (Circle One)

PLEASE CIRCLE RESPONSE ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

She would like someone to contact her in order to inform her about how she was switched, and who authorized this to happen

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 9/20 **Time:** 3:30 **AM (PM) (Circle One)**

CSR Name: MICHAEL FITZGERALD **Badge #:** CSC

Customer Name: SANDRA ATLS **BTN:** 305-947-0164

Address: 17031 NE. 23RD AVE **Apt.#:** 1

City: MIAMI **ST:** FL **ZIP:** 33160 **INF? (OOF?)** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer irate and wants to be contacted w/ information about how she was switched to GTE and how her information was obtained. She expects an answer.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 10 9-19-98 TIME 10:50 AM ✓ PM ___

CSR NAME Ellen M. Hartlaub BADGE # 87068

CUSTOMER NAME Mr Javier Jimenez BTN # 87068 305 513-9231

ADDRESS 9827 NW 32nd St APT # ___

CITY Miami ST FL ZIP 33172

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)
9-8-98 Cust. was changed From ATT Long Distance to GTELD. without authorization. Cust. Needs Feedback on how and why this happened.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
Snyder - TC 360 dom 9/01 EFF 9/17

RETURN CALL TO CUSTOMER

BY WHOM ___ DATE ___ TIME ___

COMMENTS ___

24016

DATE TURNED IN: _____ DATE COMPLETED: ____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9-18-98 TIME 1:08 AM _____ PM ✓

CSR NAME Brandi BADGE # 87708

CUSTOMER NAME Pam Allen BTN # 941-207-5112

ADDRESS _____ APT # _____

CITY _____ STATE FL ZIP CODE _____

IS RESPONSE NEEDED? (YES) NO PROJECT? LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer was changed to GTE LD w/out authoriz-ation. Would like a callback, who did this and why?

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

DMSS-N/O

1998 = Ø

RETURN CALL TO CUSTOMER

COMMENTS

24017

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9-18-98 TIME 10:26 AM ✓ PM _____

CSR NAME Brandi BADGE # 87708

CUSTOMER NAME Daniel Sierra BTN # 305-223-3192

ADDRESS _____ APT # _____

CITY _____ STATE FL ZIP CODE _____

IS RESPONSE NEEDED? (YES) NO PROJECT? LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer was changed to GTE LD w/out authorization. Would like a callback letting him know who did this and why? Gave his fax # because he wanted someone to fax the info. to him.

Fax #: 305-223-3807

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

DMSS-N/O

RETURN CALL TO CUSTOMER

COMMENTS

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 9-18-98 **Time:** 5:45 **AM** (PM) **(Circle One)**

CSR Name: ~~Rony Culp~~ Lisa Madlock **Badge #:** 1563

Customer Name: Rony Culp **BTN:** (305) 385-6541

Address: 11004 SW 139 Ct **Apt.#:**

City: Miami **ST:** FL **ZIP:** 33186 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust upset says he works for FBI
Never gave permission to switch serv
Fraud you haven't heard the last of
him yet

RESEARCH: (For Customer Service Use Only)

T4CCxP5 Sales

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

24019

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9-18-98 TIME 9:32 AM ✓ PM _____

CSR NAME Brandi BADGE # 87708

CUSTOMER NAME Rosalind Castillo BTN # 305-552-1069

ADDRESS _____ APT # _____

CITY _____ STATE FL ZIP CODE _____

IS RESPONSE NEEDED? (YES) NO PROJECT? LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer was changed to GTE LD w/o authorization
would like a callback of who did this and why

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

DMSS-N/D

1998 = Ø

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: 9-18-98 WHIE COMPLETED: ____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9-18-98 TIME 314 AM ____ PM V

CSR NAME C. RONDON BADGE # 87937

CUSTOMER NAME JOHN KUDLA BTN # 727-791-1529

ADDRESS 2779 CANDLEWOOD ST APT # ____

CITY Clearwater STATE FL ZIP CODE 33759

IS RESPONSE NEEDED? (YES / NO) PROJECT? CO

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Cust. says that he received 2 ~~era~~ calling cards today (9- and he wants to know who placed the order for the calling cards. I showed NO ORDR IN DMSS OR in outbound OR inbound.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

DMSS-NO

1998 = Ø

RETURN CALL TO CUSTOMER

COMMENTS

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 9-17-98 **Time:** 2:27 pm **AM** (PM) **(Circle One)**

CSR Name: Lorona Grant **Badge #:** 1602

Customer Name: Juan & Spixal **BTN** (407) 812-6362

Address: 3385 Burlington Dr. **Apt.#:**

City: Orlando **ST:** Fl **ZIP:** 32837 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

PROBLEM: (Pls. be very specific and describe thoroughly.)

8/21/98 Slammed by 0548 3.
Lost discounts with Sprint Added as new Customer.
Never requested GTE, very unhappy with being taken over.

13.74 Credit Given or honored
5.00 Would like to know how
18.74cr this took place!

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

24022

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 9-18-98 Time: 4:45 AM (PM) (Circle One)

CSR Name: Maria L. Aspuro Badge #:

Customer Name: Amelia Arriaga BTN: (305) 264-0831

Address: 2240 SW 67 AVE Apt.#: 23

City: Miami ST: FL ZIP: 33155 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust did not auth chng. Cust want all the info on who auth this chng.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 9-18-98 Time: 1:46 AM (PM) (Circle One)

CSR Name: Maria L. Aspuro Badge #:

Customer Name: Carlos D. Derayas BTN: (305) 556-2943

Address: 321 E 57th St Apt.#:

City: Hialeah ST: FL ZIP: 33013 INF? OOF? (Circle ~~One~~)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust claims that he did not auth chng. Cust wants to know who auth this chng. Cust want info on who auth chngs

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 9/17/98 **Time:** 10:49 (AM) PM (Circle One)

CSR Name: Crystal Biggs **Badge #:** _____

Customer Name: Rodrigo Esquivel **BTN:** 954-389-5021

Address: 16861 Patio Vill. Ln **Apt.#:** _____

City: Fort Lauderda **ST:** Fl **ZIP:** 33326 **INF?** (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: (ESCALATION NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu wants a letter sent stating how the order was placed. Because he never spoke w/ anyone from GTELD.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9-17-98 TIME 245 AM _____ PM X

sup. Jesse
~~CSR~~ NAME Marie Volg-Stein BADGE # 87047

CUSTOMER NAME Marie Volg-Stein BTN # 954-746-8795

ADDRESS 9571 NW 21 St. ~~APT #~~ 954-747-1786

CITY Sunrise STATE FL ZIP CODE 33351

IS RESPONSE NEEDED? (YES) / NO PROJECT? CD Res

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Switched without authorization on 9/12/98
MCI told her.
7 00f Customer
7 Both lines were switch.
7 call before noon.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

she's already been switched back to MCI
Apologized & Fill C.C.F.
Snyder-TC, 360 dom 9/03 Eff 9/21

RETURN CALL TO CUSTOMER

COMMENTS 1998 = Ø BOTH #'S

24026

DATE TURNED IN: _____ DATE COMPLETED: _____

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CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9-17-98 TIME 11:00 AM ✓ PM _____

CSR NAME Brandi BADGE # 87708

CUSTOMER NAME Richard Green BTN # 407-695-1631

ADDRESS 629 N Shore Circle APT # _____

CITY Casselberry STATE FL ZIP CODE 32707

IS RESPONSE NEEDED? (YES) NO PROJECT? LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer was change to GTE LD w/out authorization. Would like a callback, who authorized this and when.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Snyder - TC, 310 dom, 1cc 9/03 Eff 9/21

RETURN CALL TO CUSTOMER

COMMENTS 1998 = Ø

24027

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 09/12/98 **Time:** 9:58 **(AM) PM (Circle One)**

CSR Name: Brenda **Badge #:** CSC/Project S

Customer Name: BELKYS GARCIA **BTN:** 305-827-6080

Address: 18000 NW 108th ST **Apt.#:**

City: HIALEAH **ST:** FL **ZIP:** 33015 **INF? (OOF?)**
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cs mom beg svc wld like to get a CTE rep to cl her back & let her know who with this is

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 9-17-98 **Time:** 2:27pm **AM** (**PM**) **(Circle One)**

CSR Name: Lorona Grant **Badge #:** 1602

Customer Name: Juan & Spixal **BTN** (407) 812-6362

Address: 3385 Burlington Dr. **Apt.#:** _____

City: Orlando **ST:** Fl **ZIP:** 32837 **INF?** (**OOF?**) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

8/21/98 Slammed by 05483.
Lost discounts with Sprint added as new Customer.
Never requested GTE, very unhappy with being talked over.

13.74 credit given or honored
5.00
18.74cr Would like to know how this took place!

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

24029

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 9/16/98 **Time:** 3:15 **AM** (**PM**) **(Circle One)**

CSR Name: Andrea Prang **Badge #:** _____

Customer Name: Bertram L Roberts **BTN:** _____

Address: 11331 SW 50 St **Apt.#:** _____

City: Miami **ST:** FL **ZIP:** 33165 **INF?** **OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

very upset, was slammed by GTEL D; Wants to know who did it and why. Needs somebody to get back with RR.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: Sep-16-98 Time: 9:34 (AM) PM (Circle One)

CSR Name: Jorge Rojas. Badge #:

Customer Name: Jimenez Carlos BTN: 305-665-9023

Address: 6461 SW 27 st Apt.#:

City: Miami ST: FL ZIP: 33155 INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cst call very upst because he recib a bill for 10.75 but he never req the serv. with GTE he don't wont to pay the bill and he like to know how he had a order with GTE.

RESEARCH: (For Customer Service Use Only)

MSOSCA#2
Solar I order 08/12/98
QME Activ. 08/15/98.

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 9-16-98 **Time:** 6:52 **AM** (PM) **(Circle One)**

CSR Name: Richelle William **Badge #:** _____

Customer Name: Jeannie Morea **BTN:** 954-441-0353

Address: 18528 NW 19 St **Apt.#:** _____

City: Pembroke Pine **ST:** FL **ZIP:** 33029 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer was slammed. She wants an investigation done on who authorized the change of her long distance service to GTELD.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9/16/98 TIME 7:00 AM _____ PM X

CSR NAME Brenda Lewis BADGE # 119921

CUSTOMER NAME Doris Huston BTN # 3052209093

ADDRESS 11159 northwest 6th Terrance APT # _____

CITY ~~maime~~ Miami STATE FL ZIP CODE 33172

IS RESPONSE NEEDED? (YES) / NO PROJECT? GTEL0

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

was switch without consent to GTC want to know who authorized it.

Snyder-TG240dom, ICP II 8/27 Eff 9/14

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Explain how to get off of GTE. Told Doris. did show an order taken by Snyder. A julia Aguero is listed as contact. No 1998

RETURN CALL TO CUSTOMER

COMMENTS

24033

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 09/15/98 **Time:** 7:48 **AM** (PM) **(Circle One)**

CSR Name: Shelia Cramer
contact: MRS. COOK **Badge #:**

Customer Name: Gary Cook **BTN:** 561-791-2827

Address: 4930 Royal Palm Blvd **Apt.#:**

City: Royal Palm Bch **ST:** FL **ZIP:** 33411 **INF? OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CU says she rec. a call on 9/02 asking if she was Barbara Cook, she replied yes, the woman then proceeded to say she would call Mrs. Cook back. Mrs. Cook said excuse me, the ~~rep~~ person asked said you're Mrs Cook aren't you she said yes, the woman then say I'll call right back again. Mrs. Cook then agreed. Mrs. Cook believes this may have been how her service was switched.
NOTE: the order date was 9/3

RESEARCH: (For Customer Service Use Only)

Pic = P

Ani = Active

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

DATE TURNED IN: 9-15-98 DATE COMPLETED: 9-15-98

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9-15-98 TIME 12:43 AM ____ PM ✓

CSR NAME Stacy Reed BADGE # 120734

CUSTOMER NAME Mary Ammirato BTN # (941) 351-9067

ADDRESS 9714 Glenbrooke Terrace APT # ____

CITY Sarasota STATE FL ZIP CODE 34243

IS RESPONSE NEEDED? (YES) NO PROJECT? Customer Service/LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

The customer received a confirmation letter for switching LD to GTE. The customer sicessed that neither she nor her husband either received a call or made a call to change LD. The number on the letter is 1-888-483-1143. The customer called, was put on hold, and then a recording told her the call was going to be disconnected. The customer is very unhappy. She is going back to AT&T and wants a response as to who placed the order. The order went through on Sept. 6th. The customer said the best time to call her for a response is in the evenings.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

I called orders to verify the change and then filled this form out upon customer request

Snyder - TC, 300 dom 9/03 Eff 9/21

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9-15-98 TIME _____ AM _____ PM _____

CSR NAME BRIAN HESTER BADGE # _____

CUSTOMER NAME Jose Perla BTN # 305-233-2913

ADDRESS 10359 SW 209 TH LN APT # _____

CITY Miami STATE FL ZIP CODE _____

IS RESPONSE NEEDED? (YES) / NO PROJECT? GTE Long Distance

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer is Bell South Local & Bell South Employee. Switched from AT;T to AOL Long Distance. Was on AOL for 2 days then was switched to GTE L.D. Snyder order on 8-17-98 TC 240 Free Intl minutes ICP2. Customer wants tape researched and wants to be called back by Supervisor

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Snyder - TC, 240min, ICPII 8/17 EFF 9/01

1998 = Ø

RETURN CALL TO CUSTOMER

COMMENTS

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9-15-98 TIME 11:40 AM 11:40 PM

CSR NAME JOSEPH RODRIGUEZ BADGE # 119398

CUSTOMER NAME JUSTINE (Husband CALLED) BTN # 561 967 6862

ADDRESS _____ APT # _____

CITY _____ STATE _____ ZIP CODE _____

IS RESPONSE NEEDED? (YES) / NO PROJECT? R- LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

CUSTOMER WAS SLAMMED AND WAS ERRATIONAL. WOULD NOT accept transfer when offered. Hung up before could really address problem. Threaten to get GTE FIXED for Slam.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

DMSS- N/O - 11/01998

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9-15-98 TIME 7:43 AM ✓ PM _____

Rebecca McCalister

CSR NAME Jim Smarkusky BADGE # 119000

CUSTOMER NAME ↓ ↓ BTN # 8136260070

ADDRESS 10305 Casa Palermo APT # Drive #2

CITY Riverview STATE FL ZIP CODE 33569

IS RESPONSE NEEDED? (YES) NO PROJECT? long distance

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer is upset because she was charged w/out his permission. He would like to know who & why this was done.

Nc 1998

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

DMSS-N/O

RETURN CALL TO CUSTOMER

COMMENTS

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 9-15-98 **Time:** 8:51 (AM) PM **(Circle One)**

CSR Name: Neina **Badge #:** _____

Customer Name: Rudolf F Nagel **BTN:** 305-251-7182

Address: 15301 SW 147th AV **Apt.#:** _____

City: Miami **ST:** FL **ZIP:** 33187 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: (ESCALATION *** NEEDED) **NOT NEEDED**

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer was switched without his authorization, customer wants to know who verified his order. Customer was very, very upset, and wants a supervisor to call him back

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9-14-98 TIME 8:20 AM _____ PM X

CSR NAME David Highnote BADGE # 19950

CUSTOMER NAME Louis A. Benitez BTN # 305 383 5312

ADDRESS 10251 S.W. 132nd Ave. APT # _____

CITY Miami STATE FL ZIP CODE 33183

IS RESPONSE NEEDED? (YES) NO PROJECT? LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Got switched to GTE w/o authorization and recieved a bill. He had MCI and wants to know how & when he got switched.

(OOF) CBR # 305 375 6250

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Cust Serv was closed — Nothing!
Snyder-TC, 360 Intl., ICP II 8/12 Eff 8/27

RETURN CALL TO CUSTOMER

COMMENTS

24040

DATE TURNED IN: 9-14-98 DATE COMPLETED: ____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9-14-98 TIME 12:25 AM ____ PM X

CSR NAME Angelica Carthorne BADGE # 142746

CUSTOMER NAME Barry Farmer BTN # 4074237509

ADDRESS 1410 Arlington St APT # ____

CITY Orlando STATE FL ZIP CODE 32805

IS RESPONSE NEEDED? (YES) / NO PROJECT? GTELD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

MR. Farmer did have AT&T for his long distance service, but was switched without his permission to GTE. Ever since he has been trying to call Customer service and get it switched back he has left messages, but has not gotten a Response back. He mentioned he did not appreciate the Runaround on his service.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

~~Take~~ Snyder-TC, 360dom, ICC. 8/21 Eff 9/14

RETURN CALL TO CUSTOMER

COMMENTS

24041

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9-14-98 TIME 8:23 AM ✓ PM _____

CSR NAME Rebecca McCarson BADGE # 119000

CUSTOMER NAME Francisco Arguelles BTN # 3055947251

ADDRESS 3137 NW 99th Ave APT # _____

CITY Miami STATE FL ZIP CODE 33172

IS RESPONSE NEEDED? (YES) / NO PROJECT? _____

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer was switched w/o his permission he would like to know who & why he was switched. He wants a response ASAP.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

No 1998
Snyder - TC, 240 min, 10PTL 8/23 Eff 8/28

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: 09/14/98 TIME COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 09/14/98 TIME 5:39 AM _____ PM ✓

CSR NAME Elaine Jimenez BADGE # 1347

CUSTOMER NAME Rose Frye BTN # 561 441 1572

ADDRESS 6316 S. Ash Lane APT # _____

CITY ~~Manatee~~ Lakeworth STATE FL ZIP CODE 33462

IS RESPONSE NEEDED? (YES) / NO PROJECT? customer service

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Mrs. Frye was switched over to GTE w/o her permission and she would like an explanation of who has given authorization for this change. She states that she will contact the FCC if she does not receive an explanation. She received confirmation on Sept 11.

Name on order is John Tompson - same address No 1998

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

no orders in system?
Snyder - TC, 360 don 9/03 Eff 9/21

RETURN CALL TO CUSTOMER

COMMENTS

24043

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 9-14-98 **Time:** 11:00 (AM) PM **(Circle One)**

CSR Name: Chris Wickert **Badge #:** 1586

Customer Name: Richard Harmon **BTN:** (941) 921-1364

Address: 8337 Turnberry Cir **Apt.#:**

City: Sarasota **ST:** FL **ZIP:** 34241-9643 (INF?) OOF? **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer was slammed by BLY on 8/30/98, he was upset because he did not authorize it & wanted to know if he was billed with it.

RESEARCH: (For Customer Service Use Only)

he was disconnected on 9/9/98

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 9-14-98 **Time:** 6:50 **AM** (PM) **(Circle One)**

CSR Name: Sonya M. **Badge #:**

Customer Name: Joseph Colella **BTN:** 941-924-2848

Address: 8425 Turnberry Cir **Apt.#:**

City: Sarasota **ST:** FL **ZIP:** 34241 **INF? OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu. is very irate, he was switched to GTELD w/o auth. He does not want to be billed, threatening to sue, and wants to find out who slammed him. Please call customer back w/ info and possible some kind of satisfaction for him.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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Exhibit REP-18
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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 9-14-98 **Time:** 3:14 **AM** (**PM**) **(Circle One)**

CSR Name: [redacted] Sonya M. **Badge #:** _____

Customer Name: Nick Toatle **BTN:** _____

Address: 537 Navarre Ave **Apt.#:** _____

City: Coral Gables, **ST:** FL **ZIP:** 33134 **INF?** (**OOF?**) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu. was switched to GTELD W/O auth.
he wants more info of who switched them and how we got his info, name, address, #.
He wants someone to call him w/ this info ASAP.
Home # 305-569-9532
work # 305-858-5600

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 12 Sept 98 TIME 1230 AM PM X

CSR NAME Royce Ley BADGE # 47483

CUSTOMER NAME Romark Lozada BTN # 3052210659

ADDRESS 9439 Fantain Blue Blvd APT # 203

CITY Miami ST FL ZIP 33172

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)
Customer claims of being Slammed by GTEL
order date 8-23-98 Active 8-28-98 order # 20506610
Snyder. Customer wants to know who authorized the
change of service.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
No 1998
Snyder - TC, 360 dom BB eff 8/30

RETURN CALL TO CUSTOMER

BY WHOM _____ DATE _____ TIME _____

COMMENTS _____

24047

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9-12-98 TIME 405 AM _____ PM X

CSR NAME Liz BADGE # _____

CUSTOMER NAME Andre Lacroix BTN # 954-925-5933

ADDRESS 1024 SE 4th Ave APT # _____

CITY Dania STATE Florida ZIP CODE 33004

IS RESPONSE NEEDED? (YES) NO PROJECT? long distance

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Unauthorized switch. Mr. Lacroix & his wife live in Canada. They didn't authorize the switch to Gte. He wants to know who & when.

Call back # 4502296600 in Canada

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Snyder order on 8-02-98 TC w/320 domestic EAF 8/17 Rec'd 1998

RETURN CALL TO CUSTOMER

COMMENTS

24048

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 09/12/98 Time: 2:55 AM (PM) (Circle One)

CSR Name: Brenda Badge #: Prog. 3 /CSC

Customer Name: Jose Martinez BTN: 305-246-5662

Address: 24400 Sw 116th Ave Apt.#:

City: Homes ST: FL ZIP: 33031 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cx was very upset like to know who Quote cx one per wk call & let me know.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9/11/98 TIME 11:00 AM ✓ PM _____

CSR NAME Rick CASTANEDA BADGE # 87064

CUSTOMER NAME MAURICIA COSTALES BTN # 305-207-0128

ADDRESS 11765 SW 8F ST. APT # _____

CITY Miami STATE FL ZIP CODE 33175

IS RESPONSE NEEDED? (YES / NO) PROJECT? _____

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Was switched to GTELD w/o her permission. Wants us to find out who the person was and wants that person's supervisor to ensure that the rep who switched her call her and apologize for switching her w/o permission. Told her it would take a while for us to find out who did the switching order. She stated that whoever switched her probably did it thinking they were switching someone dumb or stupid.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

No 1998
Snyder - TC, 360 intl., ICP II 8/24 Eff 9/11

RETURN CALL TO CUSTOMER

COMMENTS

24050

DATE TURNED IN: _____ DATE COMPLETED: ___

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9/11/98 TIME 4:39 AM ____ PM ✓

CSR NAME Andy Salas BADGE # 142201

CUSTOMER NAME Shelia Sebastian BTN # 305751 6616

ADDRESS 1163 NE 87th St. APT # ____

CITY Miami STATE FL ZIP CODE 33138

IS RESPONSE NEEDED? (YES) / NO PROJECT? ____

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

She was switched from ATT to GTE without her permission.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

I told her we would investigate the matter.

Snyder - TC, 360 dom. 8/25 Eff 9/03

RETURN CALL TO CUSTOMER

COMMENTS - She wants someone to call her back.

No 1998

24051

ATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE SEPT 11, 1998 TIME 10:15 AM ✓ PM _____

CSR NAME Johnny Silvas BADGE # 119536

CUSTOMER NAME Pedro Orc BTN # 305-868-1401

ADDRESS 7830 Dickens Ave APT # 204

CITY Miami STATE FL ZIP CODE 33141

IS RESPONSE NEEDED? (YES) NO PROJECT? Long Distance

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer's service was switched without his permission.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1998 = Ø
Snyder - TC, 360 int'l, ICPTT 8/05 Eff 8/20
No 1998

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: 9/11/98 DATE COMPLETED: ____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9/11/98 TIME 4:01 AM ____ PM ✓

CSR NAME Dennis Van Nille BADGE # 119100

CUSTOMER NAME ~~Amy~~ Aymee Gonzalez BTN # 305 228 6286

ADDRESS 393 W. 64th St. APT # ____

CITY Hialeah STATE FL ZIP CODE 33012

IS RESPONSE NEEDED? (YES) NO PROJECT? Customer Service

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer says she was slammed from ATT to GTE. She wants to know who authorized the change and how it was made.

Name on order is Virginia Escobar
9468 SW 15 St.
Miami, FL 33174

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1998 = Ø

Snyder - TC, 3160 Intl., ICPII 8/10 EFF 8/25

RETURN CALL TO CUSTOMER

COMMENTS

24053

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE Sept. 11, 1998 TIME 10:10 AM ✓ PM _____

CSR NAME Sara Chavez BADGE # 87453

CUSTOMER NAME Victor & Margoth Jimenez BTN # (305) 823-5708

ADDRESS 1331 W. 37th Ave. APT # _____

CITY Hialeh STATE FL ZIP CODE 33012

IS RESPONSE NEEDED? (YES) NO PROJECT? Called Cust See.

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer was Changed over to GTE without her permission. She wants A call Back with Info On the ORDer that was placed. Please call her Back.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

ORDer was placed by Snyder one 8-2-98 went through on. Eff 8-1998 TC 3160 intl. ICP II

1998 = Ø

RETURN CALL TO CUSTOMER

COMMENTS

24054

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9-11-98 TIME _____ AM _____ PM _____

CSR NAME FISHER ANN BADGE # 119144

CUSTOMER NAME MARIANO CARCAMO BTN # 954-981-5113

ADDRESS 5923 FILLMORE STREET APT # _____

CITY HOLLYWOOD STATE FL ZIP CODE 33021

IS RESPONSE NEEDED? YES / NO PROJECT? long distance

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

changed to QTE, without permission.
please return a call to customer She is
very IRATE. She wants the tape pulled and
the person name who changed her.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1998 = Ø DMSS-N|O

RETURN CALL TO CUSTOMER AT

COMMENTS 954-929-4266 | work 1-9 p.m.
please call on back of work

24055

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9-10-98 TIME 3:55 AM _____ PM X

CSR NAME Connie Contant BADGE # 120832

CUSTOMER NAME Antonio Guadalope BTN # 954-981-8136

ADDRESS 6340 S.W. 21st APT # _____

CITY Miramar STATE FL ZIP CODE 33023

IS RESPONSE NEEDED? (YES) NO PROJECT? Costomer Service

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

LD was changed w/out his approval. Very upset this happen. Wants the appropreiate messures taken.

No 1998

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Snyder- TC, 360 dom 8/31 eff 9/16

RETURN CALL TO CUSTOMER

COMMENTS

24056

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9-10-98 TIME 12:10 AM ____ PM X

CSR NAME Connie Contant BADGE # 1120832

CUSTOMER NAME Nancy Austin BTN # 4078987326

ADDRESS 4311e Kilarie APT # /

CITY Orlando STATE FL ZIP CODE 32812

IS RESPONSE NEEDED? YES (NO) PROJECT? long distance

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Mrs. Austin was changed to GTE LD w/out her consent. She is very upset that this can happen.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Took complaint + Apologized

No 1998

Snyder-TC, 3L0dom, ICC 8/25 EFF 9/10

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9/10/98 TIME 1:20. AM _____ PM _____

CSR NAME Charmaine Armes. BADGE # 8295.

CUSTOMER NAME Iva. Rappoport. BTN # 305 932.9086.

ADDRESS 250-174th S. APT # _____

CITY Miami Beach. STATE FL. ZIP CODE 33160

IS RESPONSE NEEDED? YES / NO PROJECT? Customer Service.

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer was charged w/a Directory Assistance

No 1998

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Notes - just referred cust to Carrier for charges to be settled between Sniper - TC, 3400 dom 8/30 Eff 9/15

RETURN CALL TO CUSTOMER

COMMENTS

24058

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 9/10/98 **Time:** 4:00 **AM** (PM) **(Circle One)**

CSR Name: Amy B **Badge #:** 1865

Customer Name: Donald la Croix **BTN:** 954-791-3361

Address: 5240 SW 19th ST **Apt.#:**

City: Plan **ST:** FL **ZIP:** 33317-6008 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customers service was taken over without there authorization - Customer and Mrs. La Croix would like someone from sales to contact them and inform them how this order came about

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

DATE TURNED IN: 9-8-98 DATE COMPLETED: _____

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CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE Sept 4, 1998 TIME 8:51 AM ✓ PM _____

CSR NAME Edith Dawson BADGE # 114511

CUSTOMER NAME Patricia L. Mora BTN # 305-233-8788

ADDRESS 16720 S.W. 87 Ct. APT # _____

CITY Miami STATE FL ZIP CODE 33157

IS RESPONSE NEEDED? (YES) NO PROJECT? long distance

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Tape # 833720-170 - LD was switched without her authorization. Stated Sprint called on Sept 4, 1998 to inform her she had been switched. Wants to know that same action was taken for Tuesday night's call.

No 1998

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Snyder - TC, 240min, ICPII 8/17 EFF 9/04
Name on order Felipe Arteaga - same address

RETURN CALL TO CUSTOMER

COMMENTS

24060

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE Sep. 9, 1998 TIME 6:52 AM ____ PM

CSR NAME Jose Serna BADGE # 120010

CUSTOMER NAME Jesus FARIAS BTN # 3052642423

ADDRESS 1421 SW 67TH AVE APT # 28

CITY Miami STATE FL ZIP CODE 33144

!!!

IS RESPONSE NEEDED? YES / NO PROJECT? ~~GTEHDR~~

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer is very upset because GTE switched the services without his permission therefore, MR. FARIAS wants to hear the recording saying that he agrees to receive services thru GTE.

He talked to a representative from AFNI and was told that our Department has that information which is incorrect!

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

DMSS=0

Snyder- TC, 340 dom 8/20 EFF 8/30

RETURN CALL TO CUSTOMER

COMMENTS

24061

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE September 9, 1998 TIME 7:55 AM ✓ PM _____

CSR NAME Amanda Gilley BADGE # 87959

CUSTOMER NAME Joaquin Moreyra BTN # (305) 386-6166

ADDRESS 10261 SW 132nd Ave. APT # _____

CITY Miami STATE FL ZIP CODE 33186

IS RESPONSE NEEDED? (YES) / NO PROJECT? LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer was switched to GTE without his authorization. He wants to know when and how he was switched.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

I apologized to him and told him to call the LD carrier he wants.
Snyder - TC, 3160 dom 8/27 Eff 9/14

RETURN CALL TO CUSTOMER

COMMENTS

DMSS=0

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9-9-98 TIME 8:28 AM ✓ PM _____

CSR NAME Jesse Alonzo BADGE # 87641

CUSTOMER NAME Anna Leon BTN # 305-821-8909

ADDRESS 3599 W. 72nd St APT # _____

CITY Hialeah STATE FL ZIP CODE 33018

IS RESPONSE NEEDED? (YES) / NO PROJECT? LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer was charged to GTE LD and never authorized such a change. They want to know who gave permisson to change service, and wants to hear tape if possible since all our calls are monitored & Recorded.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Called OOF Billing to close out account and give credit

DMSS-O

Snyder:- TC, 360 INTL, ICPII 8/02 EFF 8/17

RETURN CALL TO CUSTOMER

COMMENTS

9-9-98

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9-9-98 TIME 9.25 AM ____ PM X

CSR NAME Contant, C BADGE # 120832

CUSTOMER NAME Lanna Andre BTN # 305 255 2029

ADDRESS 7201 S.W. 174 st APT # ____

CITY Miami STATE FL ZIP CODE 33157

IS RESPONSE NEEDED? (YES) / NO PROJECT? Customer Service

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Was changed without her permission to GTE. She is upset because neither She or her husband changed her service. She really needs to know what she has been charged for her calls. Needs responds ASAP!

Thanks

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Took complaint. Apologized. Gave her AFNT's # to find what plan she's on

Snyder- TC, 360 dom 8/09 Eff 8/24

No 1998

RETURN CALL TO CUSTOMER

COMMENTS

24064

DATE TURNED IN: _____ DATE COMPLETED: ____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9/9/98 TIME 11:00 (AM) PM

CSR NAME Jackie McClain BADGE # 8560

CUSTOMER NAME Richard Harmon BTN # 9419211364

ADDRESS 8337 Turnberry Cir APT #

CITY Sarasota STATE FL ZIP CODE 34241

IS RESPONSE NEEDED? (YES) / NO PROJECT? LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Service changed without his permission. Wants it researched and call back to let him know results -

941 953-2228 (Day ~~#~~ can be reached)

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

No 1998
Snyder - TC, 360 dom 8/30 Eff 9/15

RETURN CALL TO CUSTOMER

COMMENTS

24065

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9-9-98 TIME 11:03 AM ✓ PM ___

CSR NAME Misty Minnie BADGE # 87633

CUSTOMER NAME Mary Ellen Waszkewicz BTN # 813 856 3730

ADDRESS 11812 Lakewood Drive APT # ___

CITY Hudson ST FL ZIP 34669

Can Be Reached at (410)849 2057 until Oct 5th

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)

Ms Waszkiewicz was switched to GTE without authorization also she was put on our International Calling Plan and billed for it we have already issued Credit Cust would just like to know why and how she was switched.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)

DMSS=0 DMSS- N/O

RETURN CALL TO CUSTOMER

BY WHOM ___ DATE ___ TIME ___

COMMENTS ___

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 9/9/98 **Time:** 9:20 (AM) PM (Circle One)

CSR Name: Amy B **Badge #:** 1865

Customer Name: Pedro Regina **BTN:** 561-775-1957 CBR # 847-465-04

Address: 500 Ocean Dr Bldg W **Apt.#:** 8-C

City: Juno Bch **ST:** FL **ZIP:** 334089119 **INF?** **OOF?** (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

Please call at 847-465-04

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer says he never spoke w/ anyone from GTELD but his service was switched to us.
Customer would like to speak to someone in Sales about how this order came about. Please contact at 847-465-0431

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

DATE TURNED IN: 9/8/98 DATE COMPLETED: ____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9/8/98 TIME 1:10 AM ____ PM X

CSR NAME Susan Vaughan BADGE # 119580

CUSTOMER NAME Aide Martinez BTN # 305 688 0840

ADDRESS 580 E 55th St APT # ____

CITY Hialeah STATE FL ZIP CODE 33013

IS RESPONSE NEEDED? YES / (NO) PROJECT? customer service

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Slammed by Snyder on 7-30-98. Very upset about getting taken off her current plan.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

OOF billing gave complete credit and closed account.

No 998

Snyder - TC, 360 intl., ICPTL 7/30 Eff 8/15

RETURN CALL TO CUSTOMER

COMMENTS

24068

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE Sept 8.98 TIME 11:45 AM X PM _____

CSR NAME Jennifer Bersher BADGE # 941952 1220

CUSTOMER NAME Cass James/Berner BTN # 9411957 3744

ADDRESS 904 Irving APT # _____

CITY Sarasota STATE Fl ZIP CODE 34236

IS RESPONSE NEEDED? YES / NO PROJECT? GTE ND

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Change without permission
Reason looking for tape of order
If tape - She would like to hear it.
No tape - don't bother to call.

941-952-1220 - No 1998 DMSS - N/O
(941-957-3744 - No 1998
↳ Snyder - TC, 360 dom 8/27 eff 9/14

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

RETURN CALL TO CUSTOMER

COMMENTS

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 9-8-98 **Time:** 7:58 (AM) PM **(Circle One)**

CSR Name: Tim Fitzpatrick **Badge #:** _____

Customer Name: JOHN G EBENGER **BTN:** 305829 1130

Address: 8872 NW 189th Ter **Apt.#:** _____

City: HLH **ST:** FL **ZIP:** 33018 **INF?** (OOF?) **(Circle ~~One~~)**

PLEASE CIRCLE RESPONSE: (ESCALATION NEEDED) **NOT NEEDED**

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

MR. EBENGER WANTS TO KNOW HOW, WHO, WHEN & WHY HE WAS SWITCHED TO GTE. HIS WORK # IS 305 381 7633. HE HAS ~~SIGNED~~ SIGNED HE HAS ALREADY CONTACTED THE FCC ABOUT THE POSSIBLE BILLING CHARGES.

RESEARCH: (For Customer Service Use Only)

ACTIVE IN Q.ME AS OF 8-31-98.

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 09/08/98 **Time:** 5:16 **AM** (PM) **(Circle One)**

CSR Name: Shelia Cramer **Badge #:**

Customer Name: Carol Morin. **BTN:** (407) 365-9310

Address: 2901 Elm ST. **Apt.#:**

City: Oviedo **ST:** FL **ZIP:** 32765 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: (ESCALATION NEEDED) **NOT NEEDED**

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu never auth. switch in Long Distance. Explained that I don't have ability to switch her back. She says the "better not rec. a bill from GTE 4D or she will take it to the television station". She doesn't feel that it should be her responsibility to have her service switched.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 09/08/98 **Time:** 5:06 **AM** (PM) **(Circle One)**

CSR Name: Shelia Cramer **Badge #:** _____

Customer Name: Maria Schwarzwald **BTN:** (305) 892-0413

Address: 721 NE. 121st N. **Apt.#:** _____

City: Miami **ST:** FL **ZIP:** 33161 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: (ESCALATION NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Mrs. Schwarzwald was very upset, her service was changed w/o auth. She would like to know who changed her service. She also needs to be contacted.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE Sept 7, 1998 TIME 9:47 AM ✓ PM _____

CSR NAME Rachael A. Mendez BADGE # 88379

CUSTOMER NAME Diane Holmes BTN # 305-233-2272

ADDRESS 12121 SW 172nd St APT # _____

CITY Miami STATE FL ZIP CODE 33177

IS RESPONSE NEEDED? (YES) / NO PROJECT? Res Ld

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

She has Southwest Bell and AT&T. She was switched 1 to 2 weeks ago to N.T.E. She did not give authorization. She will be suing and filing a complaint.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

198 DMSS=0
Snyder- TC, 360 dom 8/19 Eff 9/03

RETURN CALL TO CUSTOMER

COMMENTS

24073

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 9-5-98 **Time:** 2:25 **AM** (PM) **(Circle One)**

CSR Name: Jeanette Lee **Badge #:** _____

Customer Name: D Scott Herrera **BTN:** (305) 261-3015

Address: 1207 SW 76 Ave **Apt.#:** _____

City: Miami **ST:** FL **ZIP:** 33144 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Unauthorized switch of phone service was done by a GTE Sales Rep. Never asked to be switched, not signed any documents to switch over, nor did she ever give verbal authorization.

acct shows PTC was rejected

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 9-5-98 **Time:** 11:00 **(AM) PM (Circle One)**

CSR Name: Veronica Riggs **Badge #:**

Customer Name: Ester Freeman **BTN:** 305-651-6916

Address: 1605 NE 205th Ter **Apt.#:**

City: Miami **ST:** FL **ZIP:** 33179 **INF? (OOF?)** (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer is extremely upset over her long distance being switched without her authorization but what makes this even worse - We switched her long distance in her DECEASED HUSBAND'S NAME. This upset her more than the switch itself. She wants an answer immediately on who authorized the switch.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 9-4-98 **Time:** 2:45 **AM (PM)** (Circle One)

CSR Name: Farrah Gathright **Badge #:**

Customer Name: Jordan D Baxter **BTN:** 941-379-5156

Address: 5537 Hayden BLVD **Apt.#:**

City: Sarasota **ST:** FL **ZIP:** 34232 **(INF?)** ~~OOF?~~ (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

Mrs. Baxter called in

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cx didn't request BTE and wishes to know who signed her up.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: Sep-09-98 **Time:** 6:15 pm **AM (PM)** (Circle One)

CSR Name: Jorge Rojas. **Badge #:**

Customer Name: Luis Bernal **BTN:** 305-556 6787

Address: 6700 SW 186 st Apt 50 **Apt.#:**

City: Miami **ST:** FL **ZIP:** 33015 **INF? (OOF?)** (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cst was very upset. because he recv. a bill for 27.90 an is a Closing statement bcs he never req. the serv. with us and we had His information. also the Social Sec. 591-37-5248.

RESEARCH: (For Customer Service Use Only)

Solar - I order and O order
DUF - D and the intra is desconnect for no pay.
USOS - California Cutel.

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 09/04/98 Time: 4:45 AM (PM) (Circle One)

CSR Name: Brenda Badge #: CSC/Project S

Customer Name: Recicar, Cris Copher BTN: 305-387-2149

Address: 15550 SW 80 ST Apt.#:

City: Miami ST: FL ZIP: 33193 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer never requested GTE and would like to know who authorized the order. Please call him at 305-387-2149 and let him know who authorized the order

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

24078

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 9.4.98 **Time:** 12:45p **AM PM (Circle One)**

CSR Name: Carrie R Ryan **Badge #:** _____

Customer Name: Kishor Gangwani **BTN:** 305-856-3718

Address: 35 SW 20th Rd **Apt.#:** _____

City: Miami **ST:** FL **ZIP:** 33129 **INF? OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu was slammed by GTEFL. Nobody in the household spoke to anyone from GTE. She would like to know who told them to order + authorized the switch.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE Sept. 4, 1998 TIME 3:22 AM _____ PM X

CSR NAME ~~Ms. Miles~~ Liz BADGE # _____

CUSTOMER NAME Ms. Miles, B. BTN # 305-621-8837

ADDRESS 1705 NW 185 Ter. APT # _____

CITY Miami STATE Florida ZIP CODE 33169

IS RESPONSE NEEDED? (YES / NO) PROJECT? long distance

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

unauthorized switch

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Sny on 8/24 TC w/3140 domestic eff. 9/9 taken 8/24

1998 = ZERO

RETURN CALL TO CUSTOMER

COMMENTS

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9-4-98 TIME 8:08 AM ✓ PM ___

CSR NAME Rebecca McCarson BADGE # 119000

CUSTOMER NAME Alberto Cabrera BTN # 3052657446

ADDRESS 12814 S.W. 48 Terrace APT # ___

CITY Miami ST FL ZIP 33175-463

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)

Customer did not want to be changed to GTE - they would like to hear the tape to find out who switched them w/out their permission

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)

'98 DMSS=0
Smyder - TC, 360 dom 8/02 Eff 8/11

RETURN CALL TO CUSTOMER

BY WHOM ___ DATE ___ TIME ___

COMMENTS ___

DATE TURNED IN: 9-4-98 DATE COMPLETED: ____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9-4-98 TIME 8:57 AM ✓ PM: ____

CSR NAME Edith Thomas BADGE # [redacted] 11951

CUSTOMER NAME [redacted] BTN # [redacted] 954-921-725

ADDRESS 42 SE 10th Terrace APT # ____

CITY Dania STATE Florida ZIP CODE 33004

IS RESPONSE NEEDED? (YES) / NO PROJECT? GTE ZIP

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer had unauthorized charge to GTE ZIP
Customer is very unhappy

DMSS-N/O
1998 = ZERO

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Cust advised to the contrary her phone and
CPU back and advised to Switch to BellSouth
and ask for PTC. Cust advised that she will
GTE will exist.

RETURN CALL TO CUSTOMER

COMMENTS

24082

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9-4-98 TIME 11:12 AM ✓ PM ___

CSR NAME Rebecca McCarson BADGE # 119080

CUSTOMER NAME Martha Ratelle BTN # 954 961 3247

ADDRESS 9023 SW 23rd terrace APT # ___

CITY dania ST FL ZIP 33312

PLEASE CIRCLE RESPONSE: ~~NEEDED~~ NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)

Customer wants to know who switched her without her permission - She would like to hear the tape & get a response.

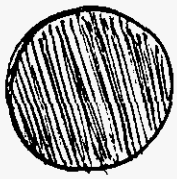
RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)

198 DMSS=C
Smyder - TC, 360 dom 8/17 Eff 9/01

RETURN CALL TO CUSTOMER

BY WHOM ___ DATE ___ TIME ___

COMMENTS ___



CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9-4-98 TIME 9:03 AM ✓ PM ___

CSR NAME 3058222869 BADGE # 119080

CUSTOMER NAME Miguel Garcia BTN # 3058222869

ADDRESS 265 W 55th St APT # ___

CITY Hialeah ST FL ZIP 33012

contact him at → 3058263202

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)

Customer is upset because he was charged w/out his permission - he would like to hear the 1 tape that was made.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)

Snyder - TC, 240min, Talk to Asia 8/18 Eff 9/02

RETURN CALL TO CUSTOMER

BY WHOM ___ DATE ___ TIME ___

COMMENTS

DMSS = 0

24084

DATE TURNED IN: 9/4/98 DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9/4/98 TIME 5:00 AM _____ PM X

CSR NAME Susan Vaughan BADGE # 119880

CUSTOMER NAME Helen Pratt BTN # 9413716805

ADDRESS 4603 Selma APT # _____

CITY Sarasota STATE FL ZIP CODE 34232

IS RESPONSE NEEDED? YES (NO) PROJECT? long distance

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer was slammed by Snyder!!!!! They were out of town the day the order was placed. She was very upset!

1998 = ZERO

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Told her to call AT&T to switch back & we would rerate any GTE calls & credit her change charges.

Snyder-TC, mo promo, ICPTL 8/11 Eff 8/31

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 4 September 1998 TIME 11:48 AM _____ PM X

CSR NAME Becca Roan BADGE # 888777

CUSTOMER NAME Lori Kunstmann BTN # 941-351-7181

ADDRESS 4911 80th Ave Cir E. APT # _____

CITY Sarasota STATE FL ZIP CODE 34243

IS RESPONSE NEEDED? (YES) NO PROJECT? Lol Customer Sve.

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer was "slammed" to GTE. She is very irate about the whole thing. Customer wants to know who authorized the change + who took the order. She also wants us to rerate any calls + pay to ~~Swith~~ switch her back to her company.

1998 = ZERO

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Smuder-TC, 360 dom 8/24 eff 9/09

RETURN CALL TO CUSTOMER

COMMENTS

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9-4-98 TIME 4:35 AM ____ PM ✓

CSR NAME Deborah Dunbee BADGE # 119172

CUSTOMER NAME Obdulio Rodriguez BTN # (305)557-3308

ADDRESS refused to be 25 W. 4 Ave APT # ____

CITY Hialeah STATE FL ZIP CODE 33014

IS RESPONSE NEEDED? (YES) NO PROJECT? LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Cust. is saying he was slammed. Also, he does not want to pay his bill for GTELD. He says he will contact a lawyer if he does recieve any more charges for GTE, he is a Bellsouth customer, the charge is $1.49 (for switching to GTE-this charge actually came on his Bellsouth bill). Customer would like some kind of notification on this matter whether it be on the phone (he does have an answering machine) or by letter. Thanks!

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

I called DMSS - Snyder did the order 8/18 eff 9/2 TC, IDCP2 - no promo.

RETURN CALL TO CUSTOMER

COMMENTS

DMSS=0

DATE TURNED IN: _____ DATE COMPLETED: ____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9-04-98 TIME 11:34 AM ✓ PM _____

CSR NAME Brandi BADGE # 87708

CUSTOMER NAME Manuel Castilla BTN # 305-443-0691

ADDRESS 6051 SW 44 Ter. APT # _____

CITY Miami STATE FL ZIP CODE 33142

IS RESPONSE NEEDED? (YES) NO PROJECT? LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer was switched to GTE LD w/out authorization. He is wanting a callback with info on who switched him, and why.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

198 DMSS=0
Snyder-TC, 360 dom 8/16 EFF 8/31

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: 09/04/98 DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 09/04/98 TIME 7:48 AM ✓ PM _____

CSR NAME Elaine Jimenez BADGE # _____

CUSTOMER NAME Gloria Davalos BTN # (305) 827-1690

ADDRESS 969 W. 80th Pl APT # _____

CITY Hialeah STATE FL ZIP CODE 33014

IS RESPONSE NEEDED? (YES) NO PROJECT? Customer RRV.

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer very upset that her services changed to Gte w/out her authorization. She would like to know why it was done. It was changed Aug 31st.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Offered to change her services back to Aft 98 DMSS=0
Snyder-TC, 360 dom 8/18 Eff 9/02

RETURN CALL TO CUSTOMER

COMMENTS

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 9-4-98 **Time:** 10:46 (AM) PM **(Circle One)**

CSR Name: Neina F **Badge #:**

Customer Name: Joseph Feria **BTN:** 305-264-4931

Address: 275 NW 64 CT **Apt.#:**

City: Miami **ST:** FL **ZIP:** 33126 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: (ESCALATION NEEDED) **NOT NEEDED**

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer was switched without her authorization, She was very, very upset. Customer wants to know who authorize the switch, and what representative she spoke with. Customer can be reached at 1-800-422-7335 Ext 3092 between 8:30 am and 6:30 pm and (954) 858-3092 after hours. Customer wants a [redacted] reply.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9/4/98 TIME 1:59 AM _____ PM X

CSR NAME Pamela Walker BADGE # 119730

CUSTOMER NAME L.U. Oderico BTN # 9549211386

ADDRESS 78 Dominica St. APT # _____

CITY Dania STATE Fl ZIP CODE 33004

IS RESPONSE NEEDED? (YES) NO PROJECT? _____

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer has received a bill fr. GTE for a total of $10.85 for their Florida address. Customer has never had GTE for their Long Distance provider and believes she was slammed by GTE. Needs to be credited full amount.

CBR # 8198482059 Quebec #

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

'98 DMSS=D

DMSS-N|O

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9-3-98 TIME _____ AM _____ PM _____

CSR NAME FISHER ANN BADGE # 11914

CUSTOMER NAME MANUAL SANCHEZ BTN # 305-551-1428

ADDRESS 11905 SOUTHWEST 47TH ST APT # _____

CITY MIAMI STATE FL ZIP CODE 33175

IS RESPONSE NEEDED? (YES / NO) PROJECT? long distance

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

customer was changed to ITC without permission. His daughter Anna Sanchez called Please research, and only keep daughter at 305 366 5372

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Smyrna-TC, 360 intl, ICP II 7/27 Eff 8/11 No 1998 SLAM

24092

(RETURN CALL TO CUSTOMER) AT DEGREE 305 366 5372 ANNA SANCHEZ DAUGHTER

COMMENTS DO NOT CALL CUSTOMER

PLEASE CALL ANNA SANCHEZ - DAUGHTER.

THIS IS HER FATHER'S ACCOUNT. HE JUST HAD HEART SURGERY. SHE REQUESTED NO CALLS TO THE HOME. HER PARENTS HAVE NOT SEEN THE BILL. SHE IS HANDLING THEIR ACCOUNTS.

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9-3-98 TIME 4:20 AM _____ PM ✓

CSR NAME Jose Bejarano BADGE # 119276

CUSTOMER NAME Hester Jerrald BTN # 941 955 7121

ADDRESS 1700 Palmetto Ln APT # _____

CITY Sarasota STATE FL ZIP CODE 34236

IS RESPONSE NEEDED? (YES / NO) PROJECT? long distance

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer was switched and did not request GTE. She would like to find out how it was done and who gave permission.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Snyder-TC, 360dom 8/23 EFF 8/28
No 1998 SLAM

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: 9/3/98 DATE COMPLETED: ____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9/3/98 TIME 7:00 AM ____ PM X

CSR NAME Susan Vaughan BADGE # 119580

CUSTOMER NAME Zielda Fogel BTN # 305.233.4571e

ADDRESS 12130 SW 119th PL APT # ____

CITY Miami STATE FL ZIP CODE 33186

IS RESPONSE NEEDED? YES / (NO) PROJECT? CUSTOMER SERVICE

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer was slammed by Snyder on 8-18-98. Was very upset by this. She claims she never spoke to anyone to authorize this change. Bell South is her local carrier.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Got credit for change fee through Bell South. Left her LD w/GTE because she uses an access code for her LD.
Snyder: TC, 360 dom 8/18 Eff 9/02

RETURN CALL TO CUSTOMER

COMMENTS

DMSS=0

DATE TURNED IN: 9/3/98 DATE COMPLETED: 9/3/98

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

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TODAY'S DATE 9/3/98 TIME 1:58 AM ____ PM ✓

CSR NAME STACY R. LESTER BADGE # 142156

CUSTOMER NAME DONALD ANDERSON BTN # 941-591-2361

ADDRESS 1912 IMPERIAL GOLF COURSE BLVD APT # ____

CITY NAPLES STATE FL ZIP CODE 34110

IS RESPONSE NEEDED? (YES) / NO PROJECT? 10

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

MR. ANDERSON WAS CHANGED TO GTE LONG DISTANCE WITHOUT HIS AUTHORIZATION. HE WANTS AN EXPLANATION AS TO WHY THIS HAPPENED.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Snyder-TC, 360 dom 8/24 Eff 9/09

RETURN CALL TO CUSTOMER

COMMENTS

DMSS=0

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 09/03/98 **Time:** 2:55 **AM (PM) (Circle One)**

CSR Name: Shelia Cramer **Badge #:** _____

Customer Name: Camela Theogene **BTN:** 561-P11-0336

Address: 12404 85th Rd N. **Apt.#:** _____

City: W. Palm Beach **ST:** FL **ZIP:** 33412-2325 **INF? (OOF?)**
(Circle One)

PLEASE CIRCLE RESPONSE: (ESCALATION NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer was upset about switch of service. She says it was never auth. It's only her and her 3 sons at the residence. She says she never auth. any switch in service.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 9/3 **Time:** 1:28 **AM** **PM** **(Circle One)**

CSR Name: Amy B **Badge #:** 1865

Customer Name: Robert Donaldson **BTN:** 305-754-3249

Address: 769 NE 77th Ter **Apt.#:**

City: Miami **ST:** FL **ZIP:** 33138-521 **INT? OOE?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust service was taken over w/out their permission

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

24097

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 9-03-98 **Time:** 9:58 **(AM) PM (Circle One)**

CSR Name: Nina F **Badge #:** _____

Customer Name: Juaquin Fernandez **BTN:** 305-852-8096

Address: 209 Ocean Dr **Apt.#:** _____

City: Tavernier **ST:** FL **ZIP:** 2341 **INF? (OOF?)** **(Circle One)**

PLEASE CIRCLE RESPONSE: (ESCALATION NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer was switched to GTELD without his authorization, customer wants to know who authorized the order.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 9/2 **Time:** 3:26 **AM** (PM) **(Circle One)**

CSR Name: Amy B **Badge #:** 1865

Customer Name: Dana Davis **BTN:** 305-271-4920

Address: 10925 SW 84 CT **Apt.#:**

City: Miami **ST:** FL **ZIP:** 33156 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust says he did not authorize an order w/ GTEL but we are showing an order in our systems

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 9-2-98 **Time:** 3:55 **AM** (PM) **(Circle One)**

CSR Name: Richelle Williams **Badge #:** _____

Customer Name: Vincent Castro **BTN:** 954-481-3445

Address: 672 Siesta Key Cir **Apt.#:** _____

City: Deerfield Beach **ST:** FL **ZIP:** 33441 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer's account was attempted to be. He wants to know by whom.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

DATE TURNED IN: 9/2/98 DATE COMPLETED: ___

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9/2/98 TIME 10:58 AM ✓ PM ___

CSR NAME ~~Claudette Prospere~~ Bonnie Garcia BADGE # 88628

CUSTOMER NAME Claudette Prospere BTN # (305) 232-7334

ADDRESS 10790 SW 160th St. APT # ___

CITY Miami STATE FL ZIP CODE 33157

IS RESPONSE NEEDED? (YES) / NO PROJECT? Cust. Serv.

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Was changed to GTE'S around 8/26-28 & ~~[illegible]~~ she was not aware of any changes, did not authorize any changes, etc. She rec'd card in mail addressed to Juliette (Julia) Prospere, but she's only a family member & hasn't been there since X-mas last yr, has no auth to make changes.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Snyder-TC, 3:00am, 1cc 8/19 Eff 8/26

SLAM

RETURN CALL TO CUSTOMER

COMMENTS

24101

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9-2-98 TIME 11:20 AM ✓ PM _____

CSR NAME Nancy Bishop BADGE # 119370

CUSTOMER NAME Robert R. CONOVER (Mrs) BTN # 941 922 5193

ADDRESS 3031 Regatta Dr APT # _____

CITY Sara Sota STATE FL ZIP CODE 34231

IS RESPONSE NEEDED? (YES) NO PROJECT? long distance

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Was slammed by Snyder

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Check BMSS

Snyder - TC 3600dom 8/23 EFF 8/28

SLAM

RETURN CALL TO CUSTOMER

COMMENTS

24102

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 9/2/98 **Time:** 3:00 **AM** (**PM**) **(Circle One)**

CSR Name: Andrea Prana **Badge #:** _____

Customer Name: Peter Tisler **BTN:** 954-938-5073

Address: 2797 NE 51st **Apt.#:** _____

City: Fort Lauderdale **ST:** FL **ZIP:** 33313 **INF?** (**OOF?**) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

cust was slammed by GTED but order didn't go through due to a pic restrict but still wants to know who slammed her.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 9/1 **Time:** 6:40 **AM** **PM** **(Circle One)**

CSR Name: Amy B **Badge #:** 1865

Customer Name: Charles Pierre **BTN:** 561-375-9321

Address: 1472 SW 26th Ave **Apt.#:**

City: Boynton Beach **ST:** FL **ZIP:** 33426-8086 **INF?** **OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust says service was taken over w/out his authorization

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

DATE TURNED IN: 9-1-98 DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9-1-98 TIME 6:20 AM _____ PM ✓

CSR NAME W. Burton BADGE # 87136

CUSTOMER NAME Gustavo Veronica Martinez BTN # 305-593-5464

ADDRESS NOT Given 9770 NW 51st St APT # _____

CITY Miami STATE FL ZIP CODE 33129

IS RESPONSE NEEDED? (YES) NO PROJECT? GTELD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer slammed TO GTELD without her permission. Customer wants To know how this happened, when it happened and how she will be reimbursed for any higher rates she will be charged.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Snyder - TC, 240min, ICPII 8/17 Eff 9/01

1998 = ZERO

RETURN CALL TO CUSTOMER

COMMENTS

24105

DATE TURNED IN: _____ DATE COMPLETED: ____

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CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE Sept. 1, 1998 TIME 613 AM _____ PM X

CSR NAME ~~Rafel Tovar~~ liz BADGE # _____

CUSTOMER NAME Rafel Tovar BTN # 305-255-2351

ADDRESS 7445 SW 144 Terrace APT # _____

CITY Miami STATE Florida ZIP CODE 33158

IS RESPONSE NEEDED? (YES) / NO PROJECT? long distance

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Unauthorized Switch

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Snyder order on 8/2/98 Eff 8/17 TC w/360 domestic min

1998 = ZERO

RETURN CALL TO CUSTOMER

COMMENTS

24106

DATE TURNED IN: 9-01-98 DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 9-01-98 TIME ~~9:45~~ 9:55 AM ✓ PM _____

CSR NAME Debra Johnston BADGE # 120220

CUSTOMER NAME Jerry Armesto BTN # 305 3879239

ADDRESS 13252 SW 102 Terrace APT # _____

CITY Miami STATE FL ZIP CODE 33186

IS RESPONSE NEEDED? (YES) / NO PROJECT? GTE Long distance

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer was switched to GTE long distance w/o permission. Customer wants know who switched her to GTE long distance (If it was her husband she wants to know how in writing.) Because of this switch. Customer has lost point promo with A.T.&T.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

DMSS-N/O - 1998-No

RETURN CALL TO CUSTOMER

COMMENTS

24107

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: (11/4-98) **Time:** 8:32 (AM) PM (Circle One)

CSR Name: Aaron Dosty

Sales Channel: SNYDER IF (OOF) (Circle One)

Customer Type: (Circle One)
(Consumer – Long Distance Only)
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)

Rudeness	Pricing/Calling Plan Issue	Other Complaint Types:
Unauthorized Switch	Rate Discrepancy	
Promotion Discrepancy	Misunderstanding	
Billing Issue	Payment Not Received	
Repair Problems	Provisioning	
(Slammed)	Cursed Customer	
~~Deceased Person~~		

Customer Service Group: (Circle One)

SITEL	(AFNI)
AFNI-TUCSON	BSC
THORNTON	PHONE MARTS
NIAGARA FALLS	REPAIR
ALPHARETTA	Other:

Customer First Name: Jim
Customer Last Name: Sibilia
Customer Address: 14763 SW 152nd PL
City: Miami **State** FL **Zip** 33196
Customer BTN: 305-378-4038 **Customer WTN (S):**
Social Security #:
If Available, Provide:
Birthdate:
Language:
Market:
Product:
Pricing Plan(s):

Please Circle: CUSTOMER REQUESTED CALLBACK YES (NO) CUSTOMER THREATENING ESCALATION (YES) NO

PROBLEM: (Please be very specific and describe thoroughly):

RESEARCH/RESOLUTION: (What action did you take?):

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FORM-SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4944

Today's Date: 11-4-98 **Time:** 3:30 **AM (PM) (Circle One)**

CSR Name: LeAnn Waldron

Sales Channel: SNYDER **IF/(OF) (Circle One)**

Customer Type: (Circle One)
Consumer – Long Distance Only
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)
Rudeness
Unauthorized Switch
Promotion Discrepancy
Billing Issue
Repair Problems
(Slammed)
Deceased Person

Pricing/Calling Plan Issue
Rate Discrepancy
Misunderstanding
Payment Not Received
Provisioning
Cursed Customer

Other Complaint Type:

Customer Service Group: (Circle One)
SITEL
WENTZVILLE
THORNTON
NIAGARA FALLS
ALPHARETTA

AFNI
BSC
PHONE MARTS
REPAIR
Other: _____

Customer First Name: Julius
Customer Last Name: Solomon
Customer Address: 10088 Laurelwood Pl.
City: Boynton Beach **State** FL **Zip** 33437
Customer BTN: 561-737-2965 **Customer WTN (S):** _____
Social Security #: NA
Birthdate: NA
Language: English
Market:
Product:
Pricing Plan(s):

Please Circle: (ESCALATION-YES) ESCALATION-NO (CALLBACK NEEDED-YES) CALLBACK NEEDED-NO

PROBLEM: (Please be very specific and describe thoroughly):

Cust was slammed by GTE. Called in & told me he was not calling his local or any one else. but we better x his ~~EX-#~~ reg phone service?

over

RESEARCH/RESOLUTION: (What action did you take?):

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE November 04, 1998 TIME 11:47 AM ✓ PM ___

CSR NAME Crystal Galindo BADGE # 88387

CUSTOMER NAME Harrij Grossman BTN # 407-862-0372

ADDRESS 439 Breakwater Dr. APT # ___

CITY Altamonte Springs ST FL ZIP 32714

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)

The customer called in because their service was switched over to GTE ld without their authorization. Mrs. Grossman called in because her long distance company contacted her about the switch. She contacted her local office and they said that they had received a written confirmation or documentation from GTE ld and that it had Mrs. Grossmans authorization or signature on it. The customer said that she already contacted the FCC and that she wants that documentation sent to her to confirm if its true that she signed something like that.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)

1998 &
Snyder - TC, 360dom 10/19 EFF 11/05

RETURN CALL TO CUSTOMER

BY WHOM ___ DATE ___ TIME ___

COMMENTS ___

24110

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 11-4-98 TIME 5:50 AM _____ PM ✓

CSR NAME Maria Montanez BADGE # 120444

CUSTOMER NAME Mrs. Pedro Dias BTN # (305)971-0852

ADDRESS 19800 SW 180 Ave. APT # _____

CITY Miami STATE FL ZIP CODE 33187

IS RESPONSE NEEDED? (YES) NO PROJECT? _____

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer was switched to GTE without her consent. Would like to know who was responsible for this.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1998- ✗
Snyder- TC, 360dom 10/12 EFF 10/27
Name on order is Jose Perez

RETURN CALL TO CUSTOMER

COMMENTS

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 11-4-98 **Time:** 7:30 **AM** (PM) **(Circle One)**

CSR Name: Rachel B **Badge #:** _____

Customer Name: Yves Apollon **BTN:** _____

Address: 1344 NW 86th Way **Apt.#:** _____

City: Coral Springs **ST:** FL **ZIP:** 33071 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu got slammed and wants to know who did it and is very irrate.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 11-3-98 TIME 4:30 AM PM ✓

CSR NAME _____ BADGE # _____

CUSTOMER NAME Melissa Jones BTN # 813-754-5905

ADDRESS 3914 Creek Woods Dr. APT # _____

CITY Plant City ST FL ZIP 33567

PLEASE CIRCLE RESPONSE: NEEDED NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)

— Slammed by GTE —

She is a local CCC Rep. who was slammed & is sure one never requested GTE service. Ms. Jones has agreed to stay B/GTE's ~~the~~ ESP plan, but doesn't feel that changes should have occured w/out her authorization & would like to know who made the change.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)

1998-0
DMSS No Order

RETURN CALL TO CUSTOMER

BY WHOM _____ DATE _____ TIME _____

COMMENTS _____

24113

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 11/3/98 TIME mail AM _____ PM _____

CSR NAME _____ BADGE # _____

CUSTOMER NAME Elena Rodriguez BTN # (305) 558-6478

ADDRESS 1671 W 62nd St. #126 APT # _____

CITY Hialeah STATE FL ZIP CODE 33012

IS RESPONSE NEEDED? YES / NO PROJECT? LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Slammed by Snyder.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

DNSS - Snyder TC, free mins., ordered 9/1 DD 9/1

RETURN CALL TO CUSTOMER

COMMENTS

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11/03/98 **Time:** 9:22 **(AM) PM (Circle One)**

CSR Name: Meg Butler

Sales Channel: SNYDER **IF / OOF (Circle One)**

Customer Type: (Circle One)
(Consumer – Long Distance Only)
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)
Rudeness
Unauthorized Switch
Promotion Discrepancy
Billing Issue
Repair Problems
(Slammed)
Deceased Person
Pricing/Calling Plan Issue
Rate Discrepancy
Misunderstanding
Payment Not Received
Provisioning
Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
SITEL
AFNI-TUCSON
THORNTON
NIAGARA FALLS
ALPHARETTA
(AFNI)
BSC
PHONE MARTS
REPAIR
Other: _____

Customer First Name: Lorenzo ~~McDowell~~
Customer Last Name: McDowell
Customer Address: 775 NW 41st St
City: Miami **State** FL **Zip** 33127
Customer BTN: 305-759-9914 **Customer WTN (S):** _____
Social Security #: [redacted] call back at 3058201900 ext. 436
If Available, Provide: speak with Mrs. McDowell
Birthdate: N/A
Language: English
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION (YES) NO

PROBLEM: (Please be very specific and describe thoroughly):

C stated was slammed. Wants to know who placed order
C stated never spoke with GTE LD about joining.

24115

RESEARCH/RESOLUTION: (What action did you take?):
told cust to call back to get back with LCI.

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-03-98 **Time:** 2:25 **AM (PM) (Circle One)**

CSR Name: Dina F.

Sales Channel: SNYDER **IF (OOF) (Circle One)**

Customer Type: (Circle One)
(Consumer – Long Distance Only)
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)
Rudeness
Unauthorized Switch
Promotion Discrepancy
Billing Issue
Repair Problems
(Slammed)
Deceased Person
Pricing/Calling Plan Issue
Rate Discrepancy
Misunderstanding
Payment Not Received
Provisioning
Cursed Customer
Other Complaint Ty: _____

Customer Service Group: (Circle One)
SITEL
AFNI-TUCSON
THORNTON
NIAGARA FALLS
ALPHARETTA
(AFNI)
BSC
PHONE MARTS
REPAIR
Other: _____

Customer First Name: Mary
Customer Last Name: Lintan
Customer Address: 441 E Hillcrest St
City: Altamonte Spring **State** FL **Zip** 32701
Customer BTN: 407-831-9828 **Customer WTN (S):** _____
Social Security #: _____
If Available, Provide:
Birthdate: _____
Language: English
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) NO CUSTOMER THREATENING ESCALATION YES

PROBLEM: **(Please be very specific and describe thoroughly):**

Customer wants to know there was an order placed for her to have GTE CD, noone ever authorized an order.

RESEARCH/RESOLUTION: (What action did you take?):

24116

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 11-2-98 **Time:**_____ **AM PM (Circle One)**

CSR Name: Tim **Badge #:**_____

Customer Name: PAUL J CANPHEAR **BTN:** 941 351 3525

Address: 5871 Foresien Oak **Apt.#:**_____

City: SARASOTA **ST:** FL **ZIP:** 34243 **INF? OOF?**
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer would like to know when, How, & why he was switched to G.T.E.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM:_____ **DATE:**_____ **TIME:**_____

MMENTS:_____

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 11-2-98 TIME 12:10 AM PM

CSR NAME Ruttmore BADGE #

CUSTOMER NAME Nancy Fortin BTN # 407-876-6933

ADDRESS 11493 Willow Dansend Drive APT #

CITY Windermere ST FL. ZIP 34786

PLEASE CIRCLE RESPONSE: NEEDED NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)
Customer switched w/o authorization by Snyder to DTE. Customer is sprint local & had (Have changed back to) AT+T for long distance.
Order # to switch was T 7477684 Customer angry.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
Customer switched by Snyder - (Called AENT to get customer account for long charges incurred thru DTE.)
1998-C
Snyder - TC 3600 dom 9/29 eff 10/14

RETURN CALL TO CUSTOMER

BY WHOM DATE TIME

COMMENTS

24118

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE Nov. 2, 1998 TIME 7:15 AM ___ PM ✓

CSR NAME Kristy Ruiz BADGE # 142204

CUSTOMER NAME Rinfa Caldera BTN # 305)3885432

ADDRESS 15464 SW 68 Lane APT # ___

CITY Miami ST FL ZIP 33193

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)
Mrs. Caldera a letter from GTE saying that she had switched from ATT, but she did not. The letter said Oct 29.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
1998-0
Snyder-TC, 360 dom 1925 EFF 11/11

RETURN CALL TO CUSTOMER

BY WHOM ___ DATE ___ TIME ___

COMMENTS ___

24119

DATE TURNED IN: 11/2/98 DATE COMPLETED: ___

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 11/2/98 TIME 6:22 AM ___ PM ✓

CSR NAME OLIVIA NUNEZ BADGE # 88040

CUSTOMER NAME NANCY REDIGAN BTN # 904 672 1487

ADDRESS 6 PINE BLUFF TR APT # ___

CITY ORMOND BEACH STATE FL ZIP CODE 32174

IS RESPONSE NEEDED? (YES) NO PROJECT? ___

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

CUSTOMER WAS SWITCHED WITHOUT HER PERMISSION SHE PREVIOUSLY HAD MCI 5¢ SUNDAYS AND WANTS TO BE REIMBURSED FOR THE DIFFERENCE SINCE THESE CALLS WILL GO THROUGH GTE AT A HIGHER RATE. SHE DEFINITELY WANTS A CALLBACK. HER HUSBAND IS FURIOUS. SHE FEELS THE CHANGE MAY HAVE TAKEN PLACE OCT 23. MRS. REDIGAN WANTS TO FIND OUT HOW THIS TOOK PLACE.

HUSBAND WK NUMER IS 904 447 2022 HAS ANSWERING MACHINE AT BOTH NUMBERS.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1998-Ø

Snyder-TC, 3100 dom 10/21 EFF 11/09

RETURN CALL TO CUSTOMER

COMMENTS

24120

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 11-2-98 TIME 7:20 (AM) PM

CSR NAME BettyAnn Phair BADGE # 87055

CUSTOMER NAME Hedy Von Pauluis BTN # 3056654938

ADDRESS (Did not give) APT #

CITY Miami STATE FL ZIP CODE

IS RESPONSE NEEDED? YES / (NO) PROJECT? LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

switched w/o consent - also
Sebastian @ 800-483-8267 told
her GTE is a Spanish owned
company (?)

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

DMSS - shown "No orders" at all
1998 - & DMSS-N/O

RETURN CALL TO CUSTOMER

COMMENTS

24121

DATE TURNED IN: _____ DATE COMPLETED: _____

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CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 11-2-98 TIME 3:12 AM _____ PM ✓

CSR NAME Sam Alonzo BADGE # 87362

CUSTOMER NAME Clemintine Odum BTN # 954 485-2621

ADDRESS 4940 N.W. 13th Ct APT # _____

CITY Lauderhill STATE FL ZIP CODE 33313

IS RESPONSE NEEDED? (YES) / NO PROJECT? Long Distance

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer was switched without her Authorization
Wants to know who did + why

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1998 - C DMSS-N|O

RETURN CALL TO CUSTOMER

COMMENTS

24122

DATE TURNED IN: 11-2-98 DATE COMPLETED: __

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 11-2-98 TIME 11:32 AM x PM ____

CSR NAME Dalton Bullard BADGE # 87749

CUSTOMER NAME Luis Fernandez BTN # 3053834658

ADDRESS 13734 South west 107 Terrace APT # ____

CITY Miami STATE FL ZIP CODE 33186-318

IS RESPONSE NEEDED? (YES) NO PROJECT? LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Mr. Fernandez was slammed by GTE on 9-22-98, Notified FCC. Wants a copy of tape his order was placed on and a response as quickly as possible. Thanks.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1998-Ø DMSS-N/O

RETURN CALL TO CUSTOMER

COMMENTS

24123

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-2-98 **Time:** 9:57 **(AM) PM (Circle One)**

CSR Name: Aaron Doty

Sales Channel: SNYDER **IF (OOF) (Circle One)**

Customer Type: (Circle One)
(Consumer) – Long Distance Only
~~Small Business–Long Distance Only~~
Consumer – Bundles
Small Business–Bundles

Complaint Type: (Circle One)

		Other Complaint Types:
Rudeness	Pricing/Calling Plan Issue	
Unauthorized Switch	Rate Discrepancy	
Promotion Discrepancy	Misunderstanding	
Billing Issue	Payment Not Received	
Repair Problems	Provisioning	
(Slammed)	Cursed Customer	
~~Deceased Person~~		

Customer Service Group: (Circle One)

SITEL	(AFNI)
AFNI-TUCSON	~~BSC~~
THORNTON	PHONE MARTS
NIAGARA FALLS	REPAIR
ALPHARETTA	Other:

Customer First Name: Reatha
Customer Last Name: Lazcle
Customer Address: 632 NW 1st St Apt # 408
City: Hollandale **State** FL **Zip** 33009
Customer BTN: 954+458-6466 **Customer WTN (8):**
Social Security #:
If Available, Provide:
Birthdate:
Language:
Market:
Product:
Pricing Plan(s):

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) NO CUSTOMER THREATENING ESCALATION YES / NO

PROBLEM: (Please be very specific and describe thoroughly):
Cr was Slammed to GTE LD
wants to know how it happened

RESEARCH/RESOLUTION: (What action did you take?):

24124

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-02-98 **Time:** 12'12 **AM** (PM) (Circle One)

CSR Name: Deina F

Sales Channel: SNYDER IF / (OOF) (Circle One)

Customer Type: (Circle One)
(Consumer – Long Distance Only)
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)
Rudeness
Unauthorized Switch
Promotion Discrepancy
Billing Issue
Repair Problems
(Slammed)
Deceased Person

Pricing/Calling Plan Issue
Rate Discrepancy
Misunderstanding
Payment Not Received
Provisioning
Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
SITEL
AFNI-TUCSON
THORNTON
NIAGARA FALLS
ALPHARETTA
(AFNI)
BSC
PHONE MARTS
REPAIR
Other: _____

Customer First Name: Loretta
Customer Last Name: Lecomte
Customer Address: 2640 Wilson St
City: Hollywood **State** FL **Zip** 33020
Customer BTN: _____ **Customer WTN (S):** _____
Social Security #: _____
If Available, Provide:
Birthdate: _____
Language: English
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION YES / NO

PROBLEM: **(Please be very specific and describe thoroughly):**

Customer was slammed by GTEO, wants to know if authorized the order. Customer was activated on 9-25

RESEARCH/RESOLUTION: (What action did you take?):

24125

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11.02.98 **Time:** 3:14 **AM (PM) (Circle One)**

CSR Name: Deina F

Sales Channel: SNYDER **IF (OOF) (Circle One)**

Customer Type: (Circle One)
(Consumer – Long Distance Only)
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)
Rudeness
Unauthorized Switch
Promotion Discrepancy
Billing Issue
Repair Problems
(Slammed)
Deceased Person
Pricing/Calling Plan Issue
Rate Discrepancy
Misunderstanding
Payment Not Received
Provisioning
Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
SITEL
AFNI-TUCSON
THORNTON
NIAGARA FALLS
ALPHARETTA
(AFNI)
BSC
PHONE MARTS
REPAIR
Other: _____

Customer First Name: Barbara
Customer Last Name: Kenney
Customer Address: 2095 Premier Row
City: Orlando **State** FL **Zip** 32809
Customer BTN: 407-290-1957 **Customer WTN (S):** _____
Social Security #: _____
If Available, Provide:
Birthdate: _____
Language: English
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION YES / NO

PROBLEM: (Please be very specific and describe thoroughly):
Customer wants to know why an order was placed for her to be with GTE.

RESEARCH/RESOLUTION: (What action did you take?):

24126

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 11-2-98 TIME 8:21 AM ✓ PM ___

CSR NAME Patricia Fortner BADGE # 120804

CUSTOMER NAME Samuel Barnwell BTN # 941-359-5[illegible]

ADDRESS 5151 Highland Dr. APT # ___

CITY Sarasota ST Florida ZIP 34231

PLEASE CIRCLE RESPONSE: NEEDED NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)

[illegible]

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)

1998-Q
Snyder - TC, 360 dom 10/04 EFF 10/19

RETURN CALL TO CUSTOMER

BY WHOM ___ DATE ___ TIME ___

COMMENTS ___

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 11-2-98 TIME 6:00 AM ____ PM X

CSR NAME Sup: Wendy Johnson BADGE # 88790

CUSTOMER NAME Daniel H. Doran BTN # 941-751-5537

ADDRESS 518 68th Ave Dr. W APT # ____

CITY Bradenton STATE Florida ZIP CODE ____

IS RESPONSE NEEDED? (YES) / NO PROJECT? GTE LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Changed from AT&T w/out permission - is very upset & is going through the BBB or PUC to complain about it! He is an "IF" Customer Was not very happy about change.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1998 - C
Snyder-TC, 360dom 10/15 EFF 10/22
Name on order is Rolando Barriga

RETURN CALL TO CUSTOMER

COMMENTS

24128

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 11-2-98 TIME 3:59 AM ____ PM X

~~CSR~~ Sup: NAME Wendy Johnson BADGE # 88790

CUSTOMER NAME Margorie Nichols BTN # 954-434-3570

ADDRESS 10332 S.W. 50th Court APT # ____

CITY Cooper City STATE FL ZIP CODE 33328

IS RESPONSE NEEDED? YES / NO PROJECT? GTELD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Had MCI - Local is Bell South -
I spoke with Okey Nichols - he says that he has been changed 3x's within a 3 mo. period. He wants to know how this happened & especially more than once - Has never received a bill for Any of this:
(Is OOF)!!

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

MCI is back as LD & PIC restriction done 1998-0
Snyder-TC, 360 dom 10/20 EFF 11/06

RETURN CALL TO CUSTOMER

COMMENTS

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-11-98 **Time:** 11:24 (AM) PM (Circle One)

CSR Name: Deina F

Sales Channel: SNYDER IF (OOF) (Circle One)

Customer Type: (Circle One)
(Consumer – Long Distance Only)
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)

		Other Complaint Types:
Rudeness	Pricing/Calling Plan Issue	
Unauthorized Switch	Rate Discrepancy	
Promotion Discrepancy	Misunderstanding	
Billing Issue	Payment Not Received	
Repair Problems	Provisioning	
(Slammed)	Cursed Customer	
Deceased Person		

Customer Service Group: (Circle One)

SITEL	(AFNI)
AFNI-TUCSON	BSC
THORNTON	PHONE MARTS
NIAGARA FALLS	REPAIR
ALPHARETTA	Other:

Customer First Name: Eugene
Customer Last Name: Castale
Customer Address: 2942 Tarpon Dr
City: Miramar **State** FL **Zip** 33023
Customer BTN: 954-989-5083 **Customer WTN (S):**
Social Security #:
If Available, Provide:
Birthdate:
Language: English
Market:
Product:
Pricing Plan(s):

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) NO CUSTOMER THREATENING ESCALATION YES/NO

PROBLEM: (Please be very specific and describe thoroughly):
Customer wants to know who authorize the order for him to be switched to GTEC. [redacted]

24130

RESEARCH/RESOLUTION: (What action did you take?):

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE Nov. 11, 1998 TIME 10:25 AM ✓ PM ___

CSR NAME Sara Chavez BADGE # 87423

CUSTOMER NAME D. Monica Vega BTN # (305) 279-7649

ADDRESS 11241 SW 88th St. APT # ___

CITY Miami ST FL ZIP 33176

PLEASE CIRCLE RESPONSE: NEEDED NOT NEEDED

Please Call her @ work [redacted] 8:30-7:00 (305) 598-7700

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)

LOA changed without her permission

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)

No Info DMSS.
DMSS-NJO
1998 ✓
No Data Found

RETURN CALL TO CUSTOMER

BY WHOM ___ DATE ___ TIME ___

COMMENTS ___

24131

E TURNED IN: 11/11/98 DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE November 11, 1998 TIME 3:50 AM _____ PM ✓

CSR NAME Patricia Para BADGE # 19852

CUSTOMER NAME Joan Bertagnoli BTN # 941-683-8921

ADDRESS P.O Box 27176 APT # _____

CITY Tampa STATE FL ZIP CODE 33623

IS RESPONSE NEEDED? (YES) / NO PROJECT? Long Distance

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Joan Bertagnoli words: As a GTE customer I should be able to choose which long distance package to use without giving additional information. Because you already have phone # and the billing address in the computer. This is only done by computer and not physical trip. Give me more security because I have had harassment.

Rep words: The rep that transfer the call to me said it was JC Bartagnoli. The name on the account was J C Bartagnoli, customer said the name on the account is Terry Johnson. Please respond to customer.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1998 @ DMSS-N/O

RETURN CALL TO CUSTOMER

MMENTS

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 11/10/98 Time: 4:00 pm AM (PM) (Circle One)

CSR Name: Brittney Gerber Badge #: CSC

Customer Name: David . Morcan BTN: 954-962-7395

Address: 3032 SW 51ST ST Apt.#:

City: Fort La ST: FL ZIP: 33312 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer was very upset about being slammed and was told by another GTE rep that her husband signed a form. What she wanted was this form that she was told that she signed.

She wanted to get to the bottom of this!! She wants to have an answer within 48 hours.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 11-10-98 TIME 8:24 AM ✓ PM _____

CSR NAME Jesse Alonzo BADGE # 87141

CUSTOMER NAME Melda Smith BTN # 954 989 1833

ADDRESS 1160 N 75th Ave APT # _____

CITY Hollywood STATE FL ZIP CODE 33024

IS RESPONSE NEEDED? (YES) NO PROJECT? LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer was changed without pamissan to GTE. She has never called in or sign anything to Authorize change. Since all calls are monitored and recorded she wants to hear the tape and wants all writen info sent to her

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1998 @ DMSS-N10

RETURN CALL TO CUSTOMER

COMMENTS

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11/10/98 **Time:** 3:00 **AM (PM)** (Circle One)

CSR Name: Diane Burdett

Sales Channel: (SNYDER) **IF / (OOF)** (Circle One)

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- Unauthorized Switch
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- (Slammed)
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer
- Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Joedie
Customer Last Name: Ortiz
Customer Address: PO Box 824902; 841 NW 217th Way
City: Pembroke Pines **State** FL **Zip** 33024
Customer BTN: 954-431-9790 **Customer WTN (S):** 954-431-9790
Social Security #: —
If Available, Provide:
Birthdate:
Language: English
Market:
Product:
Pricing Plan(s): free weekend min a dom / total call

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION (YES) / NO

PROBLEM: **(Please be very specific and describe thoroughly):**

customer slammed to GTE LD order date was 8/23/98 was deactive 9/2/98 but still getting bill wants to know how switched

RESEARCH/RESOLUTION: (What action did you take?):

credit balance on account took out of billing

24135

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 11-10-98 Time: 6:20 AM (PM) (Circle One)

CSR Name: Rachel A Badge #:

Customer Name: Sandra Gates BTN: 904-426-2661

Address: 3331 Juniper Dr Apt.#:

City: Edgewater ST: FL ZIP: 32141 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Slammed By GTE - wants An Explanation of Why.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11/10/98 **Time:** 4:03 p.m. **AM** (PM) (Circle One)

CSR Name: Andrea Prang

Sales Channel: SNYDER IF (OOF) (Circle One)

Customer Type: (Circle One)
(Consumer – Long Distance Only)
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)
Rudeness
(Unauthorized Switch)
Promotion Discrepancy
Billing Issue
Repair Problems
(Slammed)
Deceased Person

Pricing/Calling Plan Issue
Rate Discrepancy
Misunderstanding
Payment Not Received
Provisioning
Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
SITEL
AFNI-TUCSON
THORNTON
NIAGARA FALLS
ALPHARETTA
(AFNI)
BSC
PHONE MARTS
REPAIR
Other: _____

Customer First Name: William
Customer Last Name: Bar
Customer Address: 5660 Boynton Bay Cir
City: Boyn Bch **State** FL **Zip** 33437
Customer BTN: 561-364-8499 **Customer WTN (S):** _____
Social Security #: _____
If Available, Provide:
Birthdate: _____
Language: english
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) NO CUSTOMER THREATENING ESCALATION (YES) NO

PROBLEM: (Please be very specific and describe thoroughly):

w/ 2 switched without authorization to GTELD and w/ its to know who did it and why

RESEARCH/RESOLUTION: (What action did you take?):

24137

CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-9-98 Time: 6:57p AM (PM) (Circle One)

CSR Name: James Jones

Sales Channel: SNYDER IF (OOF) (Circle One)

Customer Type: (Circle One)
(Consumer – Long Distance Only)
~~Small Business-Long Distance Only~~
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)
Rudeness
Unauthorized Switch
Promotion Discrepancy
Billing Issue
~~Repair Problems~~
(Slammed)
Deceased Person

Pricing/Calling Plan Issue
Rate Discrepancy
Misunderstanding
Payment Not Received
Provisioning
Cursed Customer

Other Complaint Typ
_____
_____
_____
_____
_____

Customer Service Group: (Circle One)
(SITEL)
AFNI-TUCSON
THORNTON
NIAGARA FALLS
ALPHARETTA
AFNI
BSC
PHONE MARTS
REPAIR
Other: _____

Customer First Name: IRMA
Customer Last Name: RUIZ
Customer Address: 6594 NW 2 St
City: Margate State FL Zip 33063
Customer BTN: 954 977-6769 Customer WTN (S): 954-977-6769
Social Security #:
If Available, Provide:
Birthdate:
Language:
Market:
Product:
Pricing Plan(s):

Please Circle: CUSTOMER REQUESTED CALLBACK YES / NO CUSTOMER THREATENING ESCALATION (YES) / NO

PROBLEM: (Please be very specific and describe thoroughly):
Cust was slammed by US and is threatening to call FCC.

RESEARCH/RESOLUTION: (What action did you take?):

24138

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11/09/98 **Time:** 5:26 **AM (PM)** (Circle One)

CSR Name: Diane Burdett

Sales Channel: (SNYDER) IF / (OOB) (Circle One)

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)

		Other Complaint Types:
Rudeness	Pricing/Calling Plan Issue	_____
Unauthorized Switch	Rate Discrepancy	_____
Promotion Discrepancy	Misunderstanding	_____
Billing Issue	Payment Not Received	_____
Repair Problems	Provisioning	_____
(Slammed)	Cursed Customer	_____
Deceased Person		

Customer Service Group: (Circle One)

SITEL	AFNI
AFNI-TUCSON	BSC
THORNTON	PHONE MARTS
NIAGARA FALLS	REPAIR
ALPHARETTA	Other: _____

Customer First Name: Johnny ~~Jackes~~
Customer Last Name: Jackson
Customer Address: PO Box 555855
City: Orlando **State** FL **Zip** 32855-5855
Customer BTN: 407-299-1180 **Customer WTN (S):** 407-299-1180
Social Security #:
If Available, Provide:
Birthdate: —
Language: English
Market:
Product:
Pricing Plan(s): Total Call Freedom min

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) NO CUSTOMER THREATENING ESCALATION (YES) NO

PROBLEM: (Please be very specific and describe thoroughly):
Customer Switch w/out authorization the order date 9/19/98

24139

RESEARCH/RESOLUTION: (What action did you take?):
told how get back w/ other carrier & PIC

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE November 9, 1998 TIME 9:45 AM ✓ PM _____

CSR NAME Tanya Von Willer BADGE # 119158

CUSTOMER NAME Maria Gloria [illegible] BTN # 305-274-6699

ADDRESS 9310 S.W. 93rd Ave APT # _____

CITY Miami STATE FL ZIP CODE 33176

IS RESPONSE NEEDED? YES / NO PROJECT? _____

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer was switched to GTE without authorization. The customer would like to know who and when she was switched to GTE. Customer is suppose to have AT&T as the Long Distance carrier. The customer does want a response.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

DMSS-N/O

1998-C

RETURN CALL TO CUSTOMER

COMMENTS

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-09-98 **Time:** 9:07 (AM) PM (Circle One)

CSR Name: Deina F

Sales Channel: SNYDER IF / OOP (Circle One)

Customer Type: (Circle One)
(Consumer – Long Distance Only)
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)
Rudeness
Unauthorized Switch
Promotion Discrepancy
Billing Issue
Repair Problems
(Slammed)
Deceased Person

Pricing/Calling Plan Issue
Rate Discrepancy
Misunderstanding
Payment Not Received
Provisioning
Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
SITEL
AFNI-TUCSON
THORNTON
NIAGARA FALLS
ALPHARETTA
(AFNI)
BSC
PHONE MARTS
REPAIR
Other: _____

Customer First Name: Michelle
Customer Last Name: Bond
Customer Address: 8524 SW 144th Ct
City: Miami **State** FL **Zip** 33183
Customer BTN: 305-385-0629 **Customer WTN (S):** _____
Social Security #: _____
If Available, Provide:
Birthdate: _____
Language: English
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) NO CUSTOMER THREATENING ESCALATION YES / NO

PROBLEM: (Please be very specific and describe thoroughly):

Customer wants to know who authorized the order for her to be switched to GTEL. She was activated on 9-12-98

RESEARCH/RESOLUTION: (What action did you take?):

24141

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-09-98 **Time:** 9:27 **(AM) PM (Circle One)**

CSR Name: Deina F

Sales Channel: SNYDER IF / (OOF) (Circle One)

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- (Unauthorized Switch)
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- Slammed
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Robert
Customer Last Name: Collier
Customer Address: 520 NE 20St
City: Ft Lauderdale **State** FL **Zip** 33309
Customer BTN: 954-563-3058 **Customer WTN (S):** _____
Social Security #: _____
If Available, Provide:
Birthdate: _____
Language: English
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: CUSTOMER REQUESTED CALLBACK YES / NO CUSTOMER THREATENING ESCALATION (YES) NO

PROBLEM: **(Please be very specific and describe thoroughly):**

Customer very rude and irate, she is upset an order is placed to switch her (she is restricted) but does not want anymore calls or letters sent in the mail.

RESEARCH/RESOLUTION: (What action did you take?):

24142

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 11-09-98 **Time:** 8:07 (AM) PM **(Circle One)**

CSR Name: Rick Goins **Badge #:** 1629

Customer Name: Mrs. Silverton **BTN:** 305-270-9567

Address: 9884 SW. 88 ST. ~~Miami~~ **Apt.#:**

City: Miami **ST:** FL **ZIP:** 33130 **INF?** (OOE?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust Slammed and very upset.

Wants Reply

RESEARCH: (For Customer Service Use Only)

T4CKX55

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

24143

FORM-SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4944

Today's Date: 11-9-98 **Time:** 7:13 **AM** (PM) **(Circle One)**

CSR Name: Sonya M.

Sales Channel: SNYDER (IF/OOF (Circle One))

Customer Type: (Circle One)
- ~~Consumer – Long Distance Only~~
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- ~~Unauthorized Switch~~
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- Slammed
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Type: _____

Customer Service Group: (Circle One)
- SITEL
- WENTZVILLE
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- AFNI
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: _____
Customer Last Name: Mrs. Catlin
Customer Address: 7511 3rd Ave. NW
City: Bradenton **State** FL **Zip** 34209-7216
Customer BTN: 941-795-2384 **Customer WTN (S):** _____
Social Security #: N/A
Birthdate: _____
Language: English
Market: N/A
Product: _____
Pricing Plan(s): _____

Please Circle: ESCALATION-YES ESCALATION-NO (CALLBACK NEEDED-YES) CALLBACK NEEDED-NO

PROBLEM: (Please be very specific and describe thoroughly):
Cust was switched w/o authorization, and wants to know how it happened please call cust back.

RESEARCH/RESOLUTION: (What action did you take?):

24144

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-9-98 **Time:** 7:00 **AM / PM (Circle One)**

CSR Name: Sonya M.

Sales Channel: SNYDER **IF / OOF (Circle One)**

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- (Unauthorized Switch)
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- (Slammed)
- Deceased Person

Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name:
Customer Last Name: Mrs. Bandrich
Customer Address: 12637 – NW 7th Ln
City: Miami **State** FL **Zip** 33182-2096
Customer BTN: 305-552-8869 **Customer WTN (S):**
Social Security #: N/A
If Available, Provide:
Birthdate:
Language: English
Market: N/A
Product:
Pricing Plan(s):

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION YES / NO

PROBLEM: **(Please be very specific and describe thoroughly):**
Client wants to know who gave authorization to switch her L.D. service.

RESEARCH/RESOLUTION: (What action did you take?):

24145

CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-9-98 **Time:** 5:50 **AM** (**PM**) **(Circle One)**

CSR Name: Sonya M.

Sales Channel: SNYDER **IF / OOF (Circle One)**

Customer Type: (Circle One)
- ~~Consumer – Long Distance Only~~
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- ~~Unauthorized Switch~~
- Promotion Discrepancy
- Billing Issue
- ~~Repair Problems~~
- Slammed
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- AFNI
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: _____
Customer Last Name: Mrs. Constantino
Customer Address: 15173 72ND DR N.
City: Palm Beach Gdns **State** FL **Zip** 33418-1982
Customer BTN: 561-575-2440 **Customer WTN (S):** _____
Social Security #: _____
If Available, Provide:
Birthdate: _____
Language: English
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: CUSTOMER REQUESTED CALLBACK YES / NO CUSTOMER THREATENING ESCALATION YES / NO

PROBLEM: (Please be very specific and describe thoroughly):
Cust wants to know how they got switched to GTEL

RESEARCH/RESOLUTION: (What action did you take?):

24146

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-9-98 **Time:** 5:30 **AM PM (Circle One)**

CSR Name: Sonya M

Sales Channel: SNYDER IF / OOF (Circle One)

Customer Type: (Circle One)
- Consumer – Long Distance Only
- ~~Small Business-Long Distance Only~~
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- ~~Rudeness~~
- Unauthorized Switch
- Promotion Discrepancy
- Billing Issue
- ~~Repair Problems~~
- ~~Slammed~~
- ~~Deceased Person~~
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- AFNI
- ~~BSC~~
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: [redacted] Robert
Customer Last Name: [redacted] Aveyard
Customer Address: 7693 Bristol Bay Ln
City: W. Palm Beach **State** FL **Zip** 33467
Customer BTN: 561-969-9060 **Customer WTN (S):** _____
Social Security #: NA
If Available, Provide:
Birthdate: _____
Language: _____
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: CUSTOMER REQUESTED CALLBACK YES / NO CUSTOMER THREATENING ESCALATION YES / NO

PROBLEM: (Please be very specific and describe thoroughly):
Cust wants to know who authorized switch

RESEARCH/RESOLUTION: (What action did you take?):

24147

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-9-98 **Time:** 5:28 **AM (PM)** (Circle One)

CSR Name: Sonya M

Sales Channel: SNYDER **IF / OOF (Circle One)**

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- (Unauthorized Switch)
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- (Slammed)
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Michelle
Customer Last Name: Ritter
Customer Address: 17630 NW 67th Av Apt. 1212
City: Miami **State** FL **Zip** 33015
Customer BTN: 305-826-9898 **Customer WTN (S):** _____
Social Security #: _____
If Available, Provide:
Birthdate: _____
Language: English
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION YES / NO

PROBLEM: (Please be very specific and describe thoroughly):
Cust wants to know who authorized switch

RESEARCH/RESOLUTION: (What action did you take?):

24148

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11/9/98 **Time:** 3:30 **AM (PM)** (Circle One)

CSR Name: Sonya Branden

Sales Channel: SNYDER **IF / (OOF)** (Circle One)

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- (Unauthorized Switch)
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- (Slammed)
- Deceased Person

Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Donald
Customer Last Name: Engle
Customer Address: 1121 N F St
City: Lake Worth **State** FL **Zip** 33460
Customer BTN: 561/588-7438 **Customer WTN (S):** 561/688-7438
Social Security #: [redacted] (is not correct)
If Available, Provide:
Birthdate:
Language: English
Market:
Product:
Pricing Plan(s): Talk To Asia

Please Circle: CUSTOMER REQUESTED CALLBACK (YES)/ NO CUSTOMER THREATENING ESCALATION (YES)/ NO

PROBLEM: **(Please be very specific and describe thoroughly):**
cust never authorized switch - says never talked to anyone

RESEARCH/RESOLUTION: (What action did you take?):

24149

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

98

TODAY'S DATE 11-9-98 TIME 3:37 AM ____ PM X

CSR NAME Deborah Fisher BADGE # 119172

CUSTOMER NAME Paul Wang BTN # (941) 649-4792

ADDRESS 2910 Regatta Rd APT # ____

CITY Naples STATE FL ZIP CODE 34103

IS RESPONSE NEEDED? (YES) NO PROJECT? ____

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Cust was switched w/o auth. TO GTE. D he called local office + local rep stated there was a comment that he had requested this change but he had never spoken to anyone. Cust. is very nice and would just like to know how he got changed. Thanks!

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1498 Ø
Snyder-TC, 240 min, Talk TO Asia 10/12 Eff 10/27

RETURN CALL TO CUSTOMER

COMMENTS

24150

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 11-08-98 **Time:** 8:56 **AM** (PM) **(Circle One)**

CSR Name: Veronica Riggs **Badge #:** _____

Customer Name: Miriam Calvo **BTN:** 813 920 0776

Address: 7632 Gardner Rd **Apt.#:** _____

City: Tampa **ST:** FL **ZIP:** 33625 **INF?** **OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu Switched without permission!

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

24151

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11/7/98 **Time:** 11:50 (AM) PM (Circle One)

CSR Name: Crystal C.

Sales Channel: SNYDER IF (OOF) (Circle One)

Customer Type: (Circle One)
(Consumer – Long Distance Only)
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)
Rudeness
Unauthorized Switch
Promotion Discrepancy
Billing Issue
Repair Problems
(Slammed)
Deceased Person
Pricing/Calling Plan Issue
Rate Discrepancy
Misunderstanding
Payment Not Received
Provisioning
Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
SITEL
AFNI-TUCSON
THORNTON
NIAGARA FALLS
ALPHARETTA
(AFNI)
PHONE MARTS
REPAIR
Other: _____

Customer First Name: Craig ~~Landeau~~
Customer Last Name: Landeau
Customer Address: 825 Egret Cir
City: Delray beach **State** FL **Zip** 33444
Customer BTN: 561-272-7516 **Customer WTN (S):** _____
Social Security #: _____
If Available, Provide:
Birthdate: _____
Language: English
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION (YES) / NO

PROBLEM: (Please be very specific and describe thoroughly);

Cust slammed, refuse to pay GTE, has a 300$ [redacted] bill. Cust claimed to disregard bill by another representative. Does not want to pay GTE

RESEARCH/RESOLUTION: (What action did you take?):

24152

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY) 06F

TODAY'S DATE 11-07-98 TIME 9:20 (AM) PM

CSR NAME Martha Lara BADGE# 87405

CUSTOMER NAME Susan Kruck BTN # 941 405 2818

ADDRESS 22643 Forestview APT #

CITY ~~OSTE~~ Estero ST FL ZIP 3392

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)
Cust was changed to GTE on 20th Oct. and she did not authorize this change and wants some one to contact her to see if they can credit those calls and make sure she does not receive another bill from us.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
1998 Ø

RETURN CALL TO CUSTOMER

BY WHOM _____ DATE _____ TIME _____

COMMENTS Snyder order 10/18 - 11/02 - TC - 360 - Don.

24153

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11/06/98 **Time:** 7:15 **AM (PM) (Circle One)**

CSR Name: Shelia Cramer

Sales Channel: SNYDER **IF (OOF) (Circle One)**

Customer Type: (Circle One)
(Consumer – Long Distance Only)
~~Small Business-Long Distance Only~~
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)

Rudeness	Pricing/Calling Plan Issue	Other Complaint Types:
(Unauthorized Switch)	Rate Discrepancy	
Promotion Discrepancy	Misunderstanding	
Billing Issue	Payment Not Received	
Repair Problems	Provisioning	
Slammed	Cursed Customer	
Deceased Person		

Customer Service Group: (Circle One)

SITEL	(AFNI)
AFNI-TUCSON	BSC
THORNTON	PHONE MARTS
NIAGARA FALLS	REPAIR
ALPHARETTA	Other:

Customer First Name: Francisco T
Customer Last Name: Tapia
Customer Address: 280 NW. 104 Ter
City: Miami **State** FL **Zip** 33168
Customer BTN: 305-754-7569 **Customer WTN (S):**
Social Security #:
If Available, Provide:
Birthdate:
Language:
Market:
Product:
Pricing Plan(s):

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION YES / NO

PROBLEM: (Please be very specific and describe thoroughly):

Cust's serv. switched w/o auth. offered to rerate, bill says wouldn't pay; Mrs. Tapia feels GTEL should pay charges and also address CC "Explained I was unable to do this & told her I would fill out complaint form. Also referred to Lec.

RESEARCH/RESOLUTION: (What action did you take?):
DIC = Active
ANI = Active

24154

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-06-98 **Time:** 9:21 (AM) PM (Circle One)

CSR Name: Dina F

Sales Channel: SNYDER IF / (OOF) (Circle One)

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- Unauthorized Switch
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- (Slammed)
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Lucette
Customer Last Name: Nelson
Customer Address: 3060 Holiday Spgs Blvd
City: Margate **State** FL **Zip** 33063
Customer BTN: 954-753-9415 **Customer WTN (S):** _____
Social Security #: _____
If Available, Provide;
Birthdate: _____
Language: English
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) NO CUSTOMER THREATENING ESCALATION YES / NO

PROBLEM: (Please be very specific and describe thoroughly):

Customer wants to know who switched her LD carrier to GTEL. She was activated on 9-16.

RESEARCH/RESOLUTION: (What action did you take?):

24155

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11/6/98 **Time:** 9:47 (AM) PM (Circle One)

CSR Name: Diane Burdett

Sales Channel: SNYDER IF / (OOF) (Circle One)

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- Unauthorized Switch
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- (Slammed)
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Joe
Customer Last Name: Kelly
Customer Address: 3924 Rose Of Sharon Dr
City: Orlando **State** FL **Zip** 32808-2739
Customer BTN: 407-299-9260 **Customer WTN (S):** 407-299-9260
Social Security #: —
If Available, Provide;
Birthdate:
Language: English
Market:
Product:
Pricing Plan(s):

24156

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION (YES) / NO

PROBLEM: (Please be very specific and describe thoroughly):
Customer switched to GTE LD without authorization
The order date was Aug- he It was active 8/12

RESEARCH/RESOLUTION: (What action did you take?):
Told about DTC form to fill how to cancel
Gave 5.00 credit on bill

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11/06/98 **Time:** 10:21 (AM) PM (Circle One)

CSR Name: Luis Henderson

Sales Channel: (SNYDER) IF (OOF) (Circle One)

Customer Type: (Circle One)
Consumer – Long Distance Only
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)
Rudeness
Unauthorized Switch
Promotion Discrepancy
Billing Issue
Repair Problems
Slammed
Deceased Person

Pricing/Calling Plan Issue
Rate Discrepancy
Misunderstanding
Payment Not Received
Provisioning
Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
SITEL
AFNI-TUCSON
THORNTON
NIAGARA FALLS
ALPHARETTA
(AFNI)
BSC
PHONE MARTS
REPAIR
Other: _____

Customer First Name: BARBARA
Customer Last Name: KORTE
Customer Address: 1141 S BLVD APT 201
City: Naco Island **State** Florida **Zip** 34145
Customer BTN: (941) 642-9209 **Customer WTN (S):** _____
Social Security #: [redacted]
If Available, Provide:
Birthdate: _____
Language: English
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION (YES) / NO

PROBLEM: (Please be very specific and describe thoroughly):

CST Rick call to VRFY calls the he make from he's line but he never — h change, he don't own line the name of the line is Barbara Korte, he refuse pay bill to he receive an explanation from GTEC.

RESEARCH/RESOLUTION: (What action did you take?):

24157

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 11-05-98 **Time:** 7:22 **AM (PM) (Circle One)**

CSR Name: James Jones **Badge #:** _____

Customer Name: Carl Block **BTN:** _____

Address: 2106 LaCosta Blvd **Apt.#:** _____

City: Daytona Beach **ST:** FL **ZIP:** 32119 **INF? OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

WAS ~~SUE~~ slammed by GTECD w/out Permission

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 11-05-98 **Time:** 7:22 **AM** (PM) **(Circle One)**

CSR Name: JAMES JAMES **Badge #:**

Customer Name: Carl Block **BTN:**

Address: 2106 LaCosta Blvd **Apt.#:**

City: Daytona Beach **ST:** FL **ZIP:** 32119 **INF? OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

WAS ~~Stan~~ slammed by GTECD w/out Permission

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-5-98 **Time:** 9:28 (AM) PM (Circle One)

CSR Name: Jeanette Lee

Sales Channel: SNYDER IF (OOF) (Circle One)

Customer Type: (Circle One)
(Consumer – Long Distance Only)
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)

		Other Complaint Types:
Rudeness	Pricing/Calling Plan Issue	
Unauthorized Switch	Rate Discrepancy	
Promotion Discrepancy	Misunderstanding	
Billing Issue	Payment Not Received	
~~Repair Problems~~	Provisioning	
(Slammed)	Cursed Customer	
Deceased Person		

Customer Service Group: (Circle One)

SITEL	(AFNI)
AFNI-TUCSON	BSC
THORNTON	PHONE MARTS
NIAGARA FALLS	REPAIR
ALPHARETTA	Other:

Customer First Name: Jesus
Customer Last Name: Sotolongo
Customer Address: 9119 SW 107th Ct
City: Miami **State** FL **Zip** 33196
Customer BTN: (305) 386-1777 **Customer WTN (S):**
Social Security #:
If Available, Provide:
Birthdate:
Language:
Market:
Product:
Pricing Plan(s):

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION YES / NO

PROBLEM: (Please be very specific and describe thoroughly):
Customer's service taken over; wants to know why, how, and by
CSR: (305) 669-2486

RESEARCH/RESOLUTION: (What action did you take?): 24160

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11/05/98 **Time:** 1256 **AM (PM)** (Circle One)

CSR Name: Jon Rowe

Sales Channel: SNYDER **IF (OOF)** (Circle One)

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- (Unauthorized Switch)
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- (Slammed)
- Deceased Person

Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- ~~BSC~~
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Jerry + DAWN
Customer Last Name: Long
Customer Address: 1349 Headwater Court
City: Orlando **State** FL **Zip** 32828
Customer BTN: 407 382 0069 **Customer WTN (S):** _____
Social Security #: _____
If Available, Provide:
Birthdate: _____
Language: _____
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: CUSTOMER REQUESTED CALLBACK YES / NO CUSTOMER THREATENING ESCALATION YES / NO

PROBLEM: (Please be very specific and describe thoroughly):
SLAMMED - WANTS TO KNOW WHO AND WHEN.

RESEARCH/RESOLUTION: (What action did you take?):

24161

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 11-5-98 TIME 3:16 AM _____ PM ✓

CSR NAME J Dis Pine BADGE # 88510

CUSTOMER NAME [redacted] BTN # 305 858 3019

ADDRESS 2463 SW 17TH ST APT # _____

CITY Miami STATE FL ZIP CODE 33145

IS RESPONSE NEEDED? ~~YES~~ NO PROJECT? LD Sprint

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer received a bill on 11-5-98 and realized she had been switched to GTE-LD without her authorization. She wants to know who authorized the said switch.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

I took a written complaint referred the customer to customer service as she requested

1998. - 0

Snyder-TC, 240 min, ICP II, ICC 10/20 EFF 11/06

RETURN CALL TO CUSTOMER

COMMENTS

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-04-98 **Time:** 3:00 **AM** (PM) **(Circle One)**

CSR Name: R. Williams

Sales Channel: (SNYDER) **IF** (OOF) **(Circle One)**

Customer Type: (Circle One)
(Consumer – Long Distance Only)
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)
Rudeness
Unauthorized Switch
Promotion Discrepancy
Billing Issue
Repair Problems
(Slammed)
Deceased Person

Pricing/Calling Plan Issue
Rate Discrepancy
Misunderstanding
Payment Not Received
Provisioning
Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
SITEL
AFNI-TUCSON
THORNTON
NIAGARA FALLS
ALPHARETTA

(AFNI)
BSC
PHONE MARTS
REPAIR
Other: _____

Customer First Name: DAVID
Customer Last Name: Evans
Customer Address: 3214 Edgecliffe DR
City: Orlando **State** FL **Zip** 32806
Customer BTN: 407-850-9057 **Customer WTN (S):** _____
Social Security #: NA
If Available, Provide:
Birthdate: NA
Language: English
Market: _____
Product: _____
Pricing Plan(s): 41871; 42244

24163

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO **CUSTOMER THREATENING ESCALATION** (YES) / NO

PROBLEM: **(Please be very specific and describe thoroughly):**

C.I. was switched without his permission, he wants to know who authorized the switch + why. He can be reached @ work @ 407-237-4899

RESEARCH/RESOLUTION: (What action did you take?):

~~CANCEL~~ Told him about PIC restriction and to call your local company.

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-4-98 **Time:** 6:08 **AM** (PM) **(Circle One)**

CSR Name: Sonya M.

Sales Channel: SNYDER **IF / OOF (Circle One)**

Customer Type: (Circle One)
(Consumer – Long Distance Only)
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)
(Rudeness)
(Unauthorized Switch)
Promotion Discrepancy
Billing Issue
Repair Problems
(Slammed)
Deceased Person

Pricing/Calling Plan Issue
Rate Discrepancy
Misunderstanding
Payment Not Received
Provisioning
Cursed Customer

Other Complaint Types:
_____
_____
_____
_____
_____

Customer Service Group: (Circle One)
SITEL
AFNI-TUCSON
THORNTON
NIAGARA FALLS
ALPHARETTA
(AFNI)
BSC
PHONE MARTS
REPAIR
Other: _____

Customer First Name: Andrea
Customer Last Name: Perez
Customer Address: 400 Louisiana Ave.
City: S.t. Cloud **State** FL **Zip** 34769
Customer BTN: 407-957-0278 **Customer WTN (S):** _____
Social Security #: N/A
If Available, Provide:
Birthdate: N/A
Language: English
Market: N/A
Product:
Pricing Plan(s):

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION YES / NO

PROBLEM: **(Please be very specific and describe thoroughly):**
Customer did not authorize switch and recieved a $238.00 bill. Wants to know who authorized this switch, she is very angry. Please call back w/in 7-10 days

RESEARCH/RESOLUTION: (What action did you take?): 24164

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-4-98 **Time:** 3:50 **AM (PM)** (Circle One)

CSR Name: Haron Doty

Sales Channel: SNYDER **IF / OOF (Circle One)**

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- Unauthorized Switch
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- (Slammed)
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Armando
Customer Last Name: Yanes
Customer Address: 2931 SW 16th St.
City: Miami **State** FL **Zip** 33145
Customer BTN: 305 461-9867 **Customer WTN (S):** _____
Social Security #: _____
If Available, Provide:
Birthdate: _____
Language: _____
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) NO CUSTOMER THREATENING ESCALATION YES / NO

PROBLEM: (Please be very specific and describe thoroughly):
CU Was Slammed to GTELD

RESEARCH/RESOLUTION: (What action did you take?):

24165

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 11/17/98 TIME 12:26 AM ____ PM ✓

CSR NAME Bonnie Garcia BADGE # 88628

CUSTOMER NAME Mrs. Miller, Frank BTN # (305)759-0518

ADDRESS 890 NE 100th St APT # ____

CITY Miami Shores STATE FL ZIP CODE 33138

IS RESPONSE NEEDED? (YES) / NO PROJECT? Cust. Serv.

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Rec'd welcome letter from GTE US dated 11/11/98. She & her husband auth. a change & they want to know how it was done.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Snyder-TC, 360 dom 11/09 EPF 11/24
1998 ✓

RETURN CALL TO CUSTOMER

COMMENTS

24166

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 11/17/98 TIME 2:46 AM (PM)

CSR NAME Bonnie Garcia BADGE # 88628

CUSTOMER NAME Hazel Arana BTN # (305)554-8002

ADDRESS _____ APT # _____

CITY _____ STATE _____ ZIP CODE _____

IS RESPONSE NEEDED? (YES) / NO PROJECT? Cust. Serv.

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Rec'd GTE's bill for $225.00 & never auth. GTE. She doesn't want to pay the bill, I told her that if we were in fault we would rerate her calls to her ATT rate. She would not give address.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

DNSS-N/D
1998 Ø

RETURN CALL TO CUSTOMER

COMMENTS

24167

DATE TURNED IN: _____ DATE COMPLETED:

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 11-16-98 TIME 10:00 (AM) PM _____

CSR NAME Jeannie Fallon BADGE # 119208

CUSTOMER NAME Sharon Ortiz BTN # 305-251-8538

ADDRESS 9115 SW 189th St APT # _____

CITY Miami STATE FL ZIP CODE 33157

IS RESPONSE NEEDED? YES (NO) PROJECT? _____

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

This customer was slammed by GTE, and is upset about that. They have switched back to MCI. Then one of our reps, Mr. Sanchez called her (11-16-98) to welcome them to GTE. He was very, very rude to the customer

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Snyder-TC, 240 min, ICP II 10/20 Eff 11/06
Name on order is Elena Rosales

1998 Ø

RETURN CALL TO CUSTOMER

COMMENTS

TE TURNED IN: _____ DATE COMPLETED: __

A

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 11/16/98 TIME 5:30 AM _____ PM ✓

CSR NAME Abby Salas BADGE # 142201

CUSTOMER NAME Jerome Jamison BTN # 2775812223

ADDRESS 330 Indian Rocks Rd APT # _____

CITY Belleair STATE FL ZIP CODE 33756

IS RESPONSE NEEDED? (YES) / NO PROJECT? _____

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

He wants to know why somebody switched him from AT&T to GTE without his permission.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

DMSS-N/O
1798

RETURN CALL TO CUSTOMER

)MMENTS

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11/23/98 **Time:** 9:15 (AM) PM (Circle One)

CSR Name: Kay Butler

Sales Channel: (SNYDER) IF / (OOF) (Circle One)

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- Unauthorized Switch
- Promotion Discrepancy
- Billing Issue
- ~~Repair Problems~~
- (Slammed)
- ~~Deceased Person~~
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Dezriel
Customer Last Name: Nadeau
Customer Address: 4901 Vilma Lane
City: West Palm Beach **State** FL **Zip** 33417
Customer BTN: 561 686 0581 **Customer WTN (S):** _____
Social Security #: [redacted]
If Available, Provide:
Birthdate: NA
Language: NA
Market: NA
Product: NA
Pricing Plan(s): NA

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION (YES) NO

PROBLEM: (Please be very specific and describe thoroughly):
It was slammed by Coteld wants to know how, ~~who~~ & why and who switched it.

RESEARCH/RESOLUTION: (What action did you take?):

24170

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11/16/98 **Time:** 5:18 **AM (PM)** (Circle One)

CSR Name: Diane Bridett

Sales Channel: ~~SNYDER~~ **IF / OOF (Circle One)**

Customer Type: (Circle One)
- ~~Consumer – Long Distance Only~~
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- Unauthorized Switch
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- ~~Slammed~~
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- ~~AFNI~~
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Manuel
Customer Last Name: Contreras
Customer Address: 13030 SW 82nd St
City: Miami **State** FL **Zip** 33183
Customer BTN: 305-382-8324 **Customer WTN (S):** 305-382-8324
Social Security #: —
If Available, Provide:
Birthdate:
Language: English
Market:
Product:
Pricing Plan(s): 42444, 41871

Please Circle: CUSTOMER REQUESTED CALLBACK YES / NO CUSTOMER THREATENING ESCALATION YES / NO

PROBLEM: (Please be very specific and describe thoroughly):
customer was switched to GTE LD without authorization the order date was 11/3

RESEARCH/RESOLUTION: (What action did you take?): 24171
told about pic restriction

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-16-98 **Time:** 7:58 **AM (PM)** (Circle One)

CSR Name: LISA CM

Sales Channel: (SNYDER) **IF (OOF)** (Circle One)

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- Unauthorized Switch
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- (Slammed)
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: TRACY [redacted]
Customer Last Name: VELEZ
Customer Address: 1480 SW 106TH TER
City: PLANTATION **State** FL **Zip** 33317
Customer BTN: 954-316-8818 **Customer WTN (S):** _____
Social Security #: [redacted]
If Available, Provide:
Birthdate: 08-01-68
Language: ENGLISH
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) NO CUSTOMER THREATENING ESCALATION (YES) / NO

PROBLEM: (Please be very specific and describe thoroughly):

WAS CALLED BY SNY & ASKED TO SWITCH, SAID NO
WAS SWITCHED ANYWAY - MAD!!!

RESEARCH/RESOLUTION: (What action did you take?):

24172

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-16-98 **Time:** 10:00 **AM** PM (Circle One)

CSR Name: Aaron Doty

Sales Channel: SNYDER IF / OOF (Circle One)

Customer Type: (Circle One)
- Consumer – Long Distance Only
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- Unauthorized Switch
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- Slammed
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- AFNI
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Mayra
Customer Last Name: Ordonez
Customer Address: 7624 Juniper St.
City: Hollywood **State** FL **Zip** 33023
Customer BTN: 954-986-8842 **Customer WTN (S):** _____
Social Security #: _____
If Available, Provide:
Birthdate: _____
Language: _____
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION (YES) / NO

PROBLEM: (Please be very specific and describe thoroughly):
CW was slammed to GTELD Refuses to pay Bill

RESEARCH/RESOLUTION: (What action did you take?):

24173

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-16-98 **Time:** 2:00 **AM** (PM) (Circle One)

CSR Name: ROZANNE CARLIN

Sales Channel: SNYDER IF (OOF (Circle One)

Customer Type: (Circle One)
(Consumer – Long Distance Only)
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)
Rudeness
(Unauthorized Switch)
Promotion Discrepancy
Billing Issue
Repair Problems
(Slammed)
Deceased Person
Pricing/Calling Plan Issue
Rate Discrepancy
Misunderstanding
Payment Not Received
Provisioning
Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
SITEL
AFNI-TUCSON
THORNTON
NIAGARA FALLS
ALPHARETTA
(AFNI)
BSC
PHONE MARTS
REPAIR
Other: _____

Customer First Name: NATALIE (WORK)
Customer Last Name: SHANARLO
Customer Address: 3101 NE 47th Ct
City: Ft LAUDERDALE **State** FL. **Zip** 33308
Customer BTN: 954-491-4312 **Customer WTN (S):**
Social Security #: Call After 5p.m At Her Home
If Available, Provide:
Birthdate: English (I know after!)
Language:
Market:
Product: 24174
Pricing Plan(s):

Case Circle: CUSTOMER REQUESTED CALLBACK (YES) NO CUSTOMER THREATENING ESCALATION (YES) NO

PROBLEM: (Please be very specific and describe thoroughly):
Cust Wants upset that she was slammed
Wants pen, they will fax she is sending
complaint letter Says to call
Atty General office

RESEARCH/RESOLUTION: (What action did you take?):

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 16NOV98 **Time:** 3:30 **AM (PM)** (Circle One)

CSR Name: Olga Lidia Bravo

Sales Channel: SNYDER IF (OOF) (Circle One)

Customer Type: (Circle One)
(Consumer – Long Distance Only)
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)
Rudeness
Unauthorized Switch
(Promotion Discrepancy)
Billing Issue
Repair Problems
(Slammed)
Deceased Person

Pricing/Calling Plan Issue
Rate Discrepancy
Misunderstanding
Payment Not Received
Provisioning
Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
SITEL
AFNI-TUCSON
THORNTON
NIAGARA FALLS
ALPHARETTA

(AFNI)
BSC
PHONE MARTS
REPAIR
Other: _____

Customer First Name: ANGEL
Customer Last Name: CABRERA
Customer Address: 11470 SW 83RD TERRACE
City: MIAMI **State** FL **Zip** 33173
Customer BTN: 305·598·1271 **Customer WTN (S):** _____
Social Security #: _____
If Available, Provide:
Birthdate: _____
Language: SPANISH
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION (YES) NO

PROBLEM: (Please be very specific and describe thoroughly):

OOF, CU WANTS AN ANSWER AND INFO WHO SWITCHED HIM, CLNS WILL DO A LAWYER AT GTE GET.

RESEARCH/RESOLUTION: (What action did you take?):

24175

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11/16/98 **Time:** 5:55 **AM (PM)** (Circle One)

CSR Name: Rodney Cummings

Sales Channel: (SNYDER) **IF (OOF (Circle One)**

Customer Type: (Circle One)
- ~~Consumer – Long Distance Only~~
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- Unauthorized Switch
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- (Slammed)
- ~~Deceased Person~~
- Pricing/Calling Plan Issue
- (Rate Discrepancy)
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- ~~AFNI-TUCSON~~
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Hanal
Customer Last Name: Kanai
Customer Address: 2800 Oakland Forest Drive
City: Oakland Park **State** Florida **Zip** 33309
Customer BTN: (954) 739-4999 **Customer WTN (S):** N/A
Social Security #: ~~?~~ [redacted] ?

If Available, Provide:
Birthdate: N/A
Language: English
Market: N/A
Product: N/A
Pricing Plan(s): N/A

24176

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) NO CUSTOMER THREATENING ESCALATION YES (NO)

PROBLEM: (Please be very specific and describe thoroughly):

Customer was slammed by GTE and charged outrageous rates for calls to Israel and Colombia. Customer was informed of the SSN#, and she did not recognize it. She demanded an investigation.

RESEARCH/RESOLUTION: (What action did you take?):

Credited the bill, cancelled the account in OMAR, and promised to fill out an investigation form. Customer wants to be called back re: resolution.

CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-16-98 **Time:** 11:39 (AM) PM (Circle One)

CSR Name: Sonya M.

Sales Channel: SNYDER IF / OOF (Circle One)

Customer Type: (Circle One)
- ~~Consumer – Long Distance Only~~
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- ~~Unauthorized Switch~~
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- ~~Slammed~~
- ~~Deceased Person~~
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- AFNI
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Carmen
Customer Last Name: Almanzar
Customer Address: 15766 NW 11th ST
City: Pembroke Pine **State** FL. **Zip** 33028
Customer BTN: 954-704-8831 **Customer WTN (S):** _____
Social Security #: _____
If Available, Provide: Work # 305-243-5267
Birthdate: _____
Language: _____
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: CUSTOMER REQUESTED CALLBACK YES / NO CUSTOMER THREATENING ESCALATION YES / NO

PROBLEM: (Please be very specific and describe thoroughly):

Customer wants to know who changed her L.D. she will cc the FCC and have it investigated.

RESEARCH/RESOLUTION: (What action did you take?):

24177

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11/14/98 **Time:** 11:15 **(AM) PM (Circle One)**

CSR Name: Barnes Field

Sales Channel: SNYDER **IF / OOF (Circle One)**

Customer Type: (Circle One)
- (Consumer) – Long Distance Only
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- (Unauthorized Switch)
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- (Slammed)
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types
_____
_____
_____
_____
_____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Laura Drake Laura
Customer Last Name: Drake
Customer Address: 5748 Stone Pointe Dr
City: Sarasota **State** FL **Zip** 34233
Customer BTN: 941-927-1316 **Customer WTN (S):** (941) 927-1316
Social Security #: _____
If Available, Provide:
Birthdate: _____
Language: _____
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: CUSTOMER REQUESTED CALLBACK YES / NO CUSTOMER THREATENING ESCALATION YES / NO

PROBLEM: (Please be very specific and describe thoroughly):

_____
_____
_____

RESEARCH/RESOLUTION: (What action did you take?):

_____
_____

24178

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: Nov 14 1998 **Time:** 9:05 AM (AM) PM (Circle One)

CSR Name: Cheryl Emmons

Sales Channel: SNYDER IF / OOF (Circle One)

Customer Type: (Circle One)
(Consumer – Long Distance Only)
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)

Rudeness	Pricing/Calling Plan Issue	Other Complaint Typ
(Unauthorized Switch)	Rate Discrepancy	
Promotion Discrepancy	Misunderstanding	
Billing Issue	Payment Not Received	
Repair Problems	Provisioning	
(Slammed)	Cursed Customer	
Deceased Person		

Customer Service Group: (Circle One)

SITEL	(AFNI)
AFNI-TUCSON	BSC
THORNTON	PHONE MARTS
NIAGARA FALLS	REPAIR
ALPHARETTA	Other:

Customer First Name: Terry
Customer Last Name: Lecount
Customer Address: 3 Southern Cross Ln Apt 203 Bld 3
City: Boynton Bc **State** FL **Zip** 33436
Customer BTN: 561-369-8951 **Customer WTN (S):** 561-369-8951
Social Security #: N/A
If Available, Provide:
Birthdate:
Language:
Market:
Product:
Pricing Plan(s):

24179

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) NO CUSTOMER THREATENING ESCALATION (YES)

PROBLEM: (Please be very specific and describe thoroughly):

Cli Was Switched w/o knowledge. Very angry! No Dick Wife and no time to deal w/ this type of problem

RESEARCH/RESOLUTION: (What action did you take?):

Explained how to get this other carrier back, rerate all calls when bill was received, ~~pay~~ credit Switching fees. And informed of pic restrict.

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-13-98 **Time:** 8:26 (AM) PM (Circle One)

CSR Name: Deina F

Sales Channel: SNYDER (IF) / OOF (Circle One)

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- Unauthorized Switch
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- (Slammed)
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Patricia
Customer Last Name: Quick
Customer Address: 4502 3rd Av NW
City: Bradenton **State** FL **Zip** 34205
Customer BTN: 941-741-2525 **Customer WTN (S):** _____
Social Security #: _____
If Available, Provide:
Birthdate: _____
Language: English
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) NO CUSTOMER THREATENING ESCALATION YES / NO

PROBLEM: (Please be very specific and describe thoroughly):

Customer was slammed, wants to know who authorized the order.

RESEARCH/RESOLUTION: (What action did you take?):

24180

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 11/13/98 TIME 4:59 AM PM ✓

CSR NAME Abby SaDap BADGE # 140201

CUSTOMER NAME Dan Stebbens BTN # 941-695-4870

ADDRESS 1 Flamingo Lodge Hwy APT #

CITY Flamingo ST FL ZIP 33034

PLEASE CIRCLE RESPONSE: NEEDED NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)

Customer was switched from AT&T to GTE on Oct. 12 or 13th without his permission. He is very upset about it and he wants someone to call him back about this matter.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)

Snyder- TC 360 dom 10/07 cancelled- no reason 1998 D

RETURN CALL TO CUSTOMER

BY WHOM _____ DATE _____ TIME _____

COMMENTS _____

24181

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 11/13/98 TIME 6:30 AM / PM (PM)

CSR NAME Josie SERNA BADGE #

CUSTOMER NAME Patricia Hernandez BTN # 9419570 60

ADDRESS 230 N BRINIS AVE APT #

CITY SARASOTA ST FL ZIP 3423-

PLEASE CIRCLE RESPONSE: NEEDED NOT NEEDED (NOT NEEDED)

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)

Customer was switched without her permission

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)

Snyder-TC 360 dom 1922 EFF 10/29 1998

RETURN CALL TO CUSTOMER

BY WHOM _____ DATE _____ TIME _____

COMMENTS _____

24182

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 12NOV98 **Time:** 1:10 **AM** (PM) **(Circle One)**

CSR Name: Olga Bravo

Sales Channel: SNYDER **IF** (OOF) **(Circle One)**

Customer Type: (Circle One)
(Consumer – Long Distance Only)
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)
Rudeness
(Unauthorized Switch)
Promotion Discrepancy
Billing Issue
Repair Problems
(Slammed)
Deceased Person

Pricing/Calling Plan Issue
Rate Discrepancy
Misunderstanding
Payment Not Received
Provisioning
Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
SITEL
AFNI-TUCSON
THORNTON
NIAGARA FALLS
ALPHARETTA
(AFNI)
BSC
PHONE MARTS
REPAIR
Other: _____

Customer First Name: LUIS
Customer Last Name: RAMIREZ
Customer Address: 2403 ELEVELAND ST.
City: HOLLYWOOD **State** FL **Zip** 33020
Customer BTN: 954 925 4852 **Customer WTN (S):** _____
Social Security #: _____
If Available, Provide:
Birthdate: _____
Language: SPANISH
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) NO CUSTOMER THREATENING ESCALATION YES/NO

PROBLEM: **(Please be very specific and describe thoroughly):**

OFD, CU CLMS THAT NEVER AUTH GTE'D, CLMS THAT AT A SUPERMARKET REP PASSED HIMSELF OFF AS AN AT&T REP, CU IS AN AT&T ~~REP~~ CU, IN THAT CASE I AVE INFO TO CONFIRM I'D, CU NEVER SIGNED LETTER OR CONFIRMATION IT WAS SWITCHED TO GTE'D WITHOUT AUTHORIZATION. CU WANTS A COPY OF OR

RESEARCH/RESOLUTION: (What action did you take?): A CALL BACK FROM SOMEONE UPWARD IN GTE'D

24183

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE Nov. 12, 98 TIME 8:58 (AM) PM _____

CSR NAME Vickie GOTSCHALL BADGE # 87083

CUSTOMER NAME Elizabeth Mrachek BTN # 561-586-3937

ADDRESS _____ APT # _____

CITY _____ STATE _____ ZIP CODE _____

IS RESPONSE NEEDED? (YES) / NO ASAP PROJECT? GTE LD (slammed)

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer recorded our entire conversation to prepare for legal action for being slammed w/out her or her husbands consent.

Demands research done as to who placed order + sent to her in writing.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1998- d

Snyder- TC. 3600dom 9/29 eff 10/14

RETURN CALL TO CUSTOMER

COMMENTS

CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

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(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-12 **Time:** 5:11 **AM** (PM) **(Circle One)**

CSR Name: KWood

Sales Channel: (SNYDER) **IF / OOF (Circle One)**

Customer Type: (Circle One)
(Consumer – Long Distance Only)
~~Small Business-Long Distance Only~~
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)
~~Rudeness~~
(Unauthorized Switch)
~~Promotion Discrepancy~~
~~Billing Issue~~
~~Repair Problems~~
(Slammed)
~~Deceased Person~~

Pricing/Calling Plan Issue
Rate Discrepancy
Misunderstanding
Payment Not Received
Provisioning
Cursed Customer

Other Complaint Type
_____
_____
_____
_____
_____

Customer Service Group: (Circle One)
SITEL
AFNI-TUCSON
THORNTON
NIAGARA FALLS
ALPHARETTA
(AFNI)
BSC
PHONE MARTS
REPAIR
Other: _____

Customer First Name: NERY
Customer Last Name: VALDES
Customer Address: 3866 PARK LN
City: W PALM BEACH **State** FL **Zip** 33406
Customer BTN: 561-434-2766 **Customer WTN (S):** _____
Social Security #: _____
If Available, Provide:
Birthdate: _____
Language: _____
Market: _____
Product: _____
Pricing Plan(s): _____

24185

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION (YES) / N

PROBLEM: (Please be very specific and describe thoroughly):
cx did not talk to anyone – cx does want phone call to make sure about letter, would like to talk to person who wrote order for change

RESEARCH/RESOLUTION: (What action did you take?):

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11/12/98 **Time:** 2:00 **AM** (PM) (Circle One)

CSR Name: Kay Butler

Sales Channel: (SNYDER) **IF /** (OOF) (Circle One)

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- Unauthorized Switch
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- (Slammed)
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Eugene
Customer Last Name: Richmond
Customer Address: 6213 San Michel Way
City: Delray Beach **State** FL **Zip** 33484
Customer BTN: 561 498 9237 **Customer WTN (S):** _____
Social Security #: NA

If Available, Provide:
Birthdate: NA
Language: NA
Market: NA
Product: NA
Pricing Plan(s): NA

Please Circle: CUSTOMER REQUESTED CALLBACK YES / NO CUSTOMER THREATENING ESCALATION YES / NO

PROBLEM: (Please be very specific and describe thoroughly):
Cust was slammed by Bteld. Wants to know who placed order. Callback at 401 785 2860

RESEARCH/RESOLUTION: (What action did you take?):

24186

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-20-98 **Time:** 10:49 (AM) PM (Circle One)

CSR Name: ROZANNE CARLIN

Sales Channel: SNYDER IF OOF (Circle One)

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- (Unauthorized Switch)
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- (Slammed)
- Deceased Person

Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- (AFNI)
- AFNI-TUCSON
- BSC
- THORNTON
- PHONE MARTS
- NIAGARA FALLS
- REPAIR
- ALPHARETTA
- Other: _____

Customer First Name: JEAN CLAUDE
Customer Last Name: Eugene
Customer Address: 1525 NW 12th Ave
City: Fort Lauderdale **State** FL **Zip** 33311-5
Customer BTN: 954-764-2334 **Customer WTN (S):** 954-764-2334
Social Security #:
If Available, Provide:
Birthdate:
Language: English
Market:
Product:
Pricing Plan(s):

24187

Please Circle: CUSTOMER REQUESTED CALLBACK YES / NO CUSTOMER THREATENING ESCALATION YES / NO

PROBLEM: (Please be very specific and describe thoroughly):

Cust Very upset - about Switch -
- had Big Bill from GTE - got disconnected for Non-Payment Because of the Switch

RESEARCH/RESOLUTION: (What action did you take?)

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FORM-SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4944

Today's Date: 11-20-98 **Time:** 12:20 **AM** **PM** **(Circle One)**

CSR Name: IARA S

Sales Channel: SNYDER IF/QOE (Circle One)

Customer Type: (Circle One)
- Consumer – Long Distance Only
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- Unauthorized Switch
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- Slammed
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- WENTZVILLE
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- AFNI
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Richard
Customer Last Name: Brock
Customer Address: 3810 Coral Ave.
City: Lake Worth **State** FL **Zip** 33461
Customer BTN: 561-642-1293 **Customer WTN (S):** 561-642-1293
Social Security #:
Birthdate:
Language:
Market;
Product:
Pricing Plan(s):

Please Circle: ESCALATION-YES ESCALATION-NO CALLBACK NEEDED-YES CALLBACK NEEDED-NO

PROBLEM: **(Please be very specific and describe thoroughly):**

Cu request call back explaining who switched her LD without permission this is her second complaint form please call back.

RESEARCH/RESOLUTION: (What action did you take?):

24188

E TURNED IN: 11-20-98 DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 11-20-98 TIME 7:26 AM _____ PM ✓

CSR NAME Dannie Avila BADGE # 119848

CUSTOMER NAME Manuel Contreras BTN # 305 382 8324

ADDRESS 13030 SW 82nd APT # _____

CITY Miami STATE Fl ZIP CODE 33183

IS RESPONSE NEEDED? (YES) / NO PROJECT? LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Oct 22, 1998 customer was slammed to GTE. He was very upset and wishes to get a response from us.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

DNISS was down this night.
1988 O
Snyder - TC360dom 11/09 Eff 11/24

RETURN CALL TO CUSTOMER

OMMENTS

FORM-SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4944

Today's Date: 11-19-98 **Time:** 8:30 **(AM) PM (Circle One)**

CSR Name: Veronica Riggs

Sales Channel: (SNYDER) **IF/OOF (Circle One)**

Customer Type: (Circle One)
(Consumer – Long Distance Only)
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)
Rudeness
Unauthorized Switch
Promotion Discrepancy
Billing Issue
Repair Problems
(Slammed)
Deceased Person
Pricing/Calling Plan Issue
Rate Discrepancy
Misunderstanding
Payment Not Received
Provisioning
Cursed Customer
Other Complaint Types: _____

Customer Service Group: (Circle One)
SITEL
WENTZVILLE
THORNTON
NIAGARA FALLS
ALPHARETTA
(AENI)
BSC
PHONE MARTS
REPAIR
Other: _____

Customer First Name: Shirley
Customer Last Name: Brumer
Customer Address: 920 Ocean Dr Apt 18C
City: Hallandale **State** FL **Zip** 33009
Customer BTN: 954-454-2399 **Customer WTN (S):** 954-454-2399
Social Security #: VA
Birthdate:
Language:
Market:
Product:
Pricing Plan(s):

Please Circle: (ESCALATION-YES) ESCALATION-NO (CALLBACK NEEDED-YES) CALLBACK NEEDED-NO

PROBLEM: **(Please be very specific and describe thoroughly):**
Cx was switched to CTE while she was on vacation! Wants any and all info on switch. Would like to know authorizing ty

RESEARCH/RESOLUTION: (What action did you take?):
Cancelled service

24190

FORM-SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4944

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Today's Date: 11-19-98 **Time:** 9:16 **AM** PM (Circle One)

CSR Name: Veronica Riggs

Sales Channel: (SNYDER) IF/~~GOP~~ (Circle One)

Customer Type: (Circle One)
- ~~Consumer – Long Distance Only~~
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- Unauthorized Switch
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- (Slammed)
- ~~Deceased Person~~
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer
- Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- WENTZVILLE
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- ~~BSC~~
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Alberto
Customer Last Name: Lauria
Customer Address: 1280 S Powerline
City: Pompano Beach **State** FL **Zip** 33069
Customer BTN: 954-973-2161 **Customer WTN (S):** 954-973-2161
Social Security #: N/A
Birthdate:
Language:
Market:
Product:
Pricing Plan(s):

Please Circle: ESCALATION-(YES) ESCALATION-NO CALLBACK NEEDED-(YES) CALLBACK NEEDED-NO

PROBLEM: **(Please be very specific and describe thoroughly):**
Cx switched without permission. Demands to know authorizing party

RESEARCH/RESOLUTION: (What action did you take?):
Cancelled service

24191

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11/19/98 **Time:** ~~[illegible]~~ 2:40 **AM (PM) (Circle One)**

CSR Name: Kay Butler

Sales Channel: (SNYDER) **IF / OOF (Circle One)**

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- Unauthorized Switch
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- (Slammed)
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Victor
Customer Last Name: Lubin
Customer Address: 950 NE 199th St.
City: Miami **State** FL **Zip** 33179
Customer BTN: 3056524081 **Customer WTN (S):** _____
Social Security #: NA
If Available, Provide:
Birthdate: NA
Language: NA
Market: NA
Product: NA
Pricing Plan(s): NA

Please Circle: CUSTOMER REQUESTED CALLBACK YES / NO CUSTOMER THREATENING ESCALATION YES / NO

PROBLEM: (Please be very specific and describe thoroughly):
Cust. want to know how he was switched
and who placed order

RESEARCH/RESOLUTION: (What action did you take?):
complaint form

24192

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 11/19/98 TIME 7:15 AM__ PM X

CSR NAME Dael Lindsay BADGE # 87782

CUSTOMER NAME Ysam Drica BTN # 305-598-8730

ADDRESS 8325 SW 103rd St APT #_____

CITY Miami ST FL ZIP 33156

HD PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)
customer had MCI. Received bill from GTECD for 2608 and Thank you note in the name of ex-husband at her address. She admits to use calls but will withhold payment until situation cleared up.

filled out do not call form.

When responding to her supply address to remove from mailing lists.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
1998 - P - DMSS - N/D

RETURN CALL TO CUSTOMER

BY WHOM _____ DATE _____ TIME _____

COMMENTS _____

24193

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 11/19/98 TIME 7:15 AM (PM)

CSR NAME Josie Serna BADGE # 12001J

CUSTOMER NAME Javier Andres Chavez BTN # 305-235576

ADDRESS 13967 SW 161 TRR APT #

CITY MIAMI ST FL ZIP 33177

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)

Customer was switched to GTE without his permission

Customer needs proof of when he agreed to have service with GTE.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)

1998-E-DMSS N/O

RETURN CALL TO CUSTOMER

BY WHOM _____ DATE _____ TIME _____

COMMENTS _____

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 11-1998 TIME _____ AM _____ PM 3:10

CSR NAME Kim Boulter BADGE # 119388

CUSTOMER NAME Geneva Evans BTN # 305-233-4862 (3?)

ADDRESS _____ APT # _____

CITY _____ STATE _____ ZIP CODE _____

IS RESPONSE NEEDED? (YES) NO (005) PROJECT? LA

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

She was changed without authorization to GTE. She wants either the recording where ~~she~~ they say she agreed to change or th she wants to see the paper she "supposedly" signed. She wants to know why she was changed!

After 5:00 CBR-305-235-0921

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1998- Ø - OMSS - N/O

RETURN CALL TO CUSTOMER

COMMENTS

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11/18/98 **Time:** 9:42 (AM) PM (Circle One)

CSR Name: Diane Burdeth

Sales Channel: SNYDER IF (OOF) (Circle One)

Customer Type: (Circle One)
- ~~Consumer – Long Distance Only~~
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)

Rudeness	Pricing/Calling Plan Issue	Other Complaint Types:
Unauthorized Switch	Rate Discrepancy	
Promotion Discrepancy	Misunderstanding	
Billing Issue	Payment Not Received	
Repair Problems	Provisioning	
Slammed	Cursed Customer	
~~Deceased Person~~		

Customer Service Group: (Circle One)

SITEL	~~AFNI~~
AFNI-TUCSON	BSC
THORNTON	PHONE MARTS
NIAGARA FALLS	REPAIR
ALPHARETTA	Other:

Customer First Name: Eduardo
Customer Last Name: Scuderi
Customer Address: 2928 Fairgreen dr.
City: Miami **State** FL **Zip** 33140
Customer BTN: (305) 534-8286 **Customer WTN (S):** (305) 534-8286
Social Security #:
If Available, Provide:
Birthdate:
Language: English
Market:
Product:
Pricing Plan(s):

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) NO CUSTOMER THREATENING ESCALATION (YES) NO

PROBLEM: (Please be very specific and describe thoroughly):
The customer's order date was 9/23 it was a five 9/28 – did not authorize

24196

RESEARCH/RESOLUTION: (What action did you take?):
told I could rerate bill to MCI rates

FORM-SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4944

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Exhibit REP-18
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Today's Date: 11/18 **Time:** 4:30p M. **AM (PM) (Circle One)**

CSR Name: Andrea Prang

Sales Channel: SNYDER **IF/OOF (Circle One)**

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- Unauthorized Switch
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- (Slammed)
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- WENTZVILLE
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Lourdes
Customer Last Name: Beltran
Customer Address: 5513 SW 89th Ave
City: Cooper City **State** FL **Zip** 33328
Customer BTN: 954-434-7263 **Customer WTN (S):** _____
Social Security #: _____
Birthdate: _____
Language: _____
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: (ESCALATION-YES) ESCALATION-NO (CALLBACK NEEDED-YES) CALLBACK NEEDED-NO

PROBLEM: (Please be very specific and describe thoroughly):
wants to know who slammed her, please call back.

RESEARCH/RESOLUTION: (What action did you take?):

24197

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-18-98 **Time:** 3:30 (AM) PM (Circle One)

CSR Name: Veronica Riggs

Sales Channel: (SNYDER) IF / GOF (Circle One)

Customer Type: (Circle One)
- ~~Consumer – Long Distance Only~~
- ~~Small Business-Long Distance Only~~
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)

Rudeness	Pricing/Calling Plan Issue	Other Complaint Types:
Unauthorized Switch	Rate Discrepancy	
Promotion Discrepancy	Misunderstanding	
Billing Issue	Payment Not Received	
Repair Problems	Provisioning	
~~Slammed~~	Cursed Customer	
Deceased Person		

Customer Service Group: (Circle One)

SITEL	~~AFNI~~
AFNI-TUCSON	BSC
THORNTON	PHONE MARTS
NIAGARA FALLS	REPAIR
ALPHARETTA	Other:

Customer First Name: Martha
Customer Last Name: Regis
Customer Address: 4416 NW 119th St
City: Miami **State** FL **Zip** 33168
Customer BTN: 305-681-7112 **Customer WTN (S):** 305-681-7112
Social Security #: N/A
If Available, Provide:
Birthdate:
Language:
Market:
Product:
Pricing Plan(s):

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) NO CUSTOMER THREATENING ESCALATION (YES) NO

PROBLEM: (Please be very specific and describe thoroughly):
Miss Regis had her attorney advise us that she did not order the service. Please contact Diane Feinburg at 305-358-3580

RESEARCH/RESOLUTION: (What action did you take?):
Cancelled Service

24198

CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

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(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-17 **Time:** 12:50 **AM (PM)** (Circle One)

CSR Name: KWood

Sales Channel: (SNYDER) **IF (OOE)** (Circle One)

Customer Type: (Circle One)
(Consumer – Long Distance Only)
~~Small Business-Long Distance Only~~
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)

Rudeness	Pricing/Calling Plan Issue	Other Complaint Types
(Unauthorized Switch)	Rate Discrepancy	
Promotion Discrepancy	Misunderstanding	
Billing Issue	Payment Not Received	
Repair Problems	Provisioning	
(Slammed)	Cursed Customer	
Deceased Person		

Customer Service Group: (Circle One)

SITEL	(AFNI)
AFNI-TUCSON	BSC
THORNTON	PHONE MARTS
NIAGARA FALLS	REPAIR
ALPHARETTA	Other:

Customer First Name: Joseph
Customer Last Name: Frappollo
Customer Address: 3725 NE 169th, Apt B-306
City: Miami **State** FL **Zip** 33160
Customer BTN: **Customer WTN (S):**
Social Security #:
If Available, Provide:
Birthdate:
Language:
Market:
Product:
Pricing Plan(s):

Please Circle: CUSTOMER REQUESTED CALLBACK YES (NO) CUSTOMER THREATENING ESCALATION YES / NO

PROBLEM: (Please be very specific and describe thoroughly):
did nt give OK for change

RESEARCH/RESOLUTION: (What action did you take?):

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 3-16-98 TIME 9:53 AM ___ PM ✓

CSR NAME Shawn Moser BADGE # 119482

CUSTOMER NAME Fernando Valverde BTN # 3056735048

ADDRESS 1770 Meridian Ave. APT # 212

CITY Miami Beach ST FL ZIP 33139

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)
Customer was changed to GTE without his permission. He wants us to do some research and see who ~~called him and take~~ placed the order and take appropriate action

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
DMSS- TC w/ 360 Interm ins & ICP 1/27 SAIY

RETURN CALL TO CUSTOMER

BY WHOM ___ DATE ___ TIME ___

COMMENTS ___

24200

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 3/12/98 TIME 9:48 AM ✓ PM ___

CSR NAME Norma Rodriguez BADGE # 119417

CUSTOMER NAME William Padron BTN # 305-476-5089

ADDRESS 198 N.W. 46th Ave APT # ___

CITY Miami ST Fl. ZIP 33126

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)

Customer has been slammed by GTE long distance twice and he wants to know who authorized the switch

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)

DMSS- TCul 3eD Inter mins & ICP 1/27 SN14

RETURN CALL TO CUSTOMER

BY WHOM ___ DATE ___ TIME ___

COMMENTS ___

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 2-26-98 TIME 6:30 AM ✓ PM ___

CSR NAME Edith Thomas BADGE # 11951

CUSTOMER NAME Mrs. John Hoppy BTN # 407-886-8342

ADDRESS 14469 Margarete Crescent Dr APT # ___

CITY ~~Crescent~~ Apopka ST FL ZIP 32703-4

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)
Tape # 823-520-622 Customer Service. (DOE) States she received a letter changing her long distance to G.T.E. States she never heard of G.T.E. and she did not want G.T.E. was assigned by John Havens Vice President. I apologized to Customer and informed she needed to contact her local company to select the carrier of her choice — Very upset. Attempted to give 700# & she refused.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
DMSS-TCW1 360 mins 9104 SN14

RETURN CALL TO CUSTOMER

BY WHOM ___ DATE ___ TIME ___

COMMENTS ___

24202

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 3-12-98 TIME 7:55 AM (PM)

CSR NAME W. Burton BADGE # 87136

CUSTOMER NAME Dewitt Shirley BTN # 954-739-0434

ADDRESS 1754 NW 39th ST APT #

CITY Ft Lauderdale ST FL ZIP 33309

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)
Customer received a LTR thanking them for changing To GTEL D. Customer did NOT request To change and have NOT been called by anyone about their long Distance

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
No occurrences in 1998 DMSS file; No occurrences in 1997 DMSS file
DMSS-TCW1310D mins 3101 SMY

RETURN CALL TO CUSTOMER

BY WHOM DATE TIME

COMMENTS

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 3-17-98 TIME 2:00 AM (PM)

CSR NAME W. Burton BADGE # 87136

CUSTOMER NAME Mardi Jarson BTN # 954-894-7917

ADDRESS 6940 SW 36th CT APT #

CITY Miramar ST FL ZIP 33023

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)
Customer received a welcom letter. Customer did not request nor want their long distance carrier changed. Please advise customer of outcome of investigation.

Re

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
OMSS-TCW/10000 mins 2/27 SNY

RETURN CALL TO CUSTOMER

BY WHOM DATE TIME

COMMENTS

24204

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

CSC #117

TODAY'S DATE 4-6-98 TIME 3:40 AM ___ PM ✓

CSR NAME Henry DeLaRosa BADGE # 120818

CUSTOMER NAME Mary E. Byars BTN # 305-940-7036

ADDRESS 1621 S NE 18th Court [redacted] APT # 205

CITY N. Miami Beach ST FL ZIP 33162

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)
Mrs Byars, March 12 she was switched to GTE without her permission. She is upset and wants to know how she got switched.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
DMSS-ICP, TCW 3600 Inter Mins a/a SNY

RETURN CALL TO CUSTOMER

BY WHOM ___ DATE ___ TIME ___

COMMENTS ___

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CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

4 of 4

TODAY'S DATE 4-3-98 TIME 7:15 AM PM

CSR NAME Andrea T. Myers BADGE # 120332

CUSTOMER NAME Charlie Morrison BTN # (305) 623-5476

ADDRESS 3730 NW 207 TERRANCE APT #

CITY Opalocka ST FL ZIP 33055

PLEASE CIRCLE RESPONSE: NEEDED NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)

Mrs Morrison was switched to ~~AT&T~~ GTE by someone? She's very upset! She states she's never spoken to anyone concerning this switch. She formerly had AT&T. Mrs Morrison would like to know who authorized this switch!

Please call her Back at Number Ab

DIRECT SALES? CC TRUMP SLAMMER

X.C.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
dmoo - TC w/ 3 to 8 mins 3117 SNY

RETURN CALL TO CUSTOMER 3

BY WHOM DATE TIME

COMMENTS

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

SNW

TODAY'S DATE 4-2-98 TIME 11:20 AM X PM ___

CSR NAME Carol Butts BADGE # 119972

CUSTOMER NAME Roger Welch BTN # 813-752-6730

ADDRESS 3005 Wiggins Rd South APT # ___

CITY Plant City ST FL ZIP 33566

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)

On March 25, 1998 Cust was changed without his authorization. Local orders have placed Dyden eff = 4/3/98, to change back to AT&T. C0508463F932

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)

OMSS- TC w/ 1000 mins 3/23 SNW

7

RETURN CALL TO CUSTOMER

BY WHOM ___ DATE ___ TIME ___

COMMENTS ___

24207

CUSTOMER COMPLAINT FORM-SYNDER
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE: 3/11 **TIME:**_____ **AM PM (Circle One)**

CSR NAME: LINDA

CUSTOMER NAME: AGUEDA GOMEZ **BTN:** 305 643-1499

ADDRESS: 1403 NW 7 ST 703 **APT#**_____

CITY: MIAMI **ST:** FL **ZIP** 33125 **INF?** **OOF?** **(Circle one)**

PROBLEM: (Please be very specific and describe thoroughly.)

Did not authorize GTE $30.00

RESEARCH: (For customer service use only.)

MAR-11-1998 21:33 IN CONTACT 314 332 7835 P.15

CUSTOMER COMPLAINT FORM-SYNDER
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE: 3-11-98 **TIME:** _____ **AM** **PM** **(Circle One)**

CSR NAME: Joyce Bromley

CUSTOMER NAME: Elizabeth Carrillo **BTN:** (305) 383-5859

ADDRESS: 16941 SW 155 Ave **APT#** _____

CITY: Miami **ST:** FL **ZIP** 33193 **INF?** **(OOF?)** **(Circle one)**

PROBLEM: (Please be very specific and describe thoroughly.)

DID NOT AUTHORIZE GTE $30 CC

RESEARCH: (For customer service use only.)

24209

MAR-11-1998 21:31 IN CONTACT 314 332 7835 P.12

CUSTOMER COMPLAINT FORM-SYNDER
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE: 3/12/98 **TIME:**_____ **AM PM (Circle One)**

CSR NAME: Nancy

CUSTOMER NAME: Edward Kubura **BTN:** 954-968-1679

ADDRESS: 3050 Palm Air Dr N **APT#** Unit 709

CITY: Pompano **ST:** FL **ZIP** 33069 **INF?** **OOF?** **(Circle one)**

PROBLEM: (Please be very specific and describe thoroughly.) #30.00 card

Did not authorize GTE

RESEARCH: (For customer service use only.)

24210

CUSTOMER COMPLAINT FORM-SYNDER
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE: 3/12/98 **TIME:**_____ **AM PM (Circle One)**

CSR NAME: Nancy

CUSTOMER NAME: Joseph Blemy **BTN:** 305-573-6829

ADDRESS: 28 NE 41 St **APT#**_____

CITY: Miami **ST:** FL **ZIP** 33167 **INF?** **OOF?** **(Circle one)**

PROBLEM: (Please be very specific and describe thoroughly.)

Did not authorize GTE $30.00 Card

RESEARCH: (For customer service use only.)

24211

CUSTOMER COMPLAINT FORM-SYNDER
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE: 3-12-98 **TIME:** _____ **AM PM (Circle One)**

CSR NAME: Joyce Bromley

CUSTOMER NAME: Cindre Jean Jacques **BTN:** (305) 691-4291

ADDRESS: 1100 NW 106 St **APT#** _____

CITY: Miami **ST:** FL **ZIP** 33150 **INF?** **OOF?** **(Circle one)**

PROBLEM: (Please be very specific and describe thoroughly.)

DID NOT AUTHORIZE GTE #30 CC

RESEARCH: (For customer service use only.)

24212

MAR-12-1998 20:19 IN CONTACT 314 332 7835 P.03

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

SNY

TODAY'S DATE 4-2-98 TIME 11 05 AM X PM ___

CSR NAME Carol Butts BADGE # 119972

CUSTOMER NAME CONRAD Wertheim BTN # 954-971-0925

ADDRESS 4970 Sabal Palm BL APT # ___

CITY Tamarac ST F ZIP 33319

PLEASE CIRCLE RESPONSE: NEEDED (NOT NEEDED)

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)

Cust was switched without authorization by Snyder General An Language

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)

OMSS- TC will 0000 mins 3/09 SNY

RETURN CALL TO CUSTOMER 1

BY WHOM ___ DATE ___ TIME ___

COMMENTS ___

24213

CUSTOMER COMPLAINT FORM-SYNDER
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE: 3-10-98 **TIME:** 1:45 **AM** **PM** **(Circle One)**

CSR NAME: LORRAINE

CUSTOMER NAME: JACQUELINE MONTROSS **BTN:** 305-754-7270

ADDRESS: 547 NE 58TH ST **APT#**

CITY: MIAMI **ST:** FL **ZIP** 33137 **INF?** **OOF?** **(Circle one)**

PROBLEM: (Please be very specific and describe thoroughly.)

Synder Device

RESEARCH: (For customer service use only.)

MAR-10-1998 22:48 IN CONTACT 314 332 7835 P.21

CUSTOMER COMPLAINT FORM-SYNDER
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE: 3/6 **TIME:** _____ **AM** **PM** **(Circle One)**

CSR NAME: LINDA

CUSTOMER NAME: DEBRA SMITH **BTN:** 561/585-498

ADDRESS: 230 HIBISCUS TREE **APT#** _____

CITY: LANTANA, FL **ST:** ___ **ZIP** 33462 **INF?** **OOF?** **(Circle one)**

PROBLEM: (Please be very specific and describe thoroughly.)

Did not authorize GTE
30.00

RESEARCH: (For customer service use only.)

24215

MAR-09-1998 22:56 IN CONTRACT 314 332 7835 P.16

CUSTOMER COMPLAINT FORM-SYNDER
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE: 3/6/98 **TIME:** _____ **AM** **PM (Circle One)**

CSR NAME: Carol

CUSTOMER NAME: Myrian Blandon **BTN:** 305 234-7668

ADDRESS: 17100 SW 109 AVE **APT#** _____

CITY: Miami **ST:** FL **ZIP** 33157 **INF?** **OOF?** **(Circle one)**

PROBLEM: (Please be very specific and describe thoroughly.)

Did not authorize GTE

(B) 30.00

RESEARCH: (For customer service use only.)

(☆) Customer was changed w/o her permission, but after we talked for a long time - she agreed to try us for a month - I'd already offered the prepaid card & she still wants it because she was unaware of what happened!

24216

CUSTOMER COMPLAINT FORM-SYNDER
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE: 3/9/98 **TIME:** 3:15 **AM PM (Circle One)**

CSR NAME: Jean

CUSTOMER NAME: Jessy Ficara **BTN:** 954-989-9535

ADDRESS: 6730 Meade St. **APT#**

CITY: Hollywood **ST:** FL **ZIP** 33024 **INF?** **OOF?** **(Circle one)**

PROBLEM: (Please be very specific and describe thoroughly.)

Did not authorize GTE

RESEARCH: (For customer service use only.)

24217

MAR-10-1998 20:27 :N CONTRACT 314 332 7835 P.05

CUSTOMER COMPLAINT FORM-SYNDER
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE: 3/9 **TIME:** _____ **AM** **PM** **(Circle One)**

CSR NAME: LINDA

CUSTOMER NAME: GOLANGCA CAYO **BTN:** 305 791-9622

ADDRESS: 177 NE 47th St TER **APT#** _____

CITY: MIAMI **ST:** FL **ZIP** 33137 **INF?** **OOF?** **(Circle one)**

PROBLEM: (Please be very specific and describe thoroughly.)

Did not authorize GTE 30.00

RESEARCH: (For customer service use only.)

24218

CUSTOMER COMPLAINT FORM-SYNDER
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE: 3/9/98 **TIME:** _____ **AM** **PM** **(Circle One)**

CSR NAME: Carol

CUSTOMER NAME: Elvire Brutus **BTN:** 305 758-3279

ADDRESS: 6355 NE Miami PL **APT#** _____

CITY: Miami **ST:** FL **ZIP** _____ **INF?** **OOF?** **(Circle one)**

PROBLEM: (Please be very specific and describe thoroughly.)

Did not authorize GTE $30.00

RESEARCH: (For customer service use only.)

MAR-09-1998 22:57 IN CONTACT 314 332 7835 P.19

l ent 3-10-98

CUSTOMER COMPLAINT FORM-SYNDER
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE: 3/9 **TIME:** _____ **AM** **PM** **(Circle One)**

CSR NAME: LINDA

CUSTOMER NAME: LILIAN CHOW **BTN:** 305 884-4240

ADDRESS: 1625 PALM AVE **APT#** _____

CITY: HIALEAH **ST:** FL **ZIP** 33010 **INF?** **OOF?** **(Circle one)**

PROBLEM: (Please be very specific and describe thoroughly.)

Did not authorize GTE

40.00
30.00

RESEARCH: (For customer service use only.)

NEW TECHNIC

24220

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CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

SNM

CDC 4/1/1

TODAY'S DATE Mar 31, 1998 TIME 4:01 AM PM ✓

CSR NAME Rachael A. Menendez BADGE # 88379

CUSTOMER NAME Lois Poulot BTN # 954-581-4122

ADDRESS 348 Sydney Ln APT #

CITY Davie ST Fl ZIP 33312

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)

He has Bell South local service and Excel long distance. Excel called him and asked why he was a charge service. They said he was switched on May 17 but they did not know to which company. He called Bell South the told him it was to A.T.&T. He is very mad and is refusing to pay any bill that he receives by A.T.&T. He wants to know who, when, why.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)

OMSS - TCW 3 to 10 mins & add SNM

RETURN CALL TO CUSTOMER

BY WHOM _____ DATE _____ TIME _____

COMMENTS

24221

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
Fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 03-1-98 Time: 7:55 (AM) PM (Circle One)

CSR Name: BRENDA VALENZUELA Badge #: CSC 7241 S

Customer Name: [redacted] TN: 305-819-7587

Address: _____ Apt#: _____

City: _____ ST: _____ ZIP: _____ INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer was switch to GTEL without her authorization. She wanted to cancel and the order that was put in for her.

RESEARCH: (For Customer Service Use Only)

I put her phone # in the list project 15 is helping.

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 4/2/98 **Time:** 6:30 **AM** (PM) (Circle One)

CSR Name: TIMOTHY J. GREEN **Badge #:** _____

Customer Name: TERRY BRITT **BTN:** (305) 653-1938

Address: 701 NW 210 ST **Apt.#:** 708

City: MIAMI **ST:** FL **ZIP:** 33169 **INF?** (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust did not request service and was not contacted by a telemarketer. He is active w/ GTE and does not want it.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 3/30/98 **Time:** 6:10 **AM** (PM) **(Circle One)**

CSR Name: _____ **Badge #:** _____

Customer Name: ALIANE CHARLES **BTN:** 305-835-0497

Address: 3551 NW 97 St **Apt.#:** _____

City: MIAMI **ST:** FL **ZIP:** 33147 **INF? OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

PROBLEM: (Pls. be very specific and describe thoroughly.)

ARY-Ry Because GTE switched w/out PERMISSION wants to take legal attention w/ GTE.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE;** _____ **TIME:** _____

COMMENTS: _____

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 3-23-98 **Time:** 3:05 **AM** (**PM**) **(Circle One)**

CSR Name: Laura Arreola **Badge #:** _____

Customer Name: Vicente Facey **BTN:** 305-557-8479

Address: 6653 NW. 174 T **Apt.#:** _____

City: MIAMI **ST:** FL **ZIP:** 33182 **INF?** **OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED **NOT NEEDED**

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust was changed to GTEFL w/a Authorizatio

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 3/23/98 **Time:** 1:00 **AM** (PM) **(Circle One)**

CSR Name: Michael Fitzgerald **Badge #:** CSC

Customer Name: Juan M. Tobar **BTN:** 305-248-6039

Address: 15802 SW 297 TR 237 **Apt.#:**

City: Homestead **ST:** FL **ZIP:** 33033 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

The caller was switched to GTFLD w/o consent and wanted the order cancelled.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 3-13-98 **Time:** 4:40 **AM (PM)** (Circle One)

CSR Name: Stephen Smith **Badge #:**_____

Customer Name: Willie Gregory **BTN:** 305-620-6081

Address: 861 NW 172 Ter **Apt.#:**_____

City: MIAMI **ST:** FL **ZIP:** 33167 **INF? (OOF?)** (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

PROBLEM: (Pls. be very specific and describe thoroughly.)

SWITCHED w/o Permission

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM:_____ **DATE:**_____ **TIME:**_____

COMMENTS:_____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 3-24-98 **Time:** 4:30 **AM (PM)** (Circle One)

CSR Name: Laura Arreola **Badge #:** _____

Customer Name: Rolando Palacios **BTN:** 305-827-0475

Address: 9832 NW 122 Ter **Apt.#:** _____

City: Hialeah **ST:** Fl. **ZIP:** 33016 **INF? OOF?** (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust was Changed to GTEFLD w/o Authorization

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/6/98 Time: 9:37 AM (PM) (Circle One)

CSR Name: Brenda Valenzuela Badge #: CSC/Project S

Customer Name: JUAN MEJIA BTN: (305) 854-8140

Address: 501 SW 7CT Apt.#:

City: MIAMI ST: FL ZIP: 33130 INT? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer was switched to GTE/D. He wants the order cancelled right away and wants a letter saying that he has been cancelled and an apologie for the inconvenience.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 04-01-98 **Time:** 12:10 **AM** (PM) **(Circle One)**

CSR Name: Melecia Alvarez **Badge #:** _____

Customer Name: Edel Mesas **BTN:** (305) 819-1722

Address: 5428 W 20th LN **Apt.#:** _____

City: Hialeah **ST:** FL **ZIP:** 33016 **INF?** (OOF)? **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust Call to cancel serv. because she never Req. GTFLD

RESEARCH: (For Customer Service Use Only)

Solar + QMF

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-1-98 **Time:** 9:43 (AM) PM (Circle One)

CSR Name: Naomi RAMOS **Badge #:** _____

Customer Name: Carmen Gutierrez **BTN:** 305 642 9132

Address: 1403 NW 7 ST **Apt.#:** 805

City: Miami FL **ST:** FL **ZIP:** 33125 **INF?** (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu Call to CNCL. She Was Switch over Without her Authori, She willing to PAY the Bill But NO longer wants our Serv

Ordr CNCL Due Date 3-17-98

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-1-98 **Time:** 9:05 (AM) PM (Circle One)

CSR Name: Romelia AZA **Badge #:** _____

Customer Name: Mercedes Miniet **BTN:** 305-888-5457

Address: 58 W 28 St. **Apt.#:** 4

City: Hialeah **ST:** Fl. **ZIP:** 33010 **INF?** (OOF)? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

did not authorize change, wants to cancel long distance.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

24232

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-1-98 **Time:** 8:00 (AM) PM **(Circle One)**

CSR Name: Romelia Aza **Badge #:** _____

Customer Name: Jose Molina **BTN:** 305-883-7167

Address: 760 SE 1 st. **Apt.#:** _____

City: Hialeah **ST:** Fl. **ZIP:** 33010 **INF?** (QOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cus called denies calls and he did not authorize the change wants to cancel long distance.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: ~~8/10~~ 4/5 Time: 5 40 AM (PM) (Circle One)

CSR Name: Don Schmick Badge #:

Customer Name: Cecilia Delgado BTN: 305-558-3143

Address: 1035 W. 77 ST Apt.#: 201

City: HIALEAH ST: FL ZIP: 33014 INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust was change to GTE w/o authorization

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

6

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 11-5-98 Time: 8:45 (AM) PM (Circle One)

CSR Name: Joaquin Munoz Badge #:

Customer Name: Luis Figueroa BTN: (305) 362 9016

Address: 8815 NW 108 LN Apt.#:

City: Hialeah Gardens ST: FL ZIP: 33018 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cancel order immediately
LD changed without consent

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

1

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 04-05-98 Time: 5:45 AM (PM) (Circle One)

CSR Name: Francisco Bossic Badge #:

Customer Name: Ramos, Oscar BTN: 305-636-5367

Address: 2620 NW 22 Ave Apt.#: 203

City: Miami ST: FL ZIP: 33142 INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust Claims never req GTEL)

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

24236

4

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 04 - -98 Time: 5:10 AM (PM) (Circle One)

CSR Name: Angel Garcia Badge #: CSC

Customer Name: Fernandez, Miguel BTN: 3056344012

Address: 822 NW 33rd St Apt.#:

City: Miami ST: FL ZIP: 33142 INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust was changed to GTE without his/her Permision. Cust Req Cancelation of The Order.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

24237

9

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 04 - -98 Time: 4:55 AM (PM) (Circle One)

CSR Name: Angel Garcia Badge #: CSC

Customer Name: Lopez, Manuel J TN: 305 825 3657

Address: 1990 w. 56st Apt.#:

City: Miami ST: FL ZIP: 33016 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust was charged to GTE without his/her Permision. Cust Req Cancelation of The Order.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

24238

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/8/98 Time: 9:57 (AM) PM (Circle One)

CSR Name: Sonia Estrada. Badge #: CSC

Customer Name: Manuel Sanchez BTN: 305-8283258

Address: 780 W. 70 PL Apt.#:

City: Hialeah ST: FL ZIP: 33014 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Costomer call to vfy'd why is been rcvd bill frm GTECO he do not req. service & would like be cancel also dost refuse to pay any bill

RESEARCH: (For Customer Service Use Only)

QME - Restricted 4/01/98
Solar - I order with total $ Inter plan
in 305 - he was bill for $ 1.33

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/7/98 Time: 1:43 AM (PM) (Circle One)

CSR Name: Sonia Estrada. Badge #:

Customer Name: Maria Ibarra BTN: 941-481985?

Address: 18488 Holly Rd. Apt.#:

City: Fort Myers ST: FL ZIP: 33912 INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer call to cancel GTECC did not req.
service would like be cancel immtly.

RESEARCH: (For Customer Service Use Only)

QUNF- Pending 5/6/98
solar - 1 order with Total E Inter plan
MSOS no info

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/7/98 Time: 2:34 AM (PM) (Circle One)

CSR Name: Sonia Estrada Badge #:

Customer Name: Gilberto Roiz BTN: 305 3852742

Address: 14767 SW. 65 TER. Apt.#:

City: Miami ST: FL ZIP: 33193 INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust call to cancel GTECO did not req.
service would like be cancel.

RESEARCH: (For Customer Service Use Only)

I order by solar.
MSOS - no INFO
QUF -

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/7/98 Time: _____ AM PM (Circle One)

CSR Name: Sonia Estrada Badge #: _____

Customer Name: Francisco Medina BTN: (915) 544 6029

Address: 1114 N. Ochoa ST 4 Apt.#: _____

City: El Paso ST: TX ZIP: 79902 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer call to cancel GTELD did not request service he also claims is been call 3 or 4 times and GTE keep sent bills to him cost refuse to pay any bill

RESEARCH: (For Customer Service Use Only)

QWF- R 12/17/97
Solar- F order with total $ Inter-H plans
MSOS- is bill for $18.34

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5-7-98 Time: 5:33 AM (PM) (Circle One)

CSR Name: Mike Fitzgerald Badge #:

Customer Name: Rosa Jimenes BTN: (305) 693 0631

Address: 545 E. 27 ST Apt.#:

City: Hialeah ST: FL ZIP: 33013 INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

cust was switched w/o Auth. Does not want serv. cust wants order cancel

RESEARCH: (For Customer Service Use Only)

pending in QMF (5-7-98)
TI Order in Solar

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/7/98. **Time:** 12:50 **AM** (PM) **(Circle One)**

CSR Name: Luis Henderson. **Badge #:** CSC/9

Customer Name: Victor Ricardo **BTN:** 305-232-0653.

Address: 19505 SW. 119 ter **Apt.#:**

City: Miami **ST:** FL **ZIP:** 33177 **INF? OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cst. Very upset bc he never auth. To be switch to GTECH. please cancel now. he have receive a letter from. are Company Said welcome to GTE. he is happy w/ GTE

RESEARCH: (For Customer Service Use Only)

Ord. is Pending
Other. to order.

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5-7-98 Time: 1:41 AM (PM) (Circle One)

CSR Name: DAVID Badge #: ~~305 234 3497~~

Customer Name: RIERA, ERNESTO BTN: 305 234 3497

Address: 18024 SW 154 AVE Apt.#:

City: MIAMI ST: FL ZIP: 33187 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cst did ~~auth. But Chan~~ not auth.
canceled service and HAS NOT yet received
HER bill.

RESEARCH: (For Customer Service Use Only)

Blar- 135msDSl 5/6/98 15:59
QMI.
MSES.

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/6/98 **Time:** 11:50 **(AM)** PM (Circle One)

CSR Name: Amy Benoit **Badge #:** 1865

Customer Name: Lorenzo Vega **BTN:** 305-887-6548

Address: 175 E 12 ST **Apt.#:**

City: HIALEAH **ST:** FL **ZIP:** 3303 **INF?** **(OOF?)** (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

MRS VEGA CALLED & SAID NEITHER SHE OR HER HUSBAND HAS ORDERED GTELD & SHE WAS VERY ANGRY TO FIND OUT AN ORDER HAD BEEN PLACED

RESEARCH: (For Customer Service Use Only)

THE VEGAS ORDER FOR GTELD WAS STILL PENDING. INFORMED MRS VEGA TO CONTACT HER LOCAL TELL THEM WHAT IS HAPPENING & THAT SHE WOULD LIKE TO STAY W/ ATT

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/5/98 Time: 9:46 (AM) PM (Circle One)

CSR Name: Sonia Estrada Badge #:

Customer Name: Maria Molina BTN: 561-3471487

Address: 6551 Arlieghwhole 203 Apt.#:

City: Boca Raton ST: FC ZIP: 33433 INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cost call to cancel GTECC did not req. service
and is been recvd bill frm GTE Do not
Pay any amount would like be cancel now.

RESEARCH: (For Customer Service Use Only)

Qwm F- nothing
solar - no info
msas - bill for $8.25

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/6/98 Time: 7:56 (AM) PM (Circle One)

CSR Name: Sonia Estrada Badge #:

Customer Name: Heriberto Silva BTN: 305-3827349

Address: 12850 SW. 61 ST Apt.#:

City: Miami ST: FL ZIP: 33183 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cost call irate is been recvd bill frm GTEL
And did not req. service would like be cancel
refuse pay bill

RESEARCH: (For Customer Service Use Only)

QMF - Active 3/13/98
Solar - I order with Total $ Inter
MSAS -

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/5/98 Time: 8:57 (AM) PM (Circle One)

CSR Name: Sonia Estrada Badge #:

Customer Name: Higinio Darrandi BTN: 305-2270758

Address: 904 SW. 136 PC Apt.#:

City: Miami ST: FL ZIP: 33184 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cost Call because is been recvd bill frm GTE B did not req. service. ast wooh like be cancel. cost also refuse to pay any amount.

RESEARCH: (For Customer Service Use Only)

QMF- Active - wo 98
Solar- I order
mSDS- bill for 3.92

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

24249

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/5/98 Time: 2:32 AM (PM) (Circle One)

CSR Name: Sonia Estrada Badge #:

Customer Name: Ruiz Arbajal BTN: 305-637 9588

Address: 3189 NW. 21 th AVE Apt.#:

City: Miami ST: FL ZIP: 33142 INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cost is been recod bill frm GTELD he did not req. GTE would like be cancel immetly & refuse to pay any bill

RESEARCH: (For Customer Service Use Only)

Active since 22/Feb/98
mess bill for $111.39
Solar d order

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5-5-98 Time: 3:29 AM (PM) (Circle One)

CSR Name: Mike Fitzgerald Badge #:

Customer Name: Laura Garcia BTN: ([redacted]) (305) 557.9528

Address: 12401 W. Okeechobee Rd Lot 236 Apt.#:

City: Miami ST: FL ZIP: 33016 INF? (OOP)?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CUST NEVER REQ SERV. SWITCHED W/O AUTHOR. CUST DOESN'T WANT SERV. CUST REQ. TO CANCEL SERV.

RESEARCH: (For Customer Service Use Only)

Active in QMF

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date:_____ Time:_____ AM PM (Circle One)

CSR Name: Romelia Aza Badge #:_____

Customer Name: Manuel Santiago BTN: 305-822-7284

Address: 1270 W. 41st Apt.#: 10S

City: Hialeah ST: Fl. ZIP: 33012 INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust. would like to cancel her long distance, Cus. was switched w/o Auth.

RESEARCH: (For Customer Service Use Only)

Cust is active in Solar & QMF
Cus has travel bill

RETURN CALL TO CUSTOMER

BY WHOM:_____ DATE:_____ TIME:_____

COMMENTS:_____

24252

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date:_____ Time:_____ AM PM (Circle One)

CSR Name: Romelia Aza Badge #:_____

Customer Name: Elsa Gonzales BTN: 305-643-0189

Address: 940 NW. 22 Pl 1 Apt.#:_____

City: Miami ST: Fl ZIP: 33125 INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust was switched w/o auth.
would like to cancel
St rsvd bill

RESEARCH: (For Customer Service Use Only)

Cust is active in Solar & QMF

RETURN CALL TO CUSTOMER

BY WHOM:_____ DATE:_____ TIME:_____

COMMENTS:_____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5-5-98 Time: 10:27 (AM) PM (Circle One)

CSR Name: Melecio Alvarez Badge #: CSC

Customer Name: Eduardo, Jorge BTN: (305) 558-3660

Address: 6070 W 19th Ave Apt.#: 103

City: Hialeah ST: FL ZIP: 33012 INFO OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Never request to be switch to GTE wants to cancel. Please cancel. w

RESEARCH: (For Customer Service Use Only)

Active - Solar

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date:_____ Time:_____ AM PM (Circle One)

CSR Name: Romelia Aza Badge #:_____

Customer Name: Jaun Diaz BTN: 305-551-1457

Address: 9725 Fontainebleu Blvd. Apt.#:_____

City: Miami ST: FL. ZIP: 33172 INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cus. was switched w/o auth.
would like to cancel.

RESEARCH: (For Customer Service Use Only)

Cust has 1 order in Solar
AND Pending in QMF.

RETURN CALL TO CUSTOMER

BY WHOM:_____ DATE:_____ TIME:_____

COMMENTS:_____

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/8/98 Time: 9:57 (AM) PM (Circle One)

CSR Name: Sonia Estrada. Badge #: CSC

Customer Name: Manuel Sanchez BTN: 305-8283258

Address: 780 W. 70 PL Apt.#:

City: Hialeah ST: FL ZIP: 33014 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Costomer call to vfryd why is been rcvd bill Frm GTECC he do not req. service & would like be cancel also cost refuse to pay any bill

RESEARCH: (For Customer Service Use Only)

QME - Restricted 4/01/98
Solar - I order with total $ Inter plus
ms SOS - he was bill for $ 1.33

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/7/98 Time: 1:43 AM (PM) (Circle One)

CSR Name: Sonia Estrada. Badge #:

Customer Name: Maria Ibarra. BTN: 941-481985 7

Address: 18488 Holly Rd. Apt.#:

City: Fort Myers ST: FL ZIP: 33912 INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer call to cancel GTECD did not req.
service would like be cancel immtly.

RESEARCH: (For Customer Service Use Only)

QUNF- Pending 5/6/98
solar - I order with Total & Inter plan
MSOS no info

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/7/98 Time: 2:34 AM (PM) (Circle One)

CSR Name: Sonia Estrada Badge #:

Customer Name: Gilberto Roiz BTN: 305 385 2742

Address: 14767 SW. 65 TER. Apt.#:

City: Miami ST: FL ZIP: 33193 INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust call to cancel GTECO did not req.
service would like be cancel.

RESEARCH: (For Customer Service Use Only)

I order by Solar.
MSOS - no info
QUIF -

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5-7-98 Time: 5:33 AM (PM) (Circle One)

CSR Name: Mike Fitzgerald Badge #: _____

Customer Name: Rosa Jimenes BTN: (305) 693 0631

Address: 545 E. 27 ST Apt.#: _____

City: Hialeah ST: FL ZIP: 33013 INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust was switched w/o Auth. Does not want serv. Cust wants order cancel

RESEARCH: (For Customer Service Use Only)

pending in QMF (5-7-98)
I Order in Solar

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5-7-98 Time: 1:41 AM (PM) (Circle One)

CSR Name: DAVID Badge #: ~~305 234 3497~~

Customer Name: RIERA, ERNESTO BTN: 305 234 3497

Address: 18024 SW 154 AVE Apt.#:

City: MIAMI ST: FL ZIP: 33187 INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: (ESCALATION) NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cst did ~~auth. But Chan~~ not auth.
Canceled service and HAS NOT yet received
her bill.

RESEARCH: (For Customer Service Use Only)

Blar- 135mjDSI 5/6/98 15:55
QME.
MSES

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/7/98. **Time:** 12:50 **AM** (PM) **(Circle One)**

CSR Name: Luis Henderson **Badge #:** CSC/9

Customer Name: Victor Ricardo **BTN:** 305-232-0653.

Address: 19505 SW. 119 ter **Apt.#:**

City: Miami **ST:** FL **ZIP:** 33177 **INF? OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cst. Very upset bc he never auth. To be switch to GTE.C.A. please cancel now. he have receive a letter from. are company said welcome to GTE.CA he is happy w/ GTE

RESEARCH: (For Customer Service Use Only)

Ord. is Pending
Seller. Loreley.

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5-4-98 Time: 3 01 AM (PM) (Circle One)

CSR Name: DAVID Badge #:

Customer Name: Sandra ORTIZ BTN: 305-264-4819

Address: 8647 NW 1st Ter Apt.#:

City: MIAMI ST: FL ZIP: 331263 INF? OOF?
899 (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer did not auth. Switch Has other LONG DISTance. I cancelled as FOK no other problems.

RESEARCH: (For Customer Service Use Only)

QMF - ACTIVE.

SOLAR - T4CRXG5 4-2-98 19.35

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 05/04 Time: 3:50 AM (PM) (Circle One)

CSR Name: Wendy a Miller Badge #:

Customer Name: Olivia Nidia BTN: (305) 863 8338

Address: 126 E. 45st Apt.#:

City: Hialeah ST: FL ZIP: 33013 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT (NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust was changed to GTEC / this is not her Phone Number
Cust her name never order GTEC Services

RESEARCH: (For Customer Service Use Only)

I 04/02 - Solar
nothing on QMF

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 05/04 Time: 10:45 AM (PM) (Circle One)

CSR Name: Wendy A Miller Badge #: 05C

Customer Name: Garcia, Marcela BTN: _____

Address: 2339 NW 21St Apt.#: _____

City: Miami ST: FL ZIP: 33142 INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust was changed w/o authorization ATT cust

RESEARCH: (For Customer Service Use Only)

I 04/20

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-4-98 Time: 8.26 (AM) PM (Circle One)

CSR Name: _____ Badge #: _____

Customer Name: BLANCA GARCIA BTN: 305-541-1307

Address: 740 NW 25 AVE Apt.#: 416

City: MIAMI ST: FL ZIP: 33125 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cst never Request Rte. I Cancel
TO HAVE NO FURTHER PROBLEMS-

RESEARCH: (For Customer Service Use Only)

OMF - Pending

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/4/98 Time: 9:48 AM (PM) (Circle One)

CSR Name: Brenda Valenzuela Badge #: CSC

Customer Name: Patricia Marquez BTN: 305-324-5929

Address: 1834 NW 19St Apt.#: 1

City: Miami ST: FL ZIP: 33125 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer did not ask for GTE service, called to be canclled.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/4 Time: 8:15 AM (PM) (Circle One)

CSR Name: MICHAEL FITZGERALD Badge #: CSC

Customer Name: EDDY DIAZ BTN: 305-836-6740

Address: 752 E. 28 ST Apt.#:

City: HIALEAH ST: FL ZIP: 33013 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

The caller was switched to GTELD w/o authorization and said he would not pay anything to GTE. He wanted it cancelled promptly.

RESEARCH: (For Customer Service Use Only)

QMF - Active, Active
SOAR - I ORDER

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/4/98 Time: 10:08 AM (PM) (Circle One)

CSR Name: Brenda Valenzuela Badge #: C9C

Customer Name: Guillermo Caceres BTN: 305-649-4189

Address: 1620 NW 2 30T Apt.#: -

City: Miami ST: FL ZIP: 33125 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer did not ask for service from GTE long distance, she would like to be cancled as soon as possible

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5-4-98 Time: _____ AM (PM) (Circle One)

CSR Name: Gloria Badge #: _____

Customer Name: Nidio PeRe2 BTN: 305 207 0805

Address: 1040 SW 131 AVE. Apt.#: _____

City: Miami ST: FL ZIP: 33184 INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust did not Req. Serv
Asked to be Cancelled

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/4/98 Time: 11:05 AM (PM) (Circle One)

CSR Name: Brenda Valenzuela Badge #: CSC

Customer Name: Elvira Robinson BTN: 305-821-9752

Address: 1380 W 41 St Apt.#: —

City: Hialeah ST: FL ZIP: 33012 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer received a letter from GTE long distance, and never requested the service

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/5/98 Time: 8:57 (AM) PM (Circle One)

CSR Name: Sonia Estrada Badge #:

Customer Name: Higinio Darrandi BTN: 305-2270758

Address: 904 SW. 136 PL Apt.#:

City: Miami ST: FL ZIP: 33184 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust call because is been recvd bill from GTE B did not req. service. cust would like be cancel. cost also refuse to pay any amount.

RESEARCH: (For Customer Service Use Only)

OMF- Active - on GTE
Solar- I order
msds- bill for 3.97

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/6/98 Time: 7:56 (AM) PM (Circle One)

CSR Name: Sonia Estrada Badge #:

Customer Name: Heriberto Silva BTN: 305-3827349

Address: 12850 SW. 61 ST Apt.#:

City: Miami ST: FL ZIP: 33183 INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cost call irate is been recvd bill frm GTECO
And did not req. service would like be cancel/
refuse pay bill

RESEARCH: (For Customer Service Use Only)

QMF - Active 3/13/98
solar - I order with total $ inter
mSAS -

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/5/98 Time: 9:46 (AM) PM (Circle One)

CSR Name: Sonia Estrada Badge #:

Customer Name: Maria Molina BTN: 561-3471487

Address: 6551 Arlieghwhole 203 Apt.#:

City: Boca Raton ST: FL ZIP: 33433 INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cost call to cancel GTECC did not req. service and is been recvd bill from GTE Do not pay any amount would like be cancel now.

RESEARCH: (For Customer Service Use Only)

QWM F- nothing

solar - no info

msos - bill for $8.25

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/6/98 **Time:** 11:50 (AM) PM (Circle One)

CSR Name: Amy Benoit **Badge #:** 1865

Customer Name: Lorenzo Vega **BTN:** 305-887-6548

Address: 175 E 12 ST **Apt.#:**

City: HIALEAH **ST:** FL **ZIP:** 33013 **INF?** (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

MRS VEGA CALLED & SAID NEITHER SHE OR HER HUSBAND HAS ORDERED GTEL & SHE WAS VERY ANGRY TO FIND OUT AN ORDER HAD BEEN PLACED

RESEARCH: (For Customer Service Use Only)

THE VEGAS ORDER FOR GTELD WAS STILL PENDING. INFORMED MRS VEGA TO CONTACT HER LOCAL TELL THEM WHAT IS HAPPENING & THAT SHE WOULD LIKE TO STAY W/ AT&T

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5-4-98 Time: 10 05 (AM) PM (Circle One)

CSR Name: _____ Badge #: _____

Customer Name: AHELDA S Moreno BTN: 305 820 - 8298

Address: 1435 W. 41 S Apt.#: F

City: HLD ST: FL ZIP: 33025 INF? OOF? 922 (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer did not order GTE. Canceled service so no further problems will ensue

RESEARCH: (For Customer Service Use Only)

QMF - A-
Solar -
MSDS -

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5-5-98 Time: 10:27 (AM) PM (Circle One)

CSR Name: Melecio Alvarez Badge #: CSC

Customer Name: Eduardo, Jorge BTN: (305) 558-3660

Address: 6070 W 19th Ave Apt.#: 103

City: Hialeah ST: Fl ZIP: 33012 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Never request to be switch to GTE wants to cancel. Please cancel. w

RESEARCH: (For Customer Service Use Only)

Active - Solar

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date:_____ Time:_____ AM PM (Circle One)

CSR Name: Romelia Aza Badge #:_____

Customer Name: Elsa Gonzales BTN: 305-643-0189

Address: 940 NW. 22 Pl 1 Apt.#:_____

City: Miami ST: Fl ZIP: 33125 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust was switched w/o auth
would like to cancel
Sd rcvd bill

RESEARCH: (For Customer Service Use Only)

Cust is active in Solar & QMF

RETURN CALL TO CUSTOMER

BY WHOM:_____ DATE:_____ TIME:_____

COMMENTS:_____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date:_____ Time:_____ AM PM (Circle One)

CSR Name: Romelia Aza Badge #:_____

Customer Name: Manuel Santiago BTN: 305-822-7284

Address: 1270 W. 41st Apt.#: 105

City: Hialeah ST: Fl. ZIP: 33012 INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust. would like to cancel her long distance, Cus. was switched w/o Auth.

RESEARCH: (For Customer Service Use Only)

Cust is active in Solar & QMP
Cus has recd. bill

RETURN CALL TO CUSTOMER

BY WHOM:_____ DATE:_____ TIME:_____

COMMENTS:_____

Docket No. 990362-TI
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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5-5-98 Time: 3:29 AM (PM) (Circle One)

CSR Name: Mike Fitzgerald Badge #:

Customer Name: Laura Garcia BTN: ([redacted]) (305) 557.9528

Address: 12401 W. Okeechobee Rd Lot 236 Apt.#:

City: Miami ST: FL ZIP: 33016 INF? (OOB)?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CUST NEVER REQ SERV. SWITCHED W/O AUTHOR. CUST DOESNT WANT SERV. CUST REQ. TO CANCEL SERV.

RESEARCH: (For Customer Service Use Only)

Active in QMF

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/5/98 Time: 2:32 AM (PM) (Circle One)

CSR Name: Sonia Estrada Badge #:

Customer Name: Raúl Arbajal BTN: 305-637 9588

Address: 3189 NW. 21th AVE Apt.#:

City: Miami ST: FL ZIP: 33142 INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cost is been recod bill frm GTECO he did not req. GTE would like be cancel immetly & refuse to pay any bill

RESEARCH: (For Customer Service Use Only)

Active since 22/Feb/98
mscs bill for $111.39
Solar I order

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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Exhibit REP-18
Page 1123

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date:_____ Time:_____ AM PM (Circle One)

CSR Name: Romelia Aza Badge #:_____

Customer Name: Jaun Diaz BTN: 305-551-1457

Address: 9725 Fontainebleu Blvd Apt.#:_____

City: Miami ST: fl. ZIP: 33172 INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cus. was switched w/o auth.
would like to cancel.

RESEARCH: (For Customer Service Use Only)

Cust has I- order in Solar
AND pending in QUF.

RETURN CALL TO CUSTOMER

BY WHOM:_____ DATE:_____ TIME:_____

COMMENTS:_____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5-4-98 Time: 2:47 AM PM (Circle One)

CSR Name: Jose Peña Badge #:

Customer Name: CESARINA Lopez BTN: (305) 649-7018

Address: 720 NW 27th ct Apt.#: 4

City: Miami ß ST: fl. ZIP: 33125 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

cus was switched w/o auth.
did not req svc

RESEARCH: (For Customer Service Use Only)

QMF shows active

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5-4-98 Time: 12:34 AM (PM) (Circle One)

CSR Name: Melecio Alvarez Badge #:

Customer Name: Batista, Walter BTN: (305) 265-8468

Address: 5603 NW 7th st. Apt.#: C 102

City: Miami ST: FL ZIP: 33126 INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

She never request 6TE for long distance & she is not interested in it Please cancel her.

RESEARCH: (For Customer Service Use Only)

Solar

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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Page 1126

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 06/03/98 **Time:** 2:50 **AM PM (Circle One)**

CSR Name: Naomi Ramos **Badge #:**

Customer Name: Marinela Eguigure **BTN:** 305-552-5874

Address: 187 NW 97 Ave 313 **Apt.#:**

City: Miami **ST:** FL **ZIP:** 33172 **INF? OOF?** (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cx Call to CNC / Saw She never Leg
Nor did She Make a Call to Hold,
Order Investigation Was told to Cx.

RESEARCH: (For Customer Service Use Only)

Payment Date Solar Not Found

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 7/17 **Time:** 5:55 **AM (PM)** (Circle One)

CSR Name: DAN SERRADILLA **Badge #:**

Customer Name: JESSENIA BLANCO **BTN:** 305-541-2893

Address: 1818 SW. 11 TER **Apt.#:**

City: MIAMI **ST:** FL **ZIP:** 33135 **INF? (OOF?)** (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CUST NEVER REQ GTE. SHE IS 16 YEARS OLD. HER MOTHER CALL VERY UPSET, BECAUSE NOT ONLY SHE IS A MINOR, BUT ALSO BECAUSE THE USE OF A FACSE SS# (590-06-8462). THE MOTHER WILL SUE GTE IN THE BASIS THA JESSENIA IS A MINOR

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date:_____ **Time:**_____ **AM PM (Circle One)**

CSR Name: Romelia AZA **Badge #:**_____

Customer Name: Jorge Olivella **BTN:** 305-888-5311

Address: 68 E 13 St **Apt.#:**_____

City: Hialeah **ST:** FL **ZIP:** 33010 **INF? OOF?**
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust did not req change.
Would like to Cancel.

RESEARCH: (For Customer Service Use Only)

Order is Active in Solar
and Opt

RETURN CALL TO CUSTOMER

BY WHOM:_____ **DATE:**_____ **TIME:**_____

COMMENTS:_____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-4-98 Time: 10 08 (AM) PM (Circle One)

CSR Name: _____ Badge #: _____

Customer Name: Sandra ORTIZ BTN: 305-264-4819

Address: 8642 NW 1st TER Apt.#: _____

City: MIAMI ST: FL ZIP: 3312638 INF? OOF?
99 (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer was switched w/o authorization.
Canceled service with GTELD.

RESEARCH: (For Customer Service Use Only)

BnF - Active

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/3 Time: 6:00 AM (PM) (Circle One)

CSR Name: MICHAEL FITZGERALD Badge #: CSC

Customer Name: OLGA REYES BTN: 305-649-4864

Address: 330 NW 16 AVE Apt.#: 11

City: MIAMI ST: FL ZIP: 33125 INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

The caller said that she never ordered GTE-LD and was switched over w/o her knowledge. She would like the order cancelled.

RESEARCH: (For Customer Service Use Only)

- She had a Bill in MSOS
- Order in Solar & was Active, Active.

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/2/98 Time: 8:17 (AM) PM (Circle One)

CSR Name: Melecio Alvarez Badge #: CSC

Customer Name: Maria E. Garcia BTN: 305-822-0851C

Address: 251 E. 41ST Apt.#: —

City: Hialeah ST: FL ZIP: 33013 INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

She did not ask for GTE Long Distance; called to make Shure She was cancelled. she recieved a letter from GTE Thanking her for having their service and She didn't want it.

RESEARCH: (For Customer Service Use Only)

solar "I" order

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/3 Time: 12:30 AM (PM) (Circle One)

CSR Name: MICHAEL FITZGERALD Badge #: CSC

Customer Name: JOSE I. RASCO BTN: 305-326-6807

Address: 1104 NW 5 ST Apt.#: 9

City: MIAMI ST: FL ZIP: 3312[illegible] INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

The caller was switched to GTELD w/o his knowledge and had received various bills, He wanted the order cancelled

RESEARCH: (For Customer Service Use Only)

- Bill for credit in MSOS
- Order in OMAR
- Customer Active, Active in QMF

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/7/98 Time: 10:50 (AM) PM (Circle One)

CSR Name: Luis Henderson Badge #: CSC/S

Customer Name: EUENOR Rodriguez BTN: 305 828 2272

Address: 606 W. 81 ST 117 Apt.#:

City: Hialeah ST: FL ZIP: 33014 INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cst Never auth. Tobe changed to GTECO.
Cst Spoke w/ GTECO Rep. / but he ~~Told~~ Ten the
Cst That Twas only a Drawin for Dec mint.
he receive a bill for 5.73
He will paid that on Cancel.

RESEARCH: (For Customer Service Use Only)

Comf. He have (R)
Solar "I" order placed by BSMTLM2 AT 1954 hrs
MSOS. bill for 5.93

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

24291

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/2/98 Time: 10:15 (AM) PM (Circle One)

CSR Name: Melecio Alvarez Badge #: CSC

Customer Name: Jorge Lopez BTN: 305-888-0438

Address: 1432 W 29St Apt.#: 2

City: Hialeah ST: FL ZIP: 33012 INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer recieved a bill from GTE... and didn't authorize changes on his phone. and would like to cancel this service.

RESEARCH: (For Customer Service Use Only)

Sdar "I" order, MSOS (CAL) CON=bill

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 05/01 Time: 4:45 AM (PM) (Circle One)

CSR Name: Wendy Miller Badge #:

Customer Name: Gonzalez, Bernardo BTN: (305) 531 8258

Address: 846 Pennsylvania Ave Apt.#:

City: Miami Beach ST: FL ZIP: 33139 INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust. was changed W/O authorization

RESEARCH: (For Customer Service Use Only)

I 04/06

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/5/98 **Time:** 3:45 **AM PM (Circle One)**

CSR Name: David Arrella **Badge #:** _____

Customer Name: Santiago Peter **BTN:** 305-2239358

Address: 3805 SW 103 Ave **Apt.#:** 205

City: Miami **ST:** FL **ZIP:** 33165 **INF? OOF?**
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust mgr Req the Service.
They got a Bill by mail She went to
Comcel order. I credit Bill

RESEARCH: (For Customer Service Use Only)

I order Solar
Bill to MSOS

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
Fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/2/98 Time: 2:13 AM (PM) (Circle One)

CSR Name: Naomi Ramos Badge #: _____

Customer Name: Ciro Pupo BTN: 305-823-4237

Address: Apt 102 666 W. 81st Apt.#: _____

City: HLH ST: FL ZIP: 33014 INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu never req STE Serv, and Serv

RESEARCH: (For Customer Service Use Only)

OMF ·cct, Payment Due

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

24295

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/2/97 Time: 2:07 AM (PM) (Circle One)

CSR Name: Naomi Ramos Badge #:

Customer Name: Olivier, Toria BTN: 305-556-5242

Address: 1755 W. 60 St Apt 109-D Apt.#:

City: Hialeah ST: FL ZIP: 33012 INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer was changed to GTE without his authorization he called to be cancelled.

RESEARCH: (For Customer Service Use Only)

QMF Pending

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

24296

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/2/98 Time: 1:17 AM (PM) (Circle One)

CSR Name: Naomi Ramos Badge #: CSC

Customer Name: Jaime Chavez BTN: 305-885-0845

Address: 570 W 29 ST Apt.#: 19

City: Hialeah ST: FL ZIP: 33012 INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer was changed without his permisson, and is very upset. he called to be cancelled

RESEARCH: (For Customer Service Use Only)

"OMF", pending

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/01/98 **Time:** 9:26 (AM) PM (Circle One)

CSR Name: Sonia Estrada **Badge #:**

Customer Name: Cristina Lopez **BTN:** 305 5736667

Address: 576 NW 42 ST **Apt.#:**

City: Miami **ST:** FL **ZIP:** **INF? OOF?** (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

customer call to cancel 6TELD did not request service then she said she sign documnt for LD 3 Free) minutes adus we can cancelled bot she will recad another Final bill she was on hospital & just said she wont pay any billis.

RESEARCH: (For Customer Service Use Only)

QMF - Active 3/6/98 — deactive 4/21/98
Solar - I order
MSRS - for 6.83

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5-1-98 Time:_____ AM PM (Circle One)

CSR Name: Romelia AZA Badge #:_____

Customer Name: Basilio, Martinez BTN: 305-696-5015

Address: 3500 E 9 Ct 24 Apt.#:_____

City: Hialeah ST: Fl. ZIP: 33013 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust was switched W/O auth.
Would like to Cancel.

RESEARCH: (For Customer Service Use Only)

Customer is active in Solar & Pending in QNT

RETURN CALL TO CUSTOMER

BY WHOM:_____ DATE:_____ TIME:_____

COMMENTS:_____

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 05/01 Time: 6:30 AM (PM) (Circle One)

CSR Name: Wendy Miller Badge #:

Customer Name: Romero, José BTN:

Address: 1155 W 77 St 213C Apt.#:

City: Hialeah ST: FL ZIP: 33014 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust was changed w/o authorization

RESEARCH: (For Customer Service Use Only)

I 3/09

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/20/98 Time: _____ AM PM (Circle One)

CSR Name: Sonia Estrada Badge #: _____

Customer Name: Ana Maria Rodrigz BTN: 305-385 4238

Address: 1288 W. 29 ST 22 Apt.#: _____

City: Hialeah ST: FL ZIP: 33012 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer call to cancel GTECC did not not req. service and that is not her phone nomber she claims she already calld 2 times to cancel all this info & she still billing for the same bill

RESEARCH: (For Customer Service Use Only)

mSOS - a bill for 14.43

QuIF - Active 1/26/98

Solar - I order with total $ Interna

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

24301

ORIGINAL

BEFORE THE FLORIDA PUBLIC SERVICE COMMISSION

Initiation of Show Cause Proceeding Against GTE Communications Corporation. for Apparent Violation of Rule 25-4.118, F.A.C., Local, Local Toll, of Toll Provider Selection.	Docket No. 990362-TI Filed: January 9, 2001

SUPPLEMNTAL DIRECT TESTIMONY

OF

R. EARL POUCHER

On Behalf of the Citizens of the State of Florida

VOLUME IV

Jack Shreve
Public Counsel

Office of Public Counsel
c/o The Florida Legislature
111 West Madison Street
Room 812
Tallahassee, FL 32399-1400

(850) 488-9330

Attorney for the Citizens
of the State of Florida

(Vol. 4 of 4)

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1-9-01
00387-01

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/1/98 Time: 2:13 AM (PM) (Circle One)

CSR Name: Naomi Ramos Badge #:

Customer Name: Denise Valderrama BTN: 305-362-5218

Address: 10324 NW 128th Ter Apt.#:

City: Alt ST: FL ZIP: 330186 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cx never req GTE Serv. there a Resist w/ local Co.

RESEARCH: (For Customer Service Use Only)

Ivonne Benedetti Carlos QmF Act

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/1/98 Time: 1:44 AM (PM) (Circle One)

CSR Name: Naomi Ramos Badge #:

Customer Name: Velasco, Ernesto BTN: 305 819-5537

Address: 2225 W 60 st 402 Apt.#:

City: Hialeah ST: FL ZIP: 33016 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cx never req GTE Serv

RESEARCH: (For Customer Service Use Only)

No Payment

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: May 11 Time: 4:08 AM (PM) (Circle One)

CSR Name: Wendy A Miller Badge #:

Customer Name: Rodolfo Castano BTN: (305) 364 9368

Address: 1555 W 42 Pl 12 Apt.#:

City: Hialeah ST: FL ZIP: 33012 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust was changed w/o authorization. ATT cust.

RESEARCH: (For Customer Service Use Only)

I 3/18

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date:_____ Time:_____ AM PM (Circle One)

CSR Name: Romelia AZA Badge #:_____

Customer Name: David ABreau BTN: 305-633-8497

Address: 3500 NW 18 Ave 1104 Apt.#:_____

City: Miami ST: FL ZIP: 33142 INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust was switched w/o auth.

RESEARCH: (For Customer Service Use Only)

Cust is A in Solar but D in QMF

RETURN CALL TO CUSTOMER

BY WHOM:_____ DATE:_____ TIME:_____

COMMENTS:_____

24305

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/1/98 Time: 7:09 (AM) PM (Circle One)

CSR Name: Naomi Ramos Badge #:

Customer Name: Francisco, Martinez BTN: 407-886-4505

Address: 1202 Countrywind Dr Apt.#:

City: Apopka ST: FL ZIP: 32703 INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu never req GTE serv, please cxl. serv. at cu req.

RESEARCH: (For Customer Service Use Only)

Best OMF, No payment Due

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 6/9/98 **Time:** 1:20 **AM** (PM) **(Circle One)**

CSR Name: Amy B **Badge #:** 1865

Customer Name: Helen Valiche **BTN:** 305-891-3329

Address: 1475 NE 125 TER **Apt.#:** 611

City: N. Miami **ST:** FL **ZIP:** 33161-5267 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust says neither she nor anyone in her house has spoken to anyone from GTELO & NO ONE AUTHORIZED THE SWITCH

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/8/98 Time: 9:30 (AM) PM (Circle One)

CSR Name: Naomi RAMOS Badge #:

Customer Name: Salvador Bonilla BTN: 941-369-7340

Address: ~~Sal~~ 707 Adams AVE Apt.#:

City: Lehigh Acres, FL ST: ZIP: 33936 INF? (OOF)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu complaining about being switch over without there authorization, at cus req to CNCL Service immediately. Cu call week ago to cncl

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-8-98 Time: 10:05 (AM) PM (Circle One)

CSR Name: Romelia Aza Badge #: _____

Customer Name: Rosa Ostega BTN: _____

Address: 721 ~~NE~~ NW 2nd St Apt.#: _____

City: Miami ST: FL ZIP: 33128 INF? (OOF)?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer was very irate bc she did not authorize chdng. bc she recd the ltr she will pay but would like to cancel bc.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

24309

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/9/98 Time: 12:35 AM (PM) (Circle One)

CSR Name: Naomi Ramos Badge #:

Customer Name: Jose M. Gomez BTN: 305-554-1920

Address: 4421 SW 137th St Apt.#:

City: Miami ST: Fl ZIP: 33175 INT: (OOP)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu complaining about being switch over without their authorization, at cu req to cncl service immediately.

RESEARCH: (For Customer Care Use Only)

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/8/98 Time: 12:35 AM PM (Circle One)

CSR Name: Naomi Rimes Badge #: _____

Customer Name: Jose M. Gomez BTN: 305-554-1920

Address: 4421 SW 137th St Apt.#: _____

City: Miami ST: FL ZIP: 33175 INP? OOP? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cx complaining about being switch over without there authorization, at cx req to cncl service immediately.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

24311

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Exhibit REP-18
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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5-1-98 Time: 446 AM (PM) (Circle One)

CSR Name: Flavia Aniola Badge #:

Customer Name: Valluena Navvade BTN: 305 828 7794

Address: 10000 NW 80 Ct Apt.#:

City: Hialeah ST: FL ZIP: 33016 INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust did not Req. Serv.
Cust Req. Cancelation

RESEARCH: (For Customer Service Use Only)

tele. # does not ex.

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/1/98 Time: 4:57 AM (PM) (Circle One)

CSR Name: Luis Henderson Badge #: CSS/S

Customer Name: Serrano Hermogenes BTN: 305 553 1432

Address: ~~Miami~~ 9852 SW. 2 ST Apt.#:

City: Miami F ST: FL ZIP: 33174 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cst Never Req. GTE LD. because
don't want. are LD.

RESEARCH: (For Customer Service Use Only)

Solar I/C [redacted] Order. by THERN65

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

24313

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 05-01-98 Time: 6:37 AM (PM) (Circle One)

CSR Name: Jorge Rojas Badge #:

Customer Name: Angel Morales BTN: 305 827 07 06

Address: 1160 W 60 St. Apt.#:

City: Hialeah ST: FL. ZIP: 33013 INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cst never req. QTELD

RESEARCH: (For Customer Service Use Only)

he had "I" order in Solar

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/1 Time: 5:43 AM (PM) (Circle One)

CSR Name: Dan Serradilla Badge #:

Customer Name: ANSELMO RODRIGUEZ BTN: 305-624-3339

Address: 21397 NW. 39 AVE Apt.#:

City: MIAMI ST: FL ZIP: 33142 INF? (OOE?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust. was charge [illegible] to GTE w/o authorization. Also SNYDER got his SS# somehow - He said he will sue GTE for way to access information.

RESEARCH: (For Customer Service Use Only)

I order 4/24/98

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

24315

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/1/98 Time: _____ AM PM (Circle One)

CSR Name: Naomi Ramos Badge #: _____

Customer Name: Joel Millares BTN: 305-888-9166

Address: 1265 W 24 ST 220 Apt.#: _____

City: Hialeah ST: FL ZIP: 33010 INFT OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CUS CLAIMS # ITS NOT ON THE RIGHT DIDNT AUTHORIZE SWITH WANT TO CANCEL

RESEARCH: (For Customer Service Use Only)

DMF - Deactived.

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5-1-98 Time: 4:30 AM (PM) (Circle One)

CSR Name: Joaquin Munoz Badge #:

Customer Name: Francisco GARCIA BTN: 305-324 1792

Address: 600 NW S River DR 305 Apt.#:

City: Miami ST: FL ZIP: 33136 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Has Restriction in QMF
No PAYMENT Necessary* Closing Statement

RESEARCH: (For Customer Service Use Only)

Never ordered service

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

24317

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/8 Time: 11:50 (AM) PM (Circle One)

CSR Name: Jose Pena Badge #:

Customer Name: DiAz, Claudia BTN: (305) 265-4839

Address: 8185 NW 7 St. 322 Apt.#:

City: Miami ST: Fl. ZIP: 33126 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CUS was switched w/o authorization was very upset.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 04- -98 Time: _____ AM PM (Circle One)

CSR Name: Angel Garcia Badge #: CSC

Customer Name: Bueno Francisco BTN: (305) 826 7139

Address: 3070 W. 6 Ave Apt.#: _____

City: Hialeah ST: FL ZIP: 33012 INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust was changed to GTE without there permission Cust Req Cancelation of the Order.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

24319

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 04- -98 Time: _____ AM PM (Circle One)

CSR Name: Angel Garcia Badge #: CSC

Customer Name: Chang, Luis BTN: 305 444 9187

Address: 121 Sidonia Ave 2 Apt.#: _____

City: Miami ST: FL ZIP: 33134 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust was changed to GTE without there permision Cust Req Cancelation of the Order.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

24320

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CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 04- -98 **Time:** 7:27 **AM** (PM) (Circle One)

CSR Name: Angel Garcia **Badge #:** CSC

Customer Name: Pena German **BTN:** 305 255 9910

Address: 17200 SW. 153 Ct **Apt.#:**

City: Miami **ST:** FL **ZIP:** 33185 **INF?** (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust was changed to GTE without there PERMISION Cust Req Cancetation of the Order.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

24321

Customer Name: Eduardo Rua Jr. BTN: 305 [illegible]

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 04- -98 Time:_____ AM PM (Circle One)

CSR Name: Angel Garcia Badge #: CSC

Customer Name: Lugrada Anagloria BTN: 305 822 3860

Address: 1000 NW 80 Coct 2206 Apt.#:_____

City: Hialeah ST: FL ZIP: 33016 INF? OOE?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust was changed to GTE without
there permision Cust Req Cancelation
of the Order.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM:_____ DATE:_____ TIME:_____

COMMENTS:_____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/8/98 **Time:** 6:03 **AM (PM)** (Circle One)

CSR Name: BRENDA VALENZUELA **Badge #:** PROJECTS/CSC

Customer Name: Esteban J. Blanco **BTN:** (305) 884-6230

Address: 180 E 6th ST **Apt.#:**

City: HIALEAH **ST:** FL **ZIP:** 33010 **INF? (OOF?)** (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer was switched to GTE and never asked for the service.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/8/98 Time: 10:13 AM PM (Circle One)

CSR Name: Brenda Valenzuela Badge #: CSR/Project S

Customer Name: LOURDES DELEON BTN: (305) 545-7590

Address: 940 SW 5TH ST Apt.#: 4

City: MIAMI ST: FL ZIP: 33130 INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer was switched to GTECC.
She wants the order cancelled ASAP.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM:_____ DATE:_____ TIME:_____

COMMENTS:_____

24324

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
Fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/8 Time: 9:06 AM. (PM) (Circle One)

CSR Name: Dan Serracchia-Avery Badge #:

Customer Name: OSMANY LEON BTN: 305-512-0189

Address: 5327 PALM AVE Apt.#: 104

City: HIALEAH ST: FL ZIP: 33012 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CUST. WAS CHANGE TO GTE W/O AUTHORIZATION

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/8/98 Time: 6:31 AM (PM) (Circle One)

CSR Name: Brenda Valenzuela Badge #: CSC / Project S

Customer Name: Maysa Fernandez BTN: (305) 382-0936

Address: 7407 W 152 AVE Apt.#: 106

City: MIAMI ST: FL ZIP: 33193 INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer ~~to~~ news asked for GTE service. Wants order to be cancelled.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM:_____ DATE:_____ TIME:_____

COMMENTS:_____

24326

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/8/98 Time: 6:53 AM (PM) (Circle One)

CSR Name: Brenda Valenzuela Badge #: CSC / Project S

Customer Name: Leandra Alvarez BTN (305) 688-4470

Address: 548 E 50TH ST Apt.#:

City: HIALEAH ST: FL ZIP: 33013 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer was switched and wants the order cancelled since he never asked for him to be switched.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-8-98 Time: 4:55 AM (PM) (Circle One)

CSR Name: Laura Arreola Badge #:

Customer Name: Ernestina Chacon BTN: 305-822-5570

Address: 2985 W 80 st Apt.#: 103

City: Hialeah ST: FL ZIP: 33018 INT? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust was changed to GTE W/O Authorization

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

24328

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-8-98 Time: 3:58 AM (PM) (Circle One)

CSR Name: Laura Arreola Badge #:

Customer Name: Carmen Suarez BTN: 305-235-8980

Address: 11521 SW. 135 LN Apt.#:

City: Miami ST: FL ZIP: 33176 INT? (OOR) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust. was changed to GTE w/o Authorize

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 04- -98 Time: _____ AM PM (Circle One)

CSR Name: Angel Garcia Badge #: CSC

Customer Name: Marrugo, Gloria BTN: 305 634 2820

Address: 3158 NW 28st. Apt.#: _____

City: Miami ST: FL ZIP: 33142 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust was changed to GTE without there permission Cust Req Cancelation of the Order.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

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2\

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 04/06/98 Time: 05:30 AM (PM) (Circle One)

CSR Name: Francisco Cossio Badge #: _____

Customer Name: Dieto Ramon BTN: 407-656-3850

Address: 618 Birch Ave. Apt.#: _____

City: Winter Garden ST: Fl ZIP: 34787 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust Claim never reg GTEL)

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

24331

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 04/06/98 Time: 04:40 AM (PM) (Circle One)

CSR Name: Francisco Cossio Badge #:

Customer Name: Cardena, Mario BTN: 305-265-9149

Address: 1401 SW 67 Ave Apt.#: 36

City: Miami ST: FL. ZIP: 33144 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust claim never reg GTEL D

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

24332

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 04/06/98 **Time:** 07:10 **AM** (**PM**) **(Circle One)**

CSR Name: Francisco Cossio **Badge #:** _____

Customer Name: Acosta Maria L. **BTN:** 305-825-4219

Address: 1068 W 42 St **Apt.#:** _____

City: Hialeah **ST:** FL **ZIP:** 33012 **INF?** **OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED **NOT NEEDED**

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust Claim never rec'd. GTEL'd

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/6 Time: 2:25 AM (PM) (Circle One)

CSR Name: Jose PENA Badge #:

Customer Name: Tobe, MARIA BTN:

Address: 1617 MARGATE AV. Apt.#:

City: ORLANDO ST: FL ZIP: 32803 INT? O(OF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cus Did not Reserv, has us as LD was really upset when found out

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

7 24334

APR. 7.1998 3:04PM ANDERSON FIN NET INC NO.118 P.15/43

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/6 Time: 10:20 (AM) PM (Circle One)

CSR Name: Jose Peña Badge #:

Customer Name: MARIA LUISA TN: 805-233-7334

Address: 11250 SW 197 St. 234 Apt.#:

City: MIAMI, ST: FL ZIP: 33157 INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

cus did not req ser. was upset she received letter saying she had confirmed change she did not. wants to cancel

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

24335

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/6 Time: _____ AM PM (Circle One)

CSR Name: Jose Perea Badge #: _____

Customer Name: AIEMAN, Angela BTN: (305)559-1360

Address: 3941 SW 89th AVE. Apt.#: 8

City: MIAMI ST: FL ZIP: 33165 INT? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

cus did not req service was really upset when he found out he did have cbl.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-6-98 Time: 2:30 AM (PM) (Circle One)

CSR Name: Romelia Anza Badge #:

Customer Name: Ciro Pupo BTN:

Address: 6666 W 81st 102 Apt.#:

City: Hialeah ST: FL ZIP: 33014 INT? (OOP?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

did not req change. please cancel ASAP

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

24337

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/6/98 Time: 10:02 (AM) PM (Circle One)

CSR Name: SONIA ESTRADA Badge #:

Customer Name: Maria E. Grandde BTN:

Address: 15455 SW. 296 ST. Apt.#:

City: Homestead ST: FL. ZIP: INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer call to cancel GTECO never request service. like be cancel mmtly

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

20

24338

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/6/98 Time: 9:03 (AM) PM (Circle One)

CSR Name: Sonia Estrada Badge #:

Customer Name: Silvestre Cruz BTN: 305-8871098

Address: 1502 E 9 CT Apt.#:

City: Hialeah ST: FL ZIP: INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Costumer call to cancel GTECO never request, servie to like be cancel immently

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

19

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-6-98 Time: 8:00 (AM) PM (Circle One)

CSR Name: Romelia Aza Badge #:

Customer Name: Antonia Estrada BTN: 305-245-4538

Address: 162 NW. 3 St 7 Apt.#:

City: Homestead ST: FL ZIP: 33030 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer never req. change. please cancel

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/6/98 Time: 8:01 (AM) PM (Circle One)

CSR Name: Marco Peña Badge #:

Customer Name: Rodolfo Garcia BTN: 305 675-9168

Address: 2135 Washington Apt.#:

City: Miami ST: FL ZIP: 33139 INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust. was switched without his permission, so I went head and gave him cr. because he was being charged for something he never had.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

24341

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/6 Time: 11:54 (AM) PM (Circle One)

CSR Name: Jose Pena Badge #:

Customer Name: Recino, Carlos BTN: (305)884-3945

Address: 960 w 29 st Apt.#: 24

City: Hialeah ST: FL ZIP: 33012 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

cus did not place order was upset when she found out somebody did it for her

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

24342

9

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30

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 4/4/98 **Time:** 9:20 (AM) PM (Circle One)

CSR Name: Naomi RAMOS **Badge #:** _____

Customer Name: LUIS FRIAS **BTN:** 305-638-9416

Address: 2430 NW 36 St **Apt.#:** _____

City: Miami **ST:** FL **ZIP:** 33142 **INF? OOF?** (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

PROBLEM: (Pls. be very specific and describe thoroughly.)

CU WAS Switch W/Out Authorization, CNCL Order

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

35

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 4/4/98 **Time:** 7:55 (AM) PM (Circle One)

CSR Name: Naomi Ramos **Badge #:**

Customer Name: Blanca Juarez **BTN:** 305-884-0249

Address: 1170 N 25 St **Apt.#:**

City: Hialeah **ST:** FL **ZIP:** 33010 **INF?** (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu was Switch over w/out Author, CWCL ords.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/6 Time: 10:49 (AM) PM (Circle One)

CSR Name: Jose Pena Badge #:

Customer Name: PRIETO, Jose BTN: (305) 553-9047

Address: 10227 SW 74th ST. Apt.#: B-223

City: MIAMI ST: FL ZIP: 33165 INT? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

cus has serv did not req serv. was upset about it.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

24345

27

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 04/04/98 Time: 05:00 AM (PM) (Circle One)

CSR Name: Francisco Cossio Badge #:

Customer Name: Gonzalez Jose BTN: 305-888-4888

Address: 105 W 26 ST Apt.#: 1

City: Hialeah ST: FL ZIP: 33010 INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust req Cancel never req GTE CD

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

24346

5

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/4 **Time:** 2:58 **AM** (PM) **(Circle One)**

CSR Name: Dan Serradilla **Badge #:**

Customer Name: CARMEN SALOMON **BTN:** 305-825-8292

Address: 4370 W. 10 CT **Apt.#:**

City: HIALEAH **ST:** FL **ZIP:** 33012 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust. was change to GTE w/o authorization

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

23

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 04/04/98 Time: 04:45 AM (PM) (Circle One)

CSR Name: Francisco Cassio Badge #: _____

Customer Name: Juana Amado BTN: 305-633-6386

Address: 3031 NW 19 Ave. Apt.#: _____

City: Miami ST: FL ZIP: 33142 INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust. claim never req. GTEL's.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

25

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 04/04/98 Time: 03:25 AM (PM) (Circle One)

CSR Name: Francisco Cassio Badge #:

Customer Name: Ramos, Ernesto BTN: 305-625-9724

Address: 17059 NW. 56 CT Apt.#:

City: Opa Locka ST: FL ZIP: 33055 INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust claim never req. GTE(L).

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

24349

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4

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Todny's Date: 4/4/98 Time: 1056 (AM) PM (Circle One)

CSR Name: Naomi Ramos Badge #:

Customer Name: Iglesias, Aurora BTN: 305-649-9668

Address: 1850 NW Flagler Ter 6 Apt.#:

City: Miami ST: FL ZIP: 33125 INT? OOT? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu complaining about being switch over without there authorization, at cu req to cncl Services immediately.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

24350

3

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-3-98 Time: 10:55 (AM) PM (Circle One)

CSR Name: Romelia Aza Badge #: _____

Customer Name: Consuelo Ruiz BTN: (305) 444 0242

Address: 4801 NW. 7st 504 Apt.#: _____

City: Miami H. ST: [redacted] ZIP: 33126 INT? (OOT?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer did not request change, please Cancel ASAP

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

24351

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93

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 4/3 **Time:** 9:08 **AM** (PM) **(Circle One)**

CSR Name: Don Serrano **Badge #:**

Customer Name: NELSA LOPEZ **BTN:**

Address: 1910 NW. FLAGLER TR **Apt.#:** 3

City: MIAMI **ST:** FL **ZIP:** 33125 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust req change to GTG w/o authorization.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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83

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 04/03/98 **Time:** 03:10 **AM** (PM) **(Circle One)**

CSR Name: Francisco Cossio **Badge #:** _____

Customer Name: Granda Lidia **BTN:** 305-541-1737

Address: 520 SW. 14 Ave. **Apt.#:** _____

City: Miami **ST:** FL **ZIP:** 33155 **INF?** (QQF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust claim was change with out reg.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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82

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/3 **Time:** 7:42 **AM** (PM) **(Circle One)**

CSR Name: Dan Serrachilla **Badge #:** _____

Customer Name: MINERVA ALMANZA **BTN:** 305-247-1925

Address: 221 SE. 6 AVE **Apt.#:** 204

City: HOMESTEAD **ST:** FL **ZIP:** 33030 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust. was change to GTE w/o authorization

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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85

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-3-98 **Time:** 4:50 **AM PM (Circle One)**

CSR Name: Laura Arreola **Badge #:** _____

Customer Name: Carmen Ramos **BTN:** 305-826-4568

Address: 6215 W. 20 ave. **Apt.#:** _____

City: Hialeatt **ST:** Fl. **ZIP:** 33010 **INF? OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust. was changed to GTEL'S w/o authorization

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

67

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 4-3-98 **Time:** 2:27 **AM** (PM) **(Circle One)**

CSR Name: Melecio Alvarez **Badge #:** _____

Customer Name: Irene Suarez **BTN:** (305) 661-6496

Address: 6635 SW 45 St **Apt.#:** _____

City: Miami **ST:** FL **ZIP:** 33155 **INF?** ~~OOP?~~ **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

PROBLEM: (Pls. be very specific and describe thoroughly.)

cust wants to Cancel because
They never request GTELD

RESEARCH: (For Customer Service Use Only)

Solar

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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57

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/3 Time: 8:11 (AM) PM (Circle One)

CSR Name: Jose Peña Badge #:

Customer Name: Deleon, Walter BTN: (305) 242-5085

Address: 40 NE 13 ST Apt.#:

City: Homestead ST: Fl. ZIP: 33030 INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: (ESCALATION NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cus. did not req ser. was upset that she received letter saying she will be switched

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

58

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-3-98 Time: 8:17 ~~AM~~ PM (Circle One)

CSR Name: Melecio Alvarez Badge #:

Customer Name: Casas, Jose BTN: 305-554-0098

Address: 9337 SW 35st Apt.#:

City: Miami ST: FL ZIP: 33165 INF? ~~OOE~~?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu wants to cancel because she never Request GTELD ASAP

RESEARCH: (For Customer Service Use Only)

Solar

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

45

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/3/98 Time: 10:26 (AM) PM (Circle One)

CSR Name: LUIS HENDERSON Badge #: 180/S

Customer Name: SANCHEZ MANUEL BTN: 305 828 3258

Address: 780 W 70 PL Apt.#:

City: HIALEAH ST: FL ZIP: 33014 INF/ (OOE?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CST NEVER REQ GTE LD. W/ LOAD ORDER IN SOLAR. BY TYCTX2 03 31 98 11.37

THIS IS SNYDER CST.
PLEASE CANCEL A.S.A.P.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

52

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 04-03-98 Time: 1:35 AM (PM) (Circle One)

CSR Name: Angel Garcia Badge #: CSC

Customer Name: Ferreiro Carmen BTN: 305 866 3951

Address: 6545 Indian Creek 302 Apt.#:

City: Miami Beach ST: FL ZIP: 33141 INP? (OOE)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust was changed to GTE without his/her Permision Cust Req Cancelation of The Order.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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42

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-3-98 Time: 9 40 (AM) PM (Circle One)

CSR Name: Romelia Aza Badge #:

Customer Name: Juan P Olivia BTN:

Address: 422 SW 132 Ct Apt.#:

City: Miami FL ST: FL ZIP: 33175 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

did not authorize switch please cancel LD

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

41

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/3/98 Time: 10:42 (AM) PM (Circle One)

CSR Name: Sonia Estrada Badge #:

Customer Name: Jose Prieto BTN: 305-6877668

Address: 541 E 58 ST Apt.#:

City: Hialeah ST: FL ZIP: 33013 INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Costomer call to cancel 6TELD cost never req. service cu like be cancel 6 inmetly.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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37

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 1/3/98 Time: 9:29 (AM) PM (Circle One)

CSR Name: Sonia Estrada Badge #: _____

Customer Name: Efrain Chavez BTN: 305 827 8655

Address: 1325 W. 68 ST 220 Apt.#: _____

City: Hialeah ST: FL ZIP: 33014 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust call to cancel GTECD never req service. like be cancel inmenty

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

24363

13

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/3/98 Time: 3:25 AM (PM) (Circle One)

CSR Name: Lois Henderson Badge #: CSC/S

Customer Name: Willian Rocha BTN: 305 225 9436

Address: 10001 W Flagler ST H 809 Apt.#:

City: Miami ST: FL ZIP: 33174 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

He Never Req. no G,TELD please.
Do an O/Order. In Solar.
Thank You.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

24364

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 04-03-98 Time: 12:00 AM (PM) (Circle One)

CSR Name: Anyel Garcia Badge #: CSC

Customer Name: Martinez Hector BTN: 3055588878

Address: 7792 w. 14 Ave. Apt.#:

City: Hialeah ST: FL ZIP: 33010 INF? (YES) NO
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

cust ows changed without his permision cust
Req cancelation of the order

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

24365

26

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 04-03-98 Time: 12:35 AM (PM) (Circle One)

CSR Name: Mary Garcia Badge #: CSC

Customer Name: Borrell, Amelia BTN: 305 887 9218

Address: 578 SE 7 St Apt.#:

City: Hialeah ST: FL ZIP: 33010 INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust was charged to GTE without her
Permisson cust Req cancelation.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

24366

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17

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/3/98 Time: 9:50 (AM) PM (Circle One)

CSR Name: Naomi Ramos Badge #:

Customer Name: America Colina BTN: 305 823-7838

Address: 777 W 39th PL Apt.#:

City: HLH ST: FL ZIP: 33024 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu was Swith over w/out her Author,
She has AT&T Serv NOT willing to
Pay GTE Serv

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

24367

16

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 04-03-98 Time: 3:50 AM (PM) (Circle One)

CSR Name: Angel Garcia Badge #: CSC

Customer Name: Seguí, Mario BTN: 305 887 3548

Address: 302 W. 16 St. Apt.#:

City: Hialeah ST: FL ZIP: 33010 INT? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust was changed to GTE without his/her Permision Cust Req Cancelation of The Order.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

24368

1

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-3-98 **Time:** 2:30 **AM (PM)** (Circle One)

CSR Name: Romelia Arr **Badge #:** _____

Customer Name: Otto Lopez **BTN:** 305-884-2887

Address: 2745 Okeechobee **Apt.#:** _____

City: Hialeah **ST:** FL **ZIP:** 33010 **INF? OOF?** (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Please cancel LD did not authorize change

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

51

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/2/98 **Time:** 3:18 **AM (PM)** (Circle One)

CSR Name: Rhonda Valenzuela **Badge #:** CSC / Project 5

Customer Name: Mario Oliva **BTN:** (305) 822 9238

Address: 1750 W 46 ST **Apt.#:** 405

City: Hialeah **ST:** FL **ZIP:** 33012 **INF? OOF?** (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer was switched to GTECC. He never asked to be switched & wants the order to be canceled

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

24370

-6

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/2/98 Time: 4.05 AM (PM) (Circle One)

CSR Name: Brenda Velazquez Badge #: CSC/Project 5

Customer Name: CARLOS DIAZ BTN: (305) 827-9718

Address: 1116 W 39 TER Apt.#:

City: HIALEAH ST: FL ZIP: 33012 INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer was switched to GTLD and never asked for the service. He wants the order cancelled

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

83

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/2 Time: 9:00 AM (PM) (Circle One)

CSR Name: MICHAEL FITZGERALD Badge #: CSC

Customer Name: RICARDO MARAVILLA BTN: 305-248-1358

Address: 305 NW 2 AVE. 206 Apt.#:

City: HOMESTEAD ST: FL ZIP: 33030 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

THE caller was switched to GTELD w/o consent and wanted to be switched back to his previous carrier

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

10

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 04-02-98 Time: 1:45 AM (PM) (Circle One)

CSR Name: Aryel Garcia Badge #: CSC

Customer Name: Victoria Hernandez BTN: 305 884 1771

Address: 6055 w. 19 Ave 418 Apt.#:

City: Hialeah ST: FL ZIP: 33012 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

cust was charged without her permision
cust req cancelation of order.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

JD

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 04-02-98 Time: 4:15 AM (PM) (Circle One)

CSR Name: Mayra Garcia Badge #: CSC

Customer Name: Maria Mieres BTN: 305 823 3548

Address: 16501 W. 56 St A203 Apt.#:

City: Hialeah ST: FL ZIP: 33012 INF? (OF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

cust was charged to GTE without their permission
cust REQ cancellation of order.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

24374

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(a)

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/2/98 Time: _____ AM PM (Circle One)

CSR Name: David Arrol Badge #: _____

Customer Name: Alvarez Angel BTN: 3052857713

Address: 261 SW 12 ST Apt.#: 10

City: Miami ST: FL ZIP: 33130 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Custome complaining being Switch Company.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

73

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 04-02-98 Time: 9:00 (AM) PM (Circle One)

CSR Name: Angel Garcia Badge #: CSC

Customer Name: Leonardo Franco BTN: 305 644 3256

Address: 2473 SW 14st Apt.#:

City: Miami ST: FL ZIP: 33145 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust was changed to STE without his permission
Cust Req cancelation of order.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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74

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/2/98 Time: 2:50 AM (PM) (Circle One)

CSR Name: Naomi Ramos Badge #: _____

Customer Name: Lucia Cener BTN: 305 326-0498

Address: 1792 NW 18 Ter Apt.#: _____

City: Miami ST: FL ZIP: 33125 INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu Call Complaining that is Number not hers, She never asked to be Switch over. Wrong # 305-326-0498 Her # is 305-326 0497

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

CF

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/2/98 Time: _____ AM (PM) (Circle One)

CSR Name: David Badge #: _____

Customer Name: Camacho Norka BTN: 305 245 4791

Address: 30600 SW 153rd Ave Apt.#: _____

City: Homestead ST: FL ZIP: 33030 INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer complains about Sprint
+ Im company

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

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47

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/8/98 Time: 3:20 AM (PM) (Circle One)

CSR Name: Flavio Arruda Badge #:

Customer Name: OSCAR Sanchez BTN: 305 552 1478

Address: 13361 SW 211 LN Apt.#:

City: Miami ST: FL ZIP: 33175 INT? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer complaining, Switching FTN to other company.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

24379

42

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/2/98 **Time:** 5:20 **AM** (PM) (Circle One)

CSR Name: Brenda Valenzuela **Badge #:** CSC Pear S

Customer Name: Diego Cabrera **BTN:** 305 598 5348

Address: 9325 SW 117TH AVE **Apt.#:**

City: Miami **ST:** FL **ZIP:** 33186 **INF?** (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer doesn't want service with GTE He was switched and wants order to be canceled.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

24380

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35

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/2 Time: 8:30 AM (PM) (Circle One)

CSR Name: MICHAEL FITZGERALD Badge #: CSC

Customer Name: GERALDO C. GALAN BTN: 305-854-1176

Address: 1118 SW 9T Apt.#: REAR

City: MIAMI ST: FL ZIP: 33130 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Caller was switched to GTELD w/o knowledge and wanted to be switched back to his previous carrier

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

24381

CUSTOMER COMPLAINT 24

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/2/98 Time: 2:16 AM (PM) (Circle One)

CSR Name: Naomi RAMOS Badge #:

Customer Name: David Padron BTN: 305-548 3823

Address: 433 SW 4 St Apt.#:

City: Miami ST: FL ZIP: 33130 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cx Was Switch W/out his Consent
Ord Ords, Or Acct.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

2

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/2 Time: 2:25 AM (PM) (Circle One)

CSR Name: Jose Peña Badge #:

Customer Name: Rene Rodriguez BTN: 305-558-4682

Address: 1714 W 80 St Apt.#:

City: HIALEAH ST: Fl ZIP: 33014 INF? (OOP?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cus was upset that someody placed order for him. He does not need service of Long Distance.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT 25

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/2 Time: 9:15 (AM) PM (Circle One)

CSR Name: Jose Reina Badge #:

Customer Name: MORAGA, Julio BTN: 305-248-1837

Address: 15631 SW 296th st Apt.#:

City: HMSD ST: Fl ZIP: 33033-2643 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: (ESCALATION NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cus claimed she did not req LD, she has no need for it.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

12

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-2-98 Time: 7:45 (AM) PM (Circle One)

CSR Name: Naomi Ramos Badge #:

Customer Name: Herminia Ruiz BTN: 407-324-3485

Address: 99 Fort Smith BLVD Apt.#:

City: Deltona ST: FL ZIP: 32738-9233 INF? (QOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CE didn't asked to be switch over, exec order

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

15

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-2-98 Time: 2:13 AM (PM) (Circle One)

CSR Name: Melecio Alvarez Badge #:

Customer Name: Ramon Monzon BTN: (305) 642-5568

Address: 3170 SW 8 ST Apt.#: B205

City: Miami ST: Fl ZIP: 33135 INF? ~~(NOT)~~
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust wants to Cancel never Request GTE LD

RESEARCH: (For Customer Service Use Only)

Solar

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

18

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-2-98 Time: 10:19 AM PM (Circle One)

CSR Name: Melecio Alvarez Badge #:

Customer Name: Maria Martinez BTN: (941) 352-6817

Address: 4401 17 Pl SW Apt.#:

City: Naples ST: FL ZIP: 34116 INF? OOE?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust never Req GTELD so she wants to cancel

RESEARCH: (For Customer Service Use Only)

Solar

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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8

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/11/98 **Time:** 8:29 (AM) PM (Circle One)

CSR Name: Naomi Ramos **Badge #:** _____

Customer Name: Piller, Darin **BTN:** 305 953 0340

Address: 15320 NW 32 PL **Apt.#:** _____

City: Miami **ST:** FL **ZIP:** 33055 **INF?** (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu call to canc serv she never req GTE serv. Refuse to pay Bill

RESEARCH: (For Customer Service Use Only)

Payment Due

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

24388

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2

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: MAY 12, 98 **Time:** 8:34 (AM) PM (Circle One)

CSR Name: JOSE PEÑA **Badge #:** _____

Customer Name: Benjamin Velazquez **BTN:** 305-382-3150

Address: 14611 SW 88 St L 304 **Apt.#:** _____

City: Miami **ST:** FL **ZIP:** 33186 **INF? OOF?** (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cus did not req serv but was still being billed

RESEARCH: (For Customer Service Use Only)

I order in Solar

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

3

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/12 **Time:** 8:42 (AM) PM (Circle One)

CSR Name: Jose Peña **Badge #:**

Customer Name: Maria Gonzalez **BTN:** (305) 856-4220

Address: 460 SW 7st **Apt.#:** 4

City: Miami **ST:** FL **ZIP:** 33130 **INF?** (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

cus did not req serv
does not want serv

RESEARCH: (For Customer Service Use Only)

QMF ; S Pending

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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4

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5-10-98 Time: 11:37 (AM) PM (Circle One)

CSR Name: Celia Davalos Badge #:

Customer Name: Juan Acosta BTN:

Address: 1925 NW 28 St 7 Apt.#:

City: Miami ST: Fl ZIP: 33142 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CUS NEVER Req SERV
Credit account cant. Bars

RESEARCH: (For Customer Service Use Only)

I Order Solar
But California K

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

10

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/9/98 **Time:** 6:20 **AM** (PM) **(Circle One)**

CSR Name: Francisco 08510 **Badge #:** _____

Customer Name: Pernas Gilberto **BTN:** 305 887 3287

Address: 1535 W 1st Ave **Apt,#:** _____

City: Hialeah **ST:** FL **ZIP:** 33012 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust never req. GTE LD.

RESEARCH: (For Customer Service Use Only)

Solar I order 5/4/98
OMF Active 5/7/98

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

9

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/9/98 **Time:** 6:10 **AM** (PM) **(Circle One)**

CSR Name: Francisco Cossio **Badge #:** _____

Customer Name: Artiles Alejandrina **BTN:** 305 672 8901

Address: 628 Lenox **Apt.#:** _____

City: Miami Beach **ST:** FL. **ZIP:** 33139 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust claim never req GTEL

RESEARCH: (For Customer Service Use Only)

QMF Deative 4/6/98
Solar F order 3/26/98
Bill 3.49 due date May 25/98.

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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3

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/9/98 Time: 4:10 AM (PM) (Circle One)

CSR Name: Francisco Cossio Badge #:

Customer Name: Simon Pedro BTN: 305 691 0211

Address: 3521 E 8 ct Apt.#:

City: Hialeah ST: Fl. ZIP: 33010 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu claim never req GTECC

RESEARCH: (For Customer Service Use Only)

Solar I order 4/27/98
(Q) M F Active 4/30/98

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

50

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5-8-98 Time: 3 47 AM (PM) (Circle One)

CSR Name: DAVID Badge #:

Customer Name: ESTEBAN) BLANCO BTN: 305-884-6230

Address: 180 E 6 ST Apt.#:

City: HIALEAH ST: FL ZIP: 33010 4889 INF? (OOF) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cst never auth. gave CR for $3.87 CR. Canceled service and gave CR.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/8 Time: 4:28 AM (PM) (Circle One)

CSR Name: Dan Seradilla Badge #:

Customer Name: ELISEO BLANCO BTN: 305-438-0756

Address: 3333 NW. 6 ST Apt.#:

City: MIAMI ST: FL ZIP: 33127 INF? (OOE?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust was charged to GTE w/o authorization

RESEARCH: (For Customer Service Use Only)

I order 5/4/98

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

43

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5-8-98 Time: 9:36 (AM) PM (Circle One)

CSR Name: Naomi Ramos Badge #: CSC

Customer Name: Reynol Magarok BTN: (305) 888 5791

Address: 940 W 29 st Apt.#:

City: Hialeah ST: FL ZIP: 33012 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Never requested GTE, Please cancel order

RESEARCH: (For Customer Service Use Only)

OOF - Pending Solar I order

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/8 Time: 1:47 AM (PM) (Circle One)

CSR Name: Jose Pena Badge #: CSC

Customer Name: Rosario Falcon BTN (305) 635 3620

Address: 7923 NW 22 Av Apt.#:

City: Miami ST: FL ZIP: 331426075 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

cus did not req ser. asked me where we got her info

RESEARCH: (For Customer Service Use Only)

QMF is Active

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: MAY 8, 98 Time: 2:12 AM (PM) (Circle One)

CSR Name: Jose Perea Badge #:

Customer Name: Rosario Banegas BTN: 305 823-2660

Address: 6680 W 2 Ct 309 Apt.#:

City: Hialeah ST: FL ZIP: 33012 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

cus did not req serv wants to know ~~be~~ who switched her

RESEARCH: (For Customer Service Use Only)

QMF is Active

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

24400

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/8/98 Time: 7:41 AM (PM) (Circle One)

CSR Name: Sonia Estrada Badge #:

Customer Name: Yusbeli Chasin BTN: 305-621 6879

Address: 4030 Apt.#:

City: OPA LOCKA ST: FL ZIP: 33055 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust call to cancel GTELD did not req. service would like be cancel $ she do not pay bill ados If she dont pay she will recd block on her line she said just cancel. I wont pay $ hung up on me.

RESEARCH: (For Customer Service Use Only)

QWF - 3/25/98 Deactivd.
Solar - with total $ later
MSOS - bill For

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/8/98 Time: 1:15 AM (PM) (Circle One)

CSR Name: Delia Mars Badge #: GSC

Customer Name: Isela Cortez BTN: 305-448-3730

Address: 1560 NE 158 ST Apt.#:

City: Miami ST: FL ZIP: 33162 INF? (OOF)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

cust recive a bill from GTELD But she never request GTELD so she wants To Cancel ASAP

RESEARCH: (For Customer Service Use Only)

I order in Solar

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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18

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5-8-98 Time: 1:40 AM PM (Circle One)

CSR Name: Melecio Alvarez Badge #:

Customer Name: De la Nuez, Roland BTN: (305) 856-3940

Address: 2520 SW 18 ST Apt.#:

City: Miami ST: FL ZIP: 33145 INF? OOP?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust recive a bill from us and she is real upset because she never request GTELD so she wants to cancel ASAP

RESEARCH: (For Customer Service Use Only)

I order in Solar got a bill in MSOS cal con

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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15

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/8/98 **Time:** _____ **AM PM (Circle One)**

CSR Name: Sonia Estrada. **Badge #:** _____

Customer Name: Maria Garcia **BTN:** 305.822 0856

Address: 251 E. 251 E. 41 ST **Apt.#:** _____

City: Hialeah **ST:** FL. **ZIP:** 33013 **INF? OOF?** (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer call to cancel GTELD did not req. service
would like be cancel.

RESEARCH: (For Customer Service Use Only)

OMF - Restrict 4/29/98.
Solar - I order with total $ Inter
MSOS - no info found.

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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1

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/8 Time: 8:30 (AM) PM (Circle One)

CSR Name: Dan Serradilla Badge #:

Customer Name: EDUARDO NUÑEZ BTN: 305 - 861 - 6256

Address: 7545 E. TREASURE DR Apt.#:

City: MIAMI ST: FL ZIP: 33141 INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust. was charge to GTE w/o authorization. Cust does not want to pay a single penny. Also she wants to sue GTE for charging her LD w/o authorization

RESEARCH: (For Customer Service Use Only)

Bill for 161.48 II I order 2/20/98

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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4

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date:_____ Time:_____ AM PM (Circle One)

CSR Name: Romelia Aza Badge #:_____

Customer Name: Jaun Diaz BTN: 305-551-1457

Address: 9725 Fontainebleu Blvd. Apt.#:_____

City: Miami ST: FL. ZIP: 33172 INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cus was switched w/o auth.
would like to cancel.

RESEARCH: (For Customer Service Use Only)

Cust has T. order in Solar
and pending in QMF.

RETURN CALL TO CUSTOMER

BY WHOM:_____ DATE:_____ TIME:_____

COMMENTS:_____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5-7-98 Time: 9:45 (AM) PM (Circle One)

CSR Name: Naomi Ramos Badge #: CSC

Customer Name: Mrs. Echevarria BTN: (305)6310586

Address: 11646 SW 7 St Apt.#: B2

City: Miami ST: FL ZIP: 33135 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Never requested our service. Please Cancel.

RESEARCH: (For Customer Service Use Only)

No Payment due. - QMF Disct.

RETURN CALL TO CUSTOMER

BY WHOM:_____ DATE:_____ TIME:_____

COMMENTS:_____

93

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5-7-98 Time: 9:47 (AM) PM (Circle One)

CSR Name: Naomi Ramos Badge #: CSC

Customer Name: Juan Caraballo BTN: 305-519 0925

Address: 2583 W 70 PL Apt.#:

City: Hialeah ST: FL ZIP: 33016 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Never requested GTE serv. Please cancel.

RESEARCH: (For Customer Service Use Only)

QmF Pend

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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83

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 05/07/98 Time: 9:30 AM (PM) (Circle One)

CSR Name: Flavio Arreola Badge #: c 5 c apt-5-

Customer Name: Fernandez Leonides BTN: 305-888-7361

Address: 283 E. 8 St. Apt.#:

City: HIALEAH ST: FL ZIP: 33010 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Costumer did not want to change L/D company and that is what he told the representatives on the street.
He want to cancel.

RESEARCH: (For Customer Service Use Only)

"I" order in solar

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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82

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5-7-98 **Time:** _____ **AM** (PM) **(Circle One)**

CSR Name: Irma Miramontes **Badge #:** _____

Customer Name: Dulce Rodriguez **BTN:** 305-266-6532

Address: 2200 SW 57 Ave **Apt.#:** _____

City: Miami **ST:** FL **ZIP:** 33155 **INF?** (QOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust claimed she was switched w/o auth. The cust doesn't have Ites TV anymore.

RESEARCH: (For Customer Service Use Only)

QMF - Order Pending

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/7/98 Time: 2:45 AM (PM) (Circle One) ✓

CSR Name: Delia Mora Badge #: CSC

Customer Name: Amenda, Manuela BTN: 305-442-2417

Address: 4400 SW 2 St. Apt.#:

City: Miami ST: FL ZIP: 33134 INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust never req GTELD. Does please cancel
As Soon as possible.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

72

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/7/98 Time: 1:38 AM (PM) (Circle One)

CSR Name: Naomi Ramos Badge #: CSC

Customer Name: Alejandro Baez BTN: (305) 325-4078

Address: 1046 NW 3 st Apt.#: E

City: Miami ST: FL ZIP: 33128 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Never requested GTE
Please cancel

RESEARCH: (For Customer Service Use Only)

Payment Due - Solar

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 05-07-98 Time: 3:05 AM (PM) (Circle One)

CSR Name: Celia Davalos Badge #:

Customer Name: Luis Gomez BTN: 305-820-6657

Address: 5182 C4 Ave Apt.#:

City: Hialeah ST: FL ZIP: 33013 INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cus Never Req Serv - Cancel Ordr

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5-8-98 Time: 2:39 AM (PM) (Circle One)

CSR Name: Celia Davalos Badge #: _____

Customer Name: Gloria Hernandez BTN: 407 295 2349

Address: 8833 Lamour Dr Apt.#: _____

City: Orlando FL ST: FL ZIP: 32817 INF? ~~ODF?~~ (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CUS NEVER REQ SERV

RESEARCH: (For Customer Service Use Only)

BILL- California Cont

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

24414

69

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 05/07/98 Time: 3:14 AM (PM) (Circle One)

CSR Name: Celia Davalos Badge #:

Customer Name: Lusian Quintana BTN: 305 6914739

Address: 8151 NW 27 Av Apt.#:

City: Miami ST: FL ZIP: 33147 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CUS NEVER REQ SERV
~~CANCEL~~

RESEARCH: (For Customer Service Use Only)

I

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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60

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5.7.98 **Time:** 4:19 **AM** (PM) **(Circle One)**

CSR Name: Brenda Valenzuela **Badge #:** Project S

Customer Name: CERDA, RAMON **BTN:** 305-271-3178

Address: 9701 SW 77th AVE **Apt.#:** 22

City: MIAMI **ST:** FL **ZIP:** 33156 **INF? OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer never requested service.
Wants ads to be cncld ASAP.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

24416

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/12/98 Time: 9:57 (AM) PM (Circle One)

CSR Name: Sonia Estrada. Badge #: CSC

Customer Name: Manuel Sanchez BTN: 305-8283258

Address: 780 W. 70 PL Apt.#:

City: Hialeah ST: FL ZIP: 33014 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Costomer call to vfryd why is been rcvd bill Frm GTECO he do not req. service $ would like be cancel also cost refuse to pay any bill

RESEARCH: (For Customer Service Use Only)

QME - Restrictas 4/01/98
Solar - I order with total $ Inter plus
nm 505 - he was bill for $ 1.33

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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41

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/7/98 Time: 12:50 AM (PM) (Circle One)

CSR Name: Luis Henderson. Badge #: CSC/9

Customer Name: Victor Ricardo BTN: 305-232-0653.

Address: 19505 SW. 119 Ter Apt.#:

City: Miami ST: FL ZIP: 33177 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cst. Very upset bc he never auth. To be switch to GTE.N. please cancel now. he have receive a letter from. are Company Said welcome to GTE.N he is happy w/ GTE

RESEARCH: (For Customer Service Use Only)

Ord. is pending Sylvr. I order.

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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39

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5-7-98 Time: 1:41 AM (PM) (Circle One)

CSR Name: DAVID Badge #: ~~305 234 3497~~

Customer Name: RIERA, ERNESTO BTN: 305-234 3497

Address: 18024 SW 154 AVE Apt.#:

City: MIAMI ST: FL ZIP: 33187 INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: (ESCALATION) NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cst did ~~auth~~. But Chan not auth. canceled service and HAS NOT yet received her bill.

RESEARCH: (For Customer Service Use Only)

SBLAR- 135MSDSI 5/6/98 15:55 CME. MISES.

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5-7-98 Time: 5:33 AM (PM) (Circle One)

CSR Name: Mike Fitzgerald Badge #:

Customer Name: Rosa Jimenes BTN: (305) 693 0631

Address: 545 E. 27 ST Apt.#:

City: Hialeah ST: FL ZIP: 33013 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

cust was switched w/o Auth. Does not want serv. CUST wants order cancel

RESEARCH: (For Customer Service Use Only)

pending in QMF (5-7-98)
TI Order in Solar

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

12

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/7/98 Time: 1:43 AM (PM) (Circle One)

CSR Name: Sonia Estrada. Badge #:

Customer Name: Maria Ibarra. BTN: 941-48/9857

Address: 18488 Holly Rd. Apt.#:

City: Fort Myers ST: FL ZIP: 33912 INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer call to cancel GTECC did not req service would like be cancel immfly.

RESEARCH: (For Customer Service Use Only)

QUNF- Pending 5/6/98
solar - I order with Total B inter plan
msos no info

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

24421

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/7/98 Time: 2:34 AM (PM) (Circle One)

CSR Name: Sonia Estrada Badge #:

Customer Name: Gilberto Roiz BTN: 305 3852742

Address: 14767 SW. 65 TER. Apt.#:

City: Miami ST: FL ZIP: 33193 INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust call to cancel GTECO did not req.
service would like be cancel.

RESEARCH: (For Customer Service Use Only)

I order by solar.
INSOS - no INFO
QUIF -

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

6

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5/7/98 Time: 12:42 AM (PM) (Circle One)

CSR Name: Lois Henderson Badge #: CSC/9

Customer Name: Alegria Juan BTN: 305-754 9531

Address: 10774 NE 4th Ave Apt.#:

City: Miami ST: FL ZIP: 33161 INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cst. ~~have~~ never Req. GTECD, he receive a letter said That ~~she~~ he don't wanted GTECD. please Cancel. bec, he will not paid any bills.
Cancel. A.S.A.P

RESEARCH: (For Customer Service Use Only)

Solar: "I" Order by T4CRXG5
Since 4/25/98 AT 18:19
Qmf he's E = (A) MSOS bill for - 4.41
A = P credit

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 6/3/98 Time: 7:44 AM (PM) (Circle One)

CSR Name: Elizabeth Medellin Badge #: CSC

Customer Name: Maribel Carbajal BTN: 941-355-5026

Address: 3826 Carolina AV Apt.#: —

City: Sarasota ST: FL ZIP: 34234 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust asked to be cancled, did not ask for GTE ID Srv.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 7/7/98 **Time:** 10:15 (AM) PM (Circle One)

CSR Name: _____ **Badge #:** _____

Customer Name: DOROTHY CLEMENS **BTN:** 954-735-8669

Address: APT Y-202 2700 SOMERSET DR **Apt.#:** _____

City: FORT LAUDERDALE **ST:** FL **ZIP:** 33311 **INF? OOF?** (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CLF WAS SWITCHED TO GTELD WITHOUT AUTHORIZATION.
SHE WANTS TO KNOW WHO SWITCHED HER

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

24425

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date:_____ **Time:**_____ **AM PM (Circle One)**

CSR Name: Romelia Aza **Badge #:**_____

Customer Name: Virgilio Fernandez **BTN:** 305-264-9335

Address: 1100 SW. 73 Ave **Apt.#:**_____

City: Miami **ST:** FL **ZIP:** 33144 **INF? OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

customer was switched w/o auth.
would like to cancel.

RESEARCH: (For Customer Service Use Only)

cus is active in Solar
and also in QNT

RETURN CALL TO CUSTOMER

BY WHOM:_____ **DATE:**_____ **TIME:**_____

COMMENTS:_____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5-13-98 **Time:** 12:29 **AM** (PM) **(Circle One)**

CSR Name: Naomi Ramos **Badge #:** CSC

Customer Name: Jorge Aldama **BTN:** (813) 719 7749

Address: P.O. Box 333 **Apt.#:**

City: Sydney **ST:** FL **ZIP:** 338-0333 (INF) **OOF?**
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu never req serv. Please cancel

RESEARCH: (For Customer Service Use Only)

Sorces - No Payment Due

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5-13-98 **Time:** 3:29 **AM** (PM) **(Circle One)**

CSR Name: Maggie Esparza **Badge #:**

Customer Name: Wilfredo Silva **BTN:** (305) 513-0787

Address: 11266 NW 59 Ter **Apt.#:**

City: Miami **ST:** FL **ZIP:** 33178 **INF? OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

cust never req serv. Switch w/o Auth
CU req to cancel service

RESEARCH: (For Customer Service Use Only)

1 order in Solar 3-19-98

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5.13.98 **Time:** 5:58 **AM (PM)** (Circle One)

CSR Name: Brenda Valenzuela **Badge #:** Project S

Customer Name: GARZA, RITA **BTN:** 956-519-3521

Address: P.O. Box 65 **Apt.#:**

City: LA JOYA **ST:** FL **ZIP:** 78560 **INF? (OOF?)** (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer never requested service
Cancel ASAP.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5-13-98 **Time:** 708 **AM** **PM** **(Circle One)**

CSR Name: ~~Kel~~ Maggie Esparza **Badge #:** _____

Customer Name: Klermo E Alvarado **BTN:** 305 261 2464

Address: 8095 NW 8 ST **Apt.#:** 305

City: Miami **ST:** FL **ZIP:** 33126 **INF? OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

~~Geb~~ a CU switchd w/o Auth. Didn't Req service. CU req to cancel order

RESEARCH: (For Customer Service Use Only)

I order in SOLAR

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

Docket No. 990362-TI
Exhibit REP-18
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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5-13-98 **Time:** 3:29 **AM** (PM) **(Circle One)**

CSR Name: Maggie Esparza **Badge #:**

Customer Name: Wilfredo Silva **BTN:** (305) 513-0787

Address: 11266 NW 59 Ter **Apt.#:**

City: Miami **ST:** FL **ZIP:** 33178 **INF? OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (**NOT NEEDED**)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

cust never req serv. Switch w/o Auth
CU req to cancel service

RESEARCH: (For Customer Service Use Only)

1 order in Solar 3-19-98

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5-13-98 Time: 5:58 AM (PM) (Circle One)

CSR Name: Brenda Valenzuela Badge #: Project 5

Customer Name: GARZA, RITA BTN: 956-519-3521

Address: P.O. Box 65 Apt.#:

City: LA JOYA ST: FL ZIP: 78560 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer never requested service
Cancel ASAP.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 5-13-98 **Time:** 708 **AM** **PM** **(Circle One)**

CSR Name: ~~Kel~~ Maggie Esparza **Badge #:** _____

Customer Name: Klermo E Alvarado **BTN:** 305 261 2464

Address: 8095 NW 8 ST **Apt.#:** 305

City: Miami **ST:** FL **ZIP:** 33126 **INF? OOF?**
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

~~Get~~ a CU switchd w/o Auth. Didn't Req service. CU req to cancel order

RESEARCH: (For Customer Service Use Only)

t order in SOLAR

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 5-15-98 TIME 10:45 (AM) PM

CSR NAME Woody Fox BADGE # 119708

CUSTOMER NAME David Garcia BTN # 9413529904

ADDRESS 2182 Randall Blvd. APT #

CITY Naples ST FL ZIP 34120

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY) ✓
Cust. was pict to GTE without ~~[illegible]~~ Consent. He would like to know how this happened & would like a call back.

SLAMMED

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
WST-CMTF, 2CC, TC, 360 dem 4/09 Eff 4/29

RETURN CALL TO CUSTOMER

BY WHOM _____ DATE _____ TIME _____

COMMENTS _____

24434

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 5-13-98 TIME 445 AM PM X

CSR NAME Jesse Dominguez BADGE # 8704.

CUSTOMER NAME Lisa Temple BTN # 941-746-2092

ADDRESS _____ APT # _____

CITY Bradenton ST FL ZIP 34209

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)

Customer was slammed wants to know who Auth. it. She will call ATT to be switched back.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)

DMSS- ø

RETURN CALL TO CUSTOMER

BY WHOM _____ DATE _____ TIME _____

COMMENTS _____

24435

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE May 11, 1998 TIME _____ AM ___ PM ___

CSR NAME Joseph Vargas BADGE # _____

CUSTOMER NAME Sharon Tillman BTN # 561 394 5786

ADDRESS 1675 NW 4th Avenue APT # 702

CITY Boca raton ST FL ZIP 33432

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY) ✓
Customer claims to have been switched without her authorization. Customer wants some sort of compensation for this change that took place in February.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
DMSS-NJO - No occurrence in 1998 DMSS file; No occurrence in 1997 DMSS file
DMSS -NJO —

RETURN CALL TO CUSTOMER

BY WHOM _____ DATE _____ TIME _____

COMMENTS _____

24436

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE May 20, 1998 TIME _____ AM ___ PM ___

CSR NAME Joseph Vargas BADGE # 1119936

CUSTOMER NAME Lisa Hester BTN # 3058544863

ADDRESS 1428 SW 11th St APT # _____

CITY Miami ST FL ZIP _____

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY) ✓ SLAMMED

Customer was switched without authorization
Customer is upset and wants to know
who changed her and wants credit for calls

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)

DMMS-NIO - No occurance in 1998 DMMS file - No occurance in 1997 DMMS file

RETURN CALL TO CUSTOMER

BY WHOM _____ DATE _____ TIME _____

COMMENTS _____

24437

control K

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

Docket No. 990362-TI
Exhibit REP-18
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TODAY'S DATE 5-11-98 TIME 9:25 (AM) PM

CSR NAME FISHER ANN BADGE # 119144

CUSTOMER NAME RALPH ARDEN BTN # 941-955-5886

ADDRESS 2137 WISTERIA ST. APT #

CITY SARASOTA ST FLA ZIP 34239

PLEASE CIRCLE RESPONSE: NEEDED NOT NEEDED

SLAMMED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)

Customer was changed by a Sprint order, without permission. The only issue actually a secondary billing order. His wife maiden name of Susan Berry.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)

DMSS NID
No DMSS Site!
- No occurance in 1998 DMSS file
- No occurance in 1997 DMSS file

LYN

RETURN CALL TO CUSTOMER

BY WHOM DATE TIME

COMMENTS

24438

check DMSS

10

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

Docket No. 990362-TI
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TODAY'S DATE 5-8-98 TIME 5:45 AM ___ PM ✓

CSR NAME Roberta Vasquez BADGE # 1119304

CUSTOMER NAME Caroline Tonico BTN # (305) 947-786

ADDRESS _____ APT # _____

CITY WPB ST FL ZIP _____

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY) ✓

She refused to give me an address & said she wouldn't be held responsible for anything charged on her phone bill because she never authorized any charges. She wants to know who did w/o her permission.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)

DMSS - NO
deactivated ~~8-98~~ 5-8-98
NO DMSS - Site1
No occurances in 1998 DMSS file
No occurance in 1997 DMSS file

RETURN CALL TO CUSTOMER

BY WHOM _____ DATE _____ TIME _____

COMMENTS _____

24439

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 4/8/98 TIME 10:25 AM ✓ PM ___

CSR NAME Pamela Walker BADGE # 119730

CUSTOMER NAME Thomas K. Sullivan BTN # 8138693857

ADDRESS 13031 Canton St. APT # ___

CITY Hudson ST Fl. ZIP 34669

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)

Customer was slammed on 4/2198. Customer was actually switched away on vacation during this time and no one was home at the time. Customer does want to know how he was switched. Can be reached at his home after this weekend

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)

NO ORDER; No occurances in 1998 DMS file; (1) occurance in 1997 DMS file 9-11-97 - Site 39
A. No Sale

RETURN CALL TO CUSTOMER

BY WHOM ___ DATE ___ TIME ___

COMMENTS ___

24440

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 5-26-98 TIME 2:35 AM ___ PM ✓

CSR NAME Amanda Rodgers BADGE # 87959

CUSTOMER NAME Carrie Bowcock BTN # 813-881-1774

ADDRESS 7102 Springside Ln APT # ___

CITY Tampa ST FL ZIP 33615

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

"SLAMMED" ✓

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)
Customer was switched to GTE without her authorization. She wants to know what happened.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
N/D
DMSS=0

RETURN CALL TO CUSTOMER

BY WHOM ___ DATE ___ TIME ___

COMMENTS ___

24441

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 5/18/98 TIME 5:39 AM__ PM ✓

CSR NAME Christie Contreras BADGE# 87730

CUSTOMER NAME Genara Cruz BTN# 305-827-2614

ADDRESS 365 E 61st St APT #

CITY Hialeah ST FL ZIP 33013

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY) ✓

Customer was slammed from AT+T to GTE US. Please research + find out how this happened. She speaks spanish only + would like for someone to call her back + let her know how this happened. Threatening to sue GTE. She has to have credit issued on her account for charges billed by us. OOF billing is very busy + she refuses to hold any longer. Please ① Get credit on bill
② Change her back to AT+T
③ Call her back.
She is expecting someone to call her back once the matter has been resolved.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)

SNY - TC, 360 intl, ICP 3/06 EFF 4/08

RETURN CALL TO CUSTOMER

BY WHOM _____ DATE _____ TIME _____

COMMENTS _____

10223

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 5-20-98 TIME 2:16 AM PM ✓

CSR NAME W. BURTON BADGE # 87136

CUSTOMER NAME Sheila Wagner BTN # 941-966-7592

ADDRESS 257 Lookout point APT #

CITY Osprey ST FL ZIP 34229

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY) ✓

Customer was slammed and wants to know how this happened and what is going to be done to correct it

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)

No occurrence in 1998 DMS5 file - No occurrence in 1997 DMS5 file DMS5=0

RETURN CALL TO CUSTOMER

BY WHOM DATE TIME

COMMENTS

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 5-18-98 TIME 1:35 AM ___ PM ✓

CSR NAME Roberta Orosco BADGE # 87453

CUSTOMER NAME Lourdes Alamo BTN # 305 3889358

ADDRESS 13953 Kendale Lakes Circle APT # 810-B

CITY Miami ST FL ZIP 33183

PLEASE CIRCLE RESPONSE: NEEDED NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)

This customer would like to listen to tape on PA who authorized switch to GTC from AT&T. Friday 5-15-98 customer was called by AT&T and was asked why she switched from AT&T. Customer never authorized to switch.

Name on Order Jacoba Caamaño
16120 SW 141 Ave
Miami, FL 33177

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)

SNY - TC, 360 intl, ICPTL 4/13 Eff 4/28

RETURN CALL TO CUSTOMER

BY WHOM _____ DATE _____ TIME _____

COMMENTS _____

24444

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 5/18/98 TIME 9:33 AM ✓ PM

CSR NAME Penney Gonzales BADGE # 87724

CUSTOMER NAME Sylvio Meyer BTN # 305-751-7396

ADDRESS 29 N.E. 107th St. APT #

CITY Miami Shores ST FL ZIP 33161

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY) ✓

Customer's LD was switched to GTELD w/o his authorization. So he'd like to know who authorized the change. And he does need to be contacted.

Name on order is Benjamin Laborte
1432 NW 111th St.
Miami, FL 33161

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)

SNY- TC, 360 INTL, ICP 4/30 Eff 5/15

RETURN CALL TO CUSTOMER

BY WHOM _____ DATE _____ TIME _____

COMMENTS _____

24445

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY) 5/9/00

TODAY'S DATE 5-07-98 TIME 11:56 AM ✓ PM __

CSR NAME Brandi BADGE # 87708

CUSTOMER NAME Leon Richard BTN # 954-776-0248

ADDRESS 4721 NorthEast 7th Ave APT # _____

CITY Oakland Park ST FL ZIP 33334

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY) ✓

Customer was switched w/out authorization. Wants to know who switched them and why!

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)

DMSS-SNY-TC,360dom 4/19 Eff 5/05

RETURN CALL TO CUSTOMER

BY WHOM _____ DATE _____ TIME _____

COMMENTS _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 5/5/98 TIME 2:40 AM PM ✓

CSR NAME Amy Sewell BADGE # 88514

CUSTOMER NAME Paula Davis BTN # 305 628 9977

ADDRESS 20224 NW 32nd Ct. APT #

CITY Miami ST FL ZIP 33056

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY) ✓

Ms. Davis' Says she Was Changed to GTE CO without her Permission Wants to Know Why or how it happened. She received a letter and Called Bell South and they did Verify that they received info to Change her to GTE CO

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)

SNY - TC 3600 INTL ICP 4/13 Eff 5/02
Name on order is Paula + Sylvester Aneleke - Samead

RETURN CALL TO CUSTOMER

BY WHOM DATE TIME

COMMENTS

24447

SNY

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 5-4-98 TIME 6:15 AM ✓ PM ___

CSR NAME Richard J Jimenez BADGE # 87244

CUSTOMER NAME PRINCESS BEJACMAR BTN # (305) 573-9183

ADDRESS 44 NW 46th ST APT # ___

CITY Miami ST FL ZIP 33127

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY) ✓
Customer was charged by GTE CD without their permission - Rep spoke to daughter

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
SNY - TC, 300.00M 4/19. EFF 5/04

RETURN CALL TO CUSTOMER

BY WHOM ___ DATE ___ TIME ___

COMMENTS ___

24448

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 5-08-98 TIME 9:24 AM ✓ PM ___

CSR NAME Brandi BADGE # 87708

CUSTOMER NAME Mr. Martin BTN # 954-721-7006

ADDRESS 10525 Northwest 71st St APT # ___

CITY Tamarac ST FL ZIP 33321

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY) ✓

Customer was switched to GTE w/o authoriz-
ation. Please contact him and let him know who
switched him + why!

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)

SNJY-TC, 360 dom 4130 Eff 5/15

RETURN CALL TO CUSTOMER

BY WHOM ___ DATE ___ TIME ___

COMMENTS ___

24449

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY) 5/8/98

TODAY'S DATE 5-07-98 TIME 11:56 AM ✓ PM

CSR NAME Brandi BADGE # 87708

CUSTOMER NAME Leon Richard BTN # 954-776-0248

ADDRESS 4721 NorthEast 7th Ave APT #

CITY Oakland Park ST FL ZIP 33334

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY) ✓ SLAMMED

Customer was switched w/out authorization.
Wants to know who switched them and why!

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)

DMSS-SNY-TC,360dm 4/19 EFF 5/05

RETURN CALL TO CUSTOMER

BY WHOM CP DATE 5/8/98 TIME

COMMENTS Copy to Greer

24450

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 5/5/98 TIME 2:40 AM PM ✓

CSR NAME Amy Sewell BADGE # 88514

CUSTOMER NAME Paula Davis BTN # 305 628 8977

ADDRESS 20224 NW 32nd Ct APT #

CITY Miami ST FL ZIP 33056

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY) ✓ SLAMMED

Ms. Davis' says she was changed to GTE LD without her permission wants to know why or how it happened. She received a letter and called Bell South and they did verify that they received info to change her to GTE LD

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)

SNY - TC 3100 INTL ICP 4/13 - Eff 5/02

Name on order is Paula + Sylvester Aneleke - same add

RETURN CALL TO CUSTOMER

BY WHOM CL DATE 5/6/98 TIME

COMMENTS Copy + yellow

24451

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 5-08-98 TIME 9:24 AM ✓ PM ___

CSR NAME Brandi BADGE # 87708

CUSTOMER NAME Mr. Martin BTN # 954-721-7006

ADDRESS 10525 Northwest 71st St APT # ___

CITY Tamarac ST FL ZIP 33321

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY) ✓ SLAMMED
Customer was switched to GTE w/o authoriz-
ation. Please contact him and let him know who
switched him + why!

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
SNJY-TC,360 dom 4130 Eff 5/15

RETURN CALL TO CUSTOMER

BY WHOM CC DATE 5/11/98 TIME ___

COMMENTS Copy to yvette

24452

SNY

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 5-4-98 TIME 6:15 AM ✓ PM ___

CSR NAME Richard Jimenez BADGE # 87244

CUSTOMER NAME PRINCESS BEJACMAR BTN # (305) 573-9183

ADDRESS 44 NW 46th ST APT # ___

CITY Miami ST FL ZIP 33127

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY) ✓ SLAMMED

Customer was charged by GTE LD without their permission - Rep spoke to daughter

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)

SNY - TC, 3100 DOM 4/19 - Eff 5/04

RETURN CALL TO CUSTOMER

BY WHOM CC DATE 5/5/98 TIME ___

COMMENTS Copy to Lynette

24453

All History

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 5-20-98 TIME 9:00 AM ✓ PM ___

CSR NAME Shirley Seals BADGE # 88264

CUSTOMER NAME Mr. Frantz Jean BTN # 305-759-9783

ADDRESS 749 N.E. 81st. APT # ___

CITY Miami ST Fl. ZIP 33138

"QOF"

PLEASE CIRCLE RESPONSE: NEEDED (NOT NEEDED)

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY) ✓ SLAMMED
Mr. Jean is wondering how his service was placed with GTE L.D. and by Who since he didn't speak with ~~one~~ anyone.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
SNY-TC,1000 3/29 Eff 4/12
~~NO OMSS~~

RETURN CALL TO CUSTOMER

BY WHOM ___ DATE ___ TIME ___

COMMENTS ___

24454

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 5-20-98 TIME 6:25 AM ___ PM ✓

CSR NAME Miguel BADGE # 88730

CUSTOMER NAME Christina Norris BTN # 305 625 6616

ADDRESS 198 37 ~~&~~ NW 65 Port APT #

CITY ~~Port~~ Miami ST FL ZIP 33015

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY) SLAMMED

Customer had AT&T [redacted] but then she was switched to GTELD without her permission. She wants GTELD to re nate her calls and give her credit. She also wants to know who authorized the charge.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY) Not Applicable to RPMS

SNY-ESP 7-7 DC 5/04 Cancelled Process (64)

NO OMSS

RETURN CALL TO CUSTOMER

BY WHOM ___ DATE ___ TIME ___

COMMENTS ___

24455

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 5.21.98 TIME _____ AM__ PM__

CSR NAME FISHER ANN BADGE # 119144

CUSTOMER NAME WINSOME FISHER BTN # 305-891-6549

ADDRESS 1600 N.E. 135 ST APT 909 APT # _____

CITY NORTH MIAMI ST FL ZIP 33181

PLEASE CIRCLE RESPONSE: NEEDED NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY) SLAMMED

CUSTOMER WAS CHANGED TO QTC WITHOUT PERMISSION. ORDER #: 19 FOR TOTAL CALL 360 MIN. SNYDER ORDER

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
Snyder 4/19 TC w/ 360 domestic activate 5-5

RETURN CALL TO CUSTOMER

BY WHOM _____ DATE _____ TIME _____

COMMENTS _____

24456

√

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

SLAMMED

TODAY'S DATE 5/27/98 TIME 9:15 AM (PM)

CSR NAME ~~Marie O'Connor~~ Tonya Stephens BADGE # 8193

CUSTOMER NAME Marie O'Connor BTN # 305 945 9285

ADDRESS 50 N E 146th APT #

CITY Miami ST FL ZIP 33161

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)

She recieves a one time charge for charges completed. This was an unauthorized charge. She want to know why and how this charge occured. This is a computer only line. Please contact her at 305-674-2545 ext 3571. This is her work #

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)

SNY - TC, 360 dom 4/19 EFF 5/05

RETURN CALL TO CUSTOMER

BY WHOM _____ DATE _____ TIME _____

COMMENTS _____

24457

UNAUTHORIZED Switch Escalation

SNY

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 2-03-98 TIME 7:30 (AM) PM

CSR NAME Martha Rosa BADGE # 87405

CUSTOMER NAME Isabella Rezende BTN # 561 487 6707

ADDRESS 11436 Clear Creek Pl APT #

CITY Boca raton ST FL ZIP 33428

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)

Cust was slammed and is very irate, he received the 2 hapt apn letter for changing to GTE. Cust is very irate he did not want anyone from GTE calling him or any of our billmates, there is no verification on his LD service getting switched without his or his wifes consent.

DFAV

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)

RETURN CALL TO CUSTOMER

BY WHOM DATE TIME

COMMENTS

24458

CUSTOMER COMPLAINT FORM-SYNDER
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE: 02-24-98 **TIME:** 537 **AM** (PM) **(Circle One)**

CSR NAME: Natalie Miller

CUSTOMER NAME: Iria Iglesias **BTN:** 305 854-7524

ADDRESS: 900 SW 13 Ave **APT#**

CITY: Miami **ST:** FL **ZIP** 33135 **INF?** (OOF?) **(Circle one)**

PROBLEM: (Please be very specific and describe thoroughly.)

Did not authorize GTE

RESEARCH: (For customer service use only.) 3-6-98

CALL Customer apologies to the Customer. The Customer was satisfied. Please do not call her Back.

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/580-8903

Today's Date: 02/19/98 Time: _____ AM (PM) (Circle One)

CSR Name: Lois Henderson Badge #: CSC "G"

Customer Name: Diaz Alberto BTN: (305) 278-4150

Address: 16198 SW 138CT Apt.#: _____

City: Miami ST: FL ZIP: 33177 INT: (DOM) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

PROBLEM: (Be very specific and describe thoroughly.)

Snyder General Cust. Don't want Gte LD
Never Host

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: Carol DATE: 3-6-98 TIME: _____

COMMENTS: Call Customer apologies to the Customer.
Customer was satisfied.

24460

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 02/19/98 **Time:** _____ **AM (PM)** (Circle One)

CSR Name: Lois Henderson **Badge #:** CSC "S"

Customer Name: Diaz Alberto **BTN:** (305) 278-4150

Address: 16198 SW 138CT **Apt.#:** _____

City: Miami **ST:** FL **ZIP:** 33177 **INP?** (DOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

PROBLEM: (Pls. be very specific and describe thoroughly.)

Snyder General Cust. Don't want GTE LD.
Never Rqst

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

02/24/98 TUE 10:38 FAX 3015718209

021

03/06/98 FRI 15:50 FAX 3015716209

Update Sprint

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 2-26-98 TIME 9:49 AM / PM

CSR NAME Jesse Alonzo BADGE # 67141

CUSTOMER NAME Juan Montano BTN # 305-687-6693

ADDRESS _____ APT # _____

CITY Miami ST FL ZIP _____

SPANISH PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

OOF

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)

Customer was changed to GTE LD on 1/25/98 (TC w/in 10 mins.) He never ordered GTE LD. He is OOF and Speaks Spanish only. SNY took the order.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)

DMSS-TC w/in 10 mins of ICP 1/25 SNY

RETURN CALL TO CUSTOMER

BY WHOM Carol DATE _____ TIME _____

COMMENTS Customer very happy to received a follow up Phone call. Customer Satisfied

24462

-UNAUTH SWITCH

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 2-18-98 TIME 9:49 AM/PM

CSR NAME Jesse Alonzo BADGE # 87141

CUSTOMER NAME Juan Montano BTN # 305-687-6693

ADDRESS _____ APT # _____

CITY Miami ST FL ZIP _____

SPANISH OOF PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)
Customer was changed to GTE LD on 1/25/98 (TC w/360 INT mins.) He never order GTE LD. He is OOF and Speaks Spanish only. SNY took the order.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
DMSS-TC w/ 360 Inter mins & ICP was SNY

RETURN CALL TO CUSTOMER

BY WHOM _____ DATE _____ TIME _____

COMMENTS _____

24463

ONE sheet

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 2-17-98 TIME 5:13 AM PM X

CSR NAME Christina Palma BADGE # 9126

CUSTOMER NAME Minnie Watson BTN # (305)567-9383

ADDRESS 3071 Hibiscus St APT #

CITY Miami ST FL ZIP 33133

PLEASE CIRCLE RESPONSE: NEEDED NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)
She was switched to GTE'd without her permission.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
OMSS-TC w/3600 mins Tale SNY

RETURN CALL TO CUSTOMER

BY WHOM Carol DATE TIME

COMMENTS Call customer, apologies to the customer and was satisfied

24464

-Unauth Switch

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 2-17-98 TIME 5:13 AM__ PM X

CSR NAME Christina Palma BADGE # G126

CUSTOMER NAME Minnie Watson BTN # (305) 567-9383

ADDRESS 3071 Hibiscus St APT #

CITY Miami ST FL ZIP 33133

PLEASE CIRCLE RESPONSE: NEEDED NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)
She was switched to GTE'd without her permission.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
OMSS - TC w/ 360 Miami Hale SNY

RETURN CALL TO CUSTOMER

BY WHOM _____ DATE _____ TIME _____

COMMENTS _____

24465

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-ONE SWITCH

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 2-16-98 TIME 9:32 (AM) PM

CSA

CSR NAME George Chavarria BADGE # 87601

CUSTOMER NAME Leonida Cuadra BTN # 305-225-0638

ADDRESS 10745 S.W. 7th Tierra APT # 45

CITY Miami ST FL ZIP 33174

O.O.E Customer

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)
Customer called in stated she was switched to GTE without her authorization; Customer very upset stated this was an illegal practice and wanted to know who had switched her service. I then called OOF office and customer was switched to GTE by a 3rd Party Group "Snyder General in language," on Jan 24 '98, I relayed this information to the Customer and told her I would have the complaint Dept research the information for her and contact her back with the answers to her questions.

Conversation recorded on TAPE # 82213034 Agent Rep # Gargaks 88407

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
DMSS-ICP, TC WI 3110 INTERMUNS 118 SNY

RETURN CALL TO CUSTOMER

BY WHOM Carol DATE _____ TIME _____

COMMENTS Called customer, apologies to the customer and Satisfied.

24466

UNAUTH SWITCH

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 2-16-98 TIME 9:32 (AM) PM
CSA
~~CSR~~ NAME George Chavarria BADGE # 87601
CUSTOMER NAME Leoncea Cuadra BTN # 305-225-0638
ADDRESS 10745 S.W. 7th Tierra APT # 45
CITY Miami ST FL. ZIP 33174
O.O.F. Customer.

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)
Customer called in stated she was switched to GTE without her authorization. Customer very upset stated this was an illegal practice and wanted to know who had switched her service. I then called OOF office and customer was switched to GTE by a 3rd Party Group "Snyder General in Language," on Jan 26 1998, I relayed this information to the customer and told her I would have the Complaint Dept research the information for her and contacted her back with the answers to her questions.
Conversation recorded on ~~TAPE #~~ 822130134 Agent Ruby Gonzales # 88407.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
DMSS- ICP, TC WI 3100 Inter MUNS '18 SNV

RETURN CALL TO CUSTOMER

BY WHOM _____ DATE _____ TIME _____

COMMENTS _____

24467

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 2-25-98 TIME 305 AM (PM)

CSR NAME George Chavarria. BADGE # 87601

CUSTOMER NAME Mrs. Jesus. Maure. BTN # 305-265-1215

ADDRESS OOF. APT #

CITY MIAMI ST FL ZIP

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)

Unauthorized switched to GTE. She wants to hear the tape recording of confirmation. Snyder General was the tele marketing group that switched her service.

NEED SPANISH REP. TO RETURN HER CALL.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
DMSS-ICP & TC w/ 3WD Intr mins 1123 SNY

RETURN CALL TO CUSTOMER

BY WHOM DATE TIME

COMMENTS

24468

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 2-25-98 TIME 5:35 AM (PM)

CSR NAME W. Burton BADGE # 8713 L

CUSTOMER NAME Bianka Taniga BTN # 305-945-3906

ADDRESS 2821 NE 163 ST APT # 3N

CITY North Miami Beach ST FL ZIP 33160

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)
Customer was changed to GTELD without their knowledge. wants a reply about how this happened.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
DMSS- TCW1000 mins '97 SNY

RETURN CALL TO CUSTOMER

BY WHOM _____ DATE _____ TIME _____

COMMENTS _____

24469

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 2-24-98 TIME 9:10 AM X PM ___

CSR NAME Carol Butts BADGE # 119972

CUSTOMER NAME Tom Dratler BTN # 305-654-3591

ADDRESS 945 NE 176th St APT # ___

CITY N Miami Beach ST FL ZIP 33162

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)
Cust was changed to GTE LD w/o authorization. 2/13 chang COF with Bell South as his LEC.

COF BILLING ADVISED
Snyder General was ~~the~~ company that changed customer.

? Cust wants a written confirmation indicating that this issue has been address

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
DMSS- TCW 10000 130 SNY.

RETURN CALL TO CUSTOMER

BY WHOM ___ DATE ___ TIME ___

COMMENTS ___

24470

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 2-20-98 TIME 1:31 AM ___ PM ✓

CSR NAME Jesse Nonzo BADGE # 87141

CUSTOMER NAME Adella Balmaseda BTN # 305-826-2622

ADDRESS 1380 West 69th APT # ___

CITY Hialeah ST FL ZIP 33104

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

COF

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)
Customer was changed to GTE LD without permisson on 1-30-98
She is also refusing to pay any bill from GTE.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
DMSS- ICP & TC w/ 3UD Until mins 1/30 SNY

RETURN CALL TO CUSTOMER

BY WHOM ___ DATE ___ TIME ___

COMMENTS ___

24471

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 2-23-98 TIME 5:10 AM PM ✓

CSR NAME CLAUDIA AGUILAR BADGE # 142047

CUSTOMER NAME JANET L. ARANGO BTN # [redacted] (305) 512-3865

ADDRESS 6975 W. 16th AVE APT # 111

CITY HIALEAH ST FL ZIP 33014

PLEASE CIRCLE RESPONSE: NEEDED NOT NEEDED

Spanish customer

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)

CUSTOMER VERY UPSET BECAUSE SHE NEVER AUTHORIZED TO BE CHANGED TO GTE. SHE WANTS TO STAY WITH AT&T SHE RECEIVED A BILL FROM GTE THAT WAS OVER A HUNDRED DOLLARS. VERY UPSET ABOUT THE BILL SHE WANTS TO FIND OUT WHO SWITCHED HER AND WHO GAVE AUTHORIZATION, SHE ALSO WANTS TO KNOW WHAT TO DO WITH BILL SINCE SHE NEVER WANTED TO BE SWITCHED

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)

DMSS-ICP, TCU 3100 Inter mun 1/19 SNY.

RETURN CALL TO CUSTOMER

BY WHOM _____ DATE _____ TIME _____

COMMENTS _____

24472

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 6-23-98 **Time:** 7:40pm **AM** (PM) **(Circle One)**

CSR Name: NOEmi Ortiz **Badge #:**

Customer Name: Mrs Amy Bastoyong **BTN:** 904 221 4564

Address: 13228 Eucalyptus Dr **Apt.#:**

City: Jacksonville **ST:** FL **ZIP:** 32225 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer had Sprint slammed by Gtel. Customer irate with situation. wants to find out who authorized switch.

Please Call back ASAP After 9pm EST. So will rerate calls to Sprint rates if these are charges.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: June 17, 1998 Time: 5:15 AM (PM) (Circle One)

CSR Name: Cara Denbow Badge #:

Customer Name: Fernando Gallo BTN: 305-279-6938

Address: 11560 SW 96 Ter. Apt.#:

City: Miami ST: FL ZIP: 33176 INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Order placed for GTELD, and he did not authorize this. I cancelled the order and deactivated the ani, but he still wanted to file a complaint.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

24474

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 6-18 Time: 4:30 AM (PM) (Circle One)

CSR Name: IRMA MIRAMONTES Badge #:

Customer Name: Pedro E Diaz BTN: 305-827-3649

Address: 1685 W 68 St Apt.#:

City: Hialeah ST: FL ZIP: 33014 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED ~~NOT NEEDED~~

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Mr. Diaz called very angry because his L/D was switched to GTE. Mr Diaz claimed that if there is no third party besides him & his wife his going to sue GTE, he also claimed he has recorded the two times he called. He demands the paper he suppost to signed. As of 6/18 there was no bill his L/D was activated 6/12.

RESEARCH: (For Customer Service Use Only)

Mediate "O" order Done

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 7/2/98 Time: 5:02 AM (PM) (Circle One)

CSR Name: KRISTI GEHRT Badge #:

Customer Name: JO-ANN JEROME BTN: 954-583-2534

Address: 7201 NW 11TH CT. Apt.#:

City: PLTN ST: FL ZIP: 33313 INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CUST WAS SLAMMED W/OUT PERMISSION, IRATE

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 7-04-98 Time: 11:52 (AM) PM (Circle One)

CSR Name: Maria L. Aispuro Badge #: _____

Customer Name: Rigoberto Gato BTN: (305) 485-8498

Address: 1260 SW 141st AV Apt.#: _____

City: Miami ST: FL ZIP: 33184 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust was switch to GTELD with out Auth. / Cust bills were sent to old address. / Cust denies all Call and refuse to pay bill. / Cust ~~had~~ ask for Supervisor. Flavio Arzola ~~was~~ spoke to cust. he a grees to give cust Credit and Cancel order per Cust Req.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 7/03/98 **Time:** 4:35 **AM PM (Circle One)**

CSR Name: VIVIAN KONG **Badge #:**

Customer Name: VERA, RODRIGO **BTN:** 561-274-0658

Address: 14 NE 9 ST **Apt.#:**

City: DELRAY BEACH **ST:** FL **ZIP:** 33444 **INF? OOF?**
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu was switched without his authorization. Cu was upset and didn't understand ~~of~~ how can GTE switched him. Cu requested to cancel his order and switch back to LCI.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 6/25/98 **Time:** 7:30 **AM** **PM** (Circle One)

CSR Name: ~~JORDAN B~~ Amy B **Badge #:** 1865

Customer Name: JORDAN BUBLICK **BTN:** 305-891-4055

Address: 11645 Biscayne Blvd **Apt.#:**

City: MIAMI **ST:** FL **ZIP:** 33161 **INF? OOF?** (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer says he never spoke with or had any communication w/ GTE reps and was upset he had been switched to GTSLD

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 6/25/98 **Time:** 3:30 **AM (PM)** (Circle One)

CSR Name: Amy Benoit **Badge #:** 1865

Customer Name: Jean G France (A France Ins Co INC) **BTN:** 305-892-9236

Address: 11870 W Dixie HWY **Apt.#:**

City: MIAMI **ST:** FL **ZIP:** 33161-6108 **INF?** (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer said he never authorized a switch to GTELD, in fact he never spoke w/ GTELD and wants to know how we have service of his business phone line. customer is very upset & would like to be contacted about this. Advised customer to call the preferred LD company

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 26 JUN 98 **Time:** 4:45 **AM (PM)** (Circle One)

CSR Name: OLGA LIDIA BRAVO **Badge #:** CSC

Customer Name: SERGIO SAN ANTONIO **BTN:** 305·856·5305

Address: 2315 SW 26TH ST **Apt.#:** —

City: MIAMI **ST:** FL **ZIP:** 33176 **INF? (OOP?)** (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CUSTOMER NEVER AUTHORIZED GTELD. CLAIMS THAT HE PAID [redacted] CALLS THAT APPEAR ON GTELD BILL, THEN CUSTOMER CLAIMS THAT HE DOES NOT KNOW CALLS THAT APPEAR ON BILL. CUSTOMER STATES THAT HE WILL NOT PAY FOR CALLS WHETHER OR NOT THEY ARE RERATED. CUSTOMER ALSO STATES THAT HE DOES NOT WANT TO DEAL WITH OR TALK TO GTE ANY GTE DEPTS AT ALL.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 7-16-98 Time: 11:00 (AM) PM (Circle One)

CSR Name: Melecio Alvarez Badge #: CSC

Customer Name: Alonso, Mercedes BTN: 305-362-4091

Address: 2464 W 65st Apt.#:

City: Hialeah ST: FL ZIP: 33012 INF? (OOS)?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust said that she never request GTELD but she got a bill which she have some calls to Cuba and she said that she's not paying anything cause she never request it. and she wants to talk to a supervisor ASAP. Please call her back at (305) 558-6375 Thank You.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 7/17/98 **Time:** 11:06 **AM** (PM) **(Circle One)**

CSR Name: Stephanie Ruad **Badge #:** _____

Customer Name: Palmenia Diaz **BTN:** 305-265-4592

Address: 8389 Norwest ~~Apt 10 Miami~~ **Apt.#:** 10

City: Miami **ST:** FL **ZIP:** 33126 **INF?** (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer got Switched by
a Smyder Telemarketer from
AT&T to GTE.
Cust specifically told Smyder
that she was not interested
in GTE & that she was happy
w/ AT&T

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 7/14 Time: 6:00 AM (PM) (Circle One)

CSR Name: Dan Serradilla Badge #:

Customer Name: JUSTO FASARDO BTN: 305-559-3831

Address: 12110 SW. 2ND ST Apt.#:

City: MIAMI ST: FL ZIP: 33184 INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: (ESCALATION) NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CUST NEVER REQ GTE. CUST WAS TOLD BY A SNYDER REP THAT SHE WORKS FOR ATT, BUT THAT ATT AND GENERAL MOTORS HAD MERGED AND THAT THE NEW NAME IS GTE. THAT IS THE FIRST LIE, THE SECOND ONE WAS THAT SHE TOLD [redacted] HIM, HE WILL GET [redacted] 360 MINS FREE A MONTH

RESEARCH: (For Customer Service Use Only)

I order complete: 6-29-98 / SNYDER REP. INITIALS: LXH
Order has been cancel and bill credited.
Pic active: 7/02/98 → order date 6/30
Aci active: 7/01/98 → send [redacted] date 6/30

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 7/14 Time: 7:30 AM (PM) (Circle One)

CSR Name: Dan Serracelller Badge #:

Customer Name: ORLANDO LAGO BTN: 305-948-3397

Address: 1545 NE. 179 ST Apt.#:

City: N. MIAMI BEACH ST: FL ZIP: 33162 INF? (OOE?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED ~~NOT NEEDED~~

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CUST NEVER REG GTE, I LOOKED AT THE ORDER AND TALK TO THE CUST, THEN I REALIZE THA THE SS# 089-72-8911 WHICH SHOWS ON THE ORDER DOES NOT BELONG TO HIM, OR AT LEAST IS A FALSE ~~ss~~ SS#

RESEARCH: (For Customer Service Use Only)

I order 6/9/98 O order 7/9/98
DIC "R" → orda date 6/7
ANJ "A" → send date 6/10

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 7/14/98 **Time:** 6:50 **AM** **PM** (Circle One)

CSR Name: ~~Kristy~~ Amy Benoit **Badge #:** 1583

Customer Name: Margarita Black **BTN:** 305-255-2528

Address: 9164 SW 132 ND LN **Apt.#:**

City: MIAMI **ST:** FL **ZIP:** 33176-5839 **INF?** **OOF?** (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer says she never spoke w/ anyone from BTI & the address on the account is not hers & was very upset about being switched w/ her authorization would like someone from marketing to contact her & explain how the order was placed

RESEARCH: (For Customer Service Use Only)

Please contact Ms Black either early in the morning or after 7 pm

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

24488

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 6-27-98 **Time:** 10:17 (AM) PM (Circle One)

CSR Name: Jennette L **Badge #:** _____

Customer Name: James Bouzies **BTN:** (305) 947-0336

Address: 15200 NE 18 Ave **Apt.#:** _____

City: Miami **ST:** FL **ZIP:** 33161 **INF?** (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Felt improperly switched / unfairly charged
Would never have switched ourselves
Unauthorized switch

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 7/22/98 **Time:** 3:20 **AM** (PM) **(Circle One)**

CSR Name: Amy Benoit **Badge #:** 1583

Customer Name: Collette Jimenez **BTN:** 305-756-3950

Address: Address on Solar order: 382 N W 77th St Miamia FL **Apt.#:**
Address IN BBN(QMF): 9705 NE 2ND AV MIAMI FL 33138-2310

City: **ST:** **ZIP:** **INF?** **OOF?** **(Circle One)**

Please call at 305-535-6000 btwn 7am-3pm

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Names on Account: Chimene Norzi OR IGODO Gallery INC
Actual Account Names: Collette Jimenez OR IGODO GALLERY
Collette says she did not authorize her # to be switched & would like to be contacted to explain how this happened. Collette says she was slammed

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER ← Please call Collette Jimenez at 305-535-6000 btwn 7am-3pm

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 7/22/98 **Time:** 5:45 **AM** (PM) **(Circle One)**

CSR Name: Aaron T. Wickenhauser **Badge #:** _____

Customer Name: Pablo Diaz **BTN:** (305) 687-4143

Address: 435 E 45 St. **Apt.#:** 5

City: Hialeah **ST:** FL **ZIP:** 33013 **INF? OOE?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer is elderly. Does not authorize switch.
Daughter, Rosa, would like a call at # below to discuss.

Please call daughter at: (305) 372-2300 daytime phone
Rosa ext 350

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 7/03/98 **Time:** 4:25 **AM PM (Circle One)**

CSR Name: VIVIAN KONG **Badge #:** _____

Customer Name: VERA, RODRIGO **BTN:** 561-274-0658

Address: 14 NE 9 ST **Apt.#:** _____

City: DELRAY BEACH **ST:** FL **ZIP:** 33444 **INF? OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu was switched without his authorization. Cu was upset and didn't understand of how can GTE switched him. Cu requested to cancel his order and switch back to LCI.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

24492

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 7/2/98 **Time:** 5:02 **AM** (PM) **(Circle One)**

CSR Name: KRISTI GEHRT **Badge #:** _____

Customer Name: JO-ANN JEROME **BTN:** 954-583-2534

Address: 7201 NW 11TH CT. **Apt.#:** _____

City: PLTN **ST:** FL **ZIP:** 33313 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CUST WAS SLAMMED W/OUT PERMISSION, IRATE

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 7/03/98 **Time:** 4:25 **AM PM (Circle One)**

CSR Name: VIVIAN KONG **Badge #:**

Customer Name: VERA, RODRIGO **BTN:** 561-274-0658

Address: 14 NE 9 ST **Apt.#:**

City: DELRAY BEACH **ST:** FL **ZIP:** 33444 **INF? OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu was switched without his authorization. Cu was upset and didn't understand ~~of~~ how can GTE switched him. Cu requested to cancel his orders and switch back to LCI.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 7/2/98 **Time:** 5:02 **AM** (PM) **(Circle One)**

CSR Name: KRISTI GEHRT **Badge #:** _____

Customer Name: JO-ANN JEROME **BTN:** 954-583-2534

Address: 7201 NW 11TH CT. **Apt.#:** _____

City: PLTN **ST:** FL **ZIP:** 33313 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CUST WAS SLAMMED W/OUT PERMISSION, IRATE

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 7/7/98 Time: 4:30 AM (PM) (Circle One)

CSR Name: Sebastian Badge #:

Customer Name: Marcos ABREU BTN:

Address: 515 Huxley CT LK. Mary FL 32746 Apt.#:

City: LK Mary ST: FL ZIP: 32746 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cst didn't req GTE L/D, he says he works with "AT&T" and that his L/D carrier is "AT&T". also that They ("AT&T") does not charge him when he makes L/D calls, Therefore he doesn't want to pay this bill of $54.48 he said that he didn't realiced he was switch with GTE until he thought that his "AT&T" bill was Low, then he talk with them and reactivate the "AT&T" service. his day time Phone is: 407 805 1390

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 7/7/98 **Time:** 7:15pm **AM** (PM) (Circle One)

CSR Name: Pancheta Davis **Badge #:**

Customer Name: Pancheta Davis **BTN:** 305 633 5725

Address: 1237 NW 38th St Miami FL 33142 **Apt.#:**

City: Miami **ST:** FL **ZIP:** 33142 **INF?** (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer was switched without authorization
Very-very upset wants to be reimbursed, etc...
She wants to be contacted about what exactly
has transpired - She has an answering machine
so if no one is home, leave a message.

VERY IRATE - does not want to pay for any calls -

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 06/24/98 **Time:** 6:09 (AM) PM (Circle One)

CSR Name: Martha C. Covarrubias **Badge #:** CSC

Customer Name: Joaquin Mejia **BTN:** 813 864 5994

Address: 5231 38th st. S Apt. B **Apt.#:**

City: St. Petersburg **ST:** FL **ZIP:** 33711-4827 (INF?) OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CU does not need the serv; Wants serv
Cncl ASAP. (GTELD)

RESEARCH: (For Customer Service Use Only)

NSOS- Amount due $39.81

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 6/23/98 **Time:** 11:10 **(AM) PM (Circle One)**

CSR Name: Amy Benoit **Badge #:** 1865

Customer Name: Jeremie Abraham **BTN:** 954-442-3495

Address: 8520 N Sherman Cir **Apt.#:** 402

City: [redacted] MIRAMAR **ST:** FL **ZIP:** 33025 **INF? OOF?**
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer was upset to receive a bill from GTELD - the customer says he never spoke w/ anyone from GTELD, the first name is spelled wrong and THIS IS NOT HIS TELEPHONE NUMBER

* Customer would like someone to contact him at 305-773-3473 or his pager # 305-516-5425

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

NAO-SWITCH

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 2-12-98 TIME 1225 AM PM X

CSR NAME Carol Butts BADGE # 119972

CUSTOMER NAME Marco Gomez BTN # 305-752-3061

ADDRESS 15231 SW 80th St APT # 2 A 115

CITY Miami ST FL ZIP 33193

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)
Cust was switched without his authorization on Feb 3, 1998, to GTE LD from Sprint. He was told the Cust signed something to do by receipt of GTE LD bill.

Cust has Bell South and cust has notified this LEC.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
OMSS-ESP 3-7 119 SNY

RETURN CALL TO CUSTOMER

BY WHOM (Carol) DATE TIME

COMMENTS Customer very happy to received a follow up phone call customer was satisfied.

24500

UNAUTH SW ICH

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 2-12-98 TIME 1225 AM PM X

CSR NAME Carol Butts BADGE # 119972

CUSTOMER NAME MARCO GOMEZ BTN # 305-752-3061

ADDRESS 15231 SW 80th St APT # 28 A 115

CITY Miami ST FL ZIP 33193

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)
Cust was switched without his authorization on Feb. 3, 1998, to GTE LD from Sprint. He was the Sprint customer at that was by receipt of GTE LD Bill.

Cust has Bell South and cust has notified this LEC.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
DMSS-ESP 7-7 '19 SNY

RETURN CALL TO CUSTOMER

BY WHOM _____ DATE _____ TIME _____

COMMENTS _____

24501

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CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
Fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 03-1-98 Time: 7:55 (AM) PM (Circle One)

CSR Name: BRENDA VALENZUELA Badge #: CSC 7241 5

Customer Name: _____ BTN: 305-819-7587

Address: _____ Apt.#: _____

City: _____ ST: _____ ZIP: _____ INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer was switch to GTEL without her authorization. She wanted to cancel and order that was put in for her.

RESEARCH: (For Customer Service Use Only)

I put her phone # in the list project 5 is keeping.

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

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98(FRI) 13:06 LD FULFILLMENT TEL:972 887 2443

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 3/7/98 Time: 8:29 AM (PM) (Circle One)

CSR Name: Dean Czajka Dudge #:

Customer Name: Malie Souffrant DTN: (305)-696-1499

Address: 920 NW 103rd St Apt#:

City: Miam ST: FL ZIP: 33168 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

PROBLEM: (Pls. be very specific and describe thoroughly.)

Never authorized anyone to switch her to GTE LD. Does not want any LD.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

24503

98(FRI) 15:06 LD FULFILLMENT TEL:972 887 2443

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 3/9/98 Time: 5:15 AM (PM) (Circle One)

CSR Name: MICHAEL FITZGERALD Badge #: CSC

Customer Name: Maria Rosa Mata BTN: 305-866-1309

Address: 7712 Baicow Apt.#: 04

City: MIAMI BEACH ST: FL ZIP: 33141 INF? (OOF?)
(Circle ~~One~~)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

PROBLEM: (Pls. be very specific and describe thoroughly.)

The caller was switched to GTELD and had already received a bill but did not authorize the switch. I credited her for the bill and told her the problem would be resolved

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

24504

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 03/09/98 Time: 6:30 AM (PM) (Circle One)

CSR Name: MICHAEL FITZGERALD Badge #: CSC

Customer Name: Luis Rodriguez BTN: 305-265-8781

Address: 7040 SW 24 ST Apt#: 409

City: MIAMI ST: FL ZIP: 33155 INT? (OOF)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

PROBLEM: (Pls. be very specific and describe thoroughly.)

The caller was rather upset to have received letters from GTELD saying he had been switched. He wanted to make sure the order was canceled and the matter resolved.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 03/10/98 **Time:** 6:20 (AM) PM (Circle One)

CSR Name: Naomi Ramos **Badge #:** _____

Customer Name: Gutierrez Orlando **BTN:** _____

Address: 1281 W 61 PL **Apt.#:** _____

City: Hialeah **ST:** FL **ZIP:** 33012 **INF?** (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cx doesn't Want to be Switch over Cancel ordr A.S.A.P. Call Twice.
A.S.A.P

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

RECEIVED
MAR 18 1998

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 03/10/98 **Time:** 10:20 (AM) PM (Circle One)

CSR Name: Naomi Ramos **Badge #:**

Customer Name: Gutierrez Orlando **BTN:**

Address: 1281 W 61 PL **Apt.#:**

City: Hialeah **ST:** FL **ZIP:** 33012 **INP?** (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu doesn't Want to be Switch over Cancel Orde R.S.A.P. Call Twice

A.S.A.P

RESEARCH: (For Customer Service Use Only) NO BTN

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

24507

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98(FRI) 13:06 LD FULFILLMENT TEL:972 887 2443

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
Fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 3/10 Time: 4:20 AM (PM) (Circle One)

CSR Name: Dan Serradilla Badge #:

Customer Name: ISMAEL TORRES BTN: 305-885-5070

Address: 10601 NW. 105 WAY Apt.#: 735

City: MEDLEY, F ST: FL ZIP: 33178 INT? (OUT)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust was charge to GTECC w/o authorization

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

24508

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 3/10/98 **Time:** 4:30 **AM** (**PM**) **(Circle One)**

CSR Name: MICHAEL FITZGERALD **Badge #:** CSC

Customer Name: EZEQUIEL HUATUCO **BTN:** 305-885-2338

Address: 601 S. Royal Poinciana **Apt.#:**

City: MIAMI SPRINGS **ST:** FL **ZIP:** 33166 **INF?** (**OOF?**) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

The caller was rather irate to have received a bill from GTELD w/o ever switching her service. She wanted the order cancelled immediately.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 03/10/98 Time: 1:42 AM (PM) (Circle One)

CSR Name: Naomi Ramos Badge #:

Customer Name: Silverio M Arnaldo BTN: 305-822-8680

Address: 6870 W 7 Ave 4 Apt.#:

City: Hialeah FL ST: FL ZIP: 33014 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cus didn't authorize Service with us Cancel - Phone Under Elderly Cus. ASAP

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

24510

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CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 03/10/98 Time: 10:38 (AM) PM (Circle One)

CSR Name: Naomi Ramos Badge #:

Customer Name: ALFonso Laura BTN: 305 444 2487

Address: 3601 SW 24 Ter Apt.#:

City: Miami ST: FL ZIP: 33145 INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

She didn't give authorization to switch over Cell Force

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 3/13 **Time:** 4:20 **AM (PM)** (Circle One)

CSR Name: Dan **Badge #:**

Customer Name: ARMANDO CORRALES **BTN:** 305-885-0214

Address: 147 N-32ND st **Apt.#:**

City: HIALEAH **ST:** FL **ZIP:** 33012 **INF? OOF?** (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust. was charge to GTELD w/o authorization

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 3/13 **Time:** 4:40 **AM** (PM) **(Circle One)**

CSR Name: Dan Gmuchlla **Badge #:** _____

Customer Name: SERGIO GONZALEZ **BTN:** 305-541-1939

Address: 1371 NW. 3st **Apt.#:** 4

City: MIAMI **ST:** FL **ZIP:** 33125 **INF? (OOF?)**
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust. was charge to GTECC w/o authorization

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 3/14/98 **Time:** 4:28 **AM (PM)** (Circle One)

CSR Name: BRENDA VALENZUELA **Badge #:** PROJECT S

Customer Name: Rudolph + Jack **BTN:** 305-551-6491

Address: 14300 SW 55 ST **Apt.#:**

City: Miami **ST:** FL **ZIP:** 33175 **INF? (OOF?)** (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer received a letter from GTE'D saying he would be with GTE service. He never asked for the service. He said that if his kids found out he would be switched they would be very angry w/ him. He wants a letter saying that it was all a big misunderstanding.

RESEARCH: (For Customer Service Use Only)

Customers # was put in the list Project S is keeping for people who need to be cancelled because they were switched without there authorization.

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 3-20-98 **Time:** 3:50 **AM** (PM) **(Circle One)**

CSR Name: LAURA ARREOLA **Badge #:** _____

Customer Name: KARLA LUGO **BTN:** 305-553-3331

Address: 5224 SW. 139 Pl **Apt.#:** _____

City: MIAMI **ST:** FL **ZIP:** 33175 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust was changed to GTECA w/o Authorization

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

24515

MAR.23.1998 6:35AM AFNI OUTSOURCING NO.724 P.2/4

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URGENT!!!!

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: Mar. 31, '98 Time: 9:38 (AM) PM (Circle One)

CSR Name: Sandra Cerveny - Help Desk Badge #: _____

Customer Name: Armando Fiallo BTN: 305-649-6103

Address: 3078 SW 60th St Apt.#: _____

City: Miami ST: FL ZIP: 33157 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE (ESCALATION NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust has been contacted repeatedly about switching to GTELD and was switched without his authorization. His service has since been disconnected with us but customer wants to know who, if anyone, authorized the switch and requested that a supervisor return his call ASAP.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 3-31-98 **Time:** 9:50 **AM** (PM) **(Circle One)**

CSR Name: Joaquin Munoz **Badge #:** _____

Customer Name: Donnach Villa **BTN:** 305 740 9946

Address: 7483 S W 87 AVE **Apt.#:** 309

City: Miami **ST:** FL **ZIP:** 33143 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Had no knowledge of GTE LD was slammed recieved bill there was an order in Solar and there was nothing in GTE

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

SNA

TODAY'S DATE 03-24-98 TIME 6:30 AM PM /

CSR NAME STEVE WADE BADGE # 88390

CUSTOMER NAME ARMANDO FIALLO BTN # 305-649-6103

ADDRESS 3078 SW 6th ST. Alt # 305-837-7751 + call APT #

CITY MIAMI ST FL ZIP 33135

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)

WANTS TO LISTEN TO THE TAPE. HE SAYS HE WAS SLAMMED AND WANTS TO KNOW WHO SWITCHED HIM.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)

No occurrences in 1998 DMSS file; No occurrences in 1997 DMSS file
DMSS-ESP 7-7 alao SNX

RETURN CALL TO CUSTOMER

BY WHOM DATE TIME

COMMENTS

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Unauth Switch

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 2-17-98 Time: 7:45 AM (PM) (Circle One)

CSR Name: Dora Serradilla-Arroyo Badge #:

Customer Name: Luis Bejarano BTN: 305- 866-8954

Address: 7304 Carlyle Av Apt.#: 4

City: Miami Beach ST: FL ZIP: 33141 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust. was charge to GTECO without his permission

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

24521

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UNAUTHORIZED SWITCH

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 2-17-98 Time: 6:46 AM (PM) (Circle One)

CSR Name: Dan Serradilla -Avery Badge #:

Customer Name: Rafael Gonzalez BTN: 305-556-8203

Address: 1035 W 77 ST Apt.#: 305

City: HIALEAH ST: FL ZIP: 33014 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust. was change to GTECO without his permission

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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Unauthorized Switch

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 2-17-98 **Time:** 6:52 **AM PM (Circle One)**

CSR Name: Dora Serradilla-Avery **Badge #:** _____

Customer Name: Jorge Flores **BTN:** 305-828-7610

Address: 5968 W. 18 AVE **Apt#:** /

City: HIALEAH **ST:** FL **ZIP:** 33012 **INF? OOF?** (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust. was change to GTECO without his permission

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 2/19 **Time:** 9:00 **AM (PM)** (Circle One)

CSR Name: MICHAEL Fitzgerald **Badge #:** CSC

Customer Name: Jorge Lopez **BTN:** 305-888-0438

Address: 1432 W. 29 St. **Apt.#:** 2

City: Hialeah **ST:** ~~Fl~~ **ZIP:** 33012 **INF? (OOF?)** (Circle One)

DEFINITELY

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

PROBLEM: (Pls. be very specific and describe thoroughly.)

The customer had received a letter in the mail saying he had obtained GTE as his LD carrier. He was extremely upset. I spent the next 45 minutes explaining to him that we did not know exactly who authorized the switch. I also had to explain that we could not fax him a copy of our contract w/ him w/ his signature on it. He wanted this fax to give to his lawyer.

RESEARCH: (For Customer Service Use Only)

I told the customer I could cancel the order and offered to give him the TMA Complaint # but he refused. He just wanted his order cancelled and said he would talk to his lawyer.

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

24524

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UNAUTH SWITCH

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 2/19 **Time:** 7:00 **AM** (**PM**) **(Circle One)**

CSR Name: MICHAEL Fitzgerald **Badge #:** CSC

Customer Name: LUIS CRESPO **BTN:** 305-364-9967

Address: 6075 W. 15 Ct. **Apt.#:**

City: Hialeah **ST:** FL **ZIP:** 33012 **INF?** (**OOF?**) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (**NOT NEEDED**)

PROBLEM: (Pls. be very specific and describe thoroughly.)

The customer said that he had been switched to GTELD w/o his knowledge and wanted the order cancelled so he could continue w/ his previous LD carrier.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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UNDER SWITCH

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 02/19/98 **Time:** 950 **AM** (PM) (Circle One)

CSR Name: Lois Henderson **Badge #:** _____

Customer Name: Gonzales Lizett **BTN:** (305) 638 9209

Address: 1101 NW. 76 ST. **Apt.#:** _____

City: Miami **ST:** FL **ZIP:** 33127 **INF?** (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Snyder General Cust. Don't Want GTE LD Service

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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UNAUTHORIZED SWITCH

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 02/10/98 **Time:** _____ **AM** (**PM**) **(Circle One)**

CSR Name: Luis Henderson **Badge #:** CSC 3V1

Customer Name: Gutierrez Gil **BTN:** (305) 649 65 35

Address: 66 SW. 17 CT 2 **Apt.#:** _____

City: Miami **ST:** FL **ZIP:** 33125 **INF?** (**OOF?**) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

PROBLEM: (Pls. be very specific and describe thoroughly.)

Snyder General Cust Don't Want GTECD Service.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

Unattended Switch

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 02/19/98 **Time:** _____ **AM** (**PM**) **(Circle One)**

CSR Name: Luis Henderson **Badge #:** CSC "S"

Customer Name: Vedira Livonia **BTN:** (305) 638 3401

Address: ~~Miami~~ 1440 NW. 26 AVE. **Apt.#:** _____

City: Miami **ST:** FL **ZIP:** 33125 **INF?** (**OOF?**) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

PROBLEM: (Pls. be very specific and describe thoroughly.)

Snyder. General Cust. Don't Want GTE LD.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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UNAUTH SWITCH

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 02/19/98 **Time:** _____ **AM (PM)** (Circle One)

CSR Name: Lois Henderson. **Badge #:** CSC "S"

Customer Name: Diaz Alberto. **BTN:** (305) 278-4150

Address: 16198 SW 138CT **Apt.#:** _____

City: Miami **ST:** FL **ZIP:** 33177 **INF? (OOF?)** (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

PROBLEM: (Pls. be very specific and describe thoroughly.)

Snyder General Cust. Don't want GTE LD
Never ROST

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

INAUTH SW-GA

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 02/19/98 **Time:** _____ **AM** (PM) **(Circle One)**

CSR Name: Luis Henderson **Badge #:** CSC "S"

Customer Name: Gallart Hirle **BTN:** (305) 685-8250

Address: 910 E. 29 ST. **Apt.#:** _____

City: HIALEAH **ST:** FL **ZIP:** 33013 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust. Don't Want GTE LD. (Snyder General)
He never Rqtd

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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UNAUTHORIZED SWITCH

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 2/21 **Time:** 3:39 **AM** (**PM**) **(Circle One)**

CSR Name: Dan Serradilla-Avery **Badge #:**

Customer Name: ORTIZ MARITZA **BTN:** 305-233-8860

Address: 16925 SW. 114 PL **Apt.#:**

City: MIAMI **ST:** FL **ZIP:** 33177 **INF?** (**OOF?**) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (**NOT NEEDED**)

PROBLEM: (Pls. be very specific and describe thoroughly.)

cust. was change to GTELD w/o authorization

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

UNAUTHORIZED SWITCH

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 2/21 **Time:** 1:50 **AM** (PM) **(Circle One)**

CSR Name: Dan Serradella-Arey **Badge #:** _____

Customer Name: IRMA HERNANDEZ **BTN:** 305-541-0426

Address: 1844 SW. 4ST **Apt.#:** 2

City: MIAMI **ST:** FL **ZIP:** 33131 **INF? (OOF?)** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust. was change to GTELD w/o authorization

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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UNAUTHORIZED SWITCH

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 2/21 **Time:** 4:11 **AM** (PM) (Circle One)

CSR Name: Dan Serrachilla-Avery **Badge #:**

Customer Name: JESUS VILLAMAR **BTN:** 305-826-9534

Address: 1060 W. 74TH ST **Apt.#:**

City: HIALEAH **ST:** FL **ZIP:** 33014 **INF?** **OOF?** (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED **NOT NEEDED**

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust. was charge to GTELD w/o authorization

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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UNAUTH SWITCH

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 2/22 **Time:** 2:30 **AM** (**PM**) (Circle One)

CSR Name: Michael Fitzgerald **Badge #:** CSC

Customer Name: Felipe Actiaga **BTN:** 305-556-9247

Address: 2223 W. 64 St. **Apt.#:** 204

City: Hialeah **ST:** FL **ZIP:** 33016 **INF?** (**OOF?**) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (**NOT NEEDED**)

PROBLEM: (Pls. be very specific and describe thoroughly.)

The caller had been switched to GTELD w/o his consent and wanted the order Cancelled.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

24534

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UNAUTHORIZED SWITCH

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 2/23 **Time:** 5:30 **AM** (**PM**) (Circle One)

CSR Name: Michael Fitzgerald **Badge #:** CSC

Customer Name: Rolando Bobadilla **BTN:** 718-854-2979

Address: 1920 SW 2 ST. **Apt.#:** 13

City: MIAMI **ST:** FL **ZIP:** 33135 **INF?** (**OOF?**) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

PROBLEM: (Pls. be very specific and describe thoroughly.)

The caller was very upset that he was switched to GTELD w/o his authorization. He had called in previously to cancel the order but was still receiving letter from GTE in the mail. I assured him that his order was cancelled.

RESEARCH: (For Customer Service Use Only)

The customer requested that a letter be sent to him assuring that he was no longer w/ GTELD.

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

PLAN PROMO

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 2/24/98 **Time:** 11:12 (AM) PM **(Circle One)**

CSR Name: Naomi Ramos **Badge #:**

Customer Name: Jose Luis Hidalgo **BTN:** 561-451-3127

Address: 8361 Boca Rio DR **Apt.#:**

City: FL **ST:** **ZIP:** 33433832 3 **INF? (OOF?)** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu was told Price for Peru at Sign up, Cu upset Because our price is diff. Ref' Refuse to pay.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 02-28-98 Time: 6:35 AM (PM) (Circle One)

CSR Name: BRENDA VALENZUELA Badge #: PROS S

Customer Name: CASLANO, BARBARA BTN: 305-637-7667

Address: 1601 NW 33 AVE Apt.#:

City: HIALEAH, ST: FL ZIP: 33125 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer was switched to GTELD without her authorization and she wanted to have any order put in for her to be cancelled.

RESEARCH: (For Customer Service Use Only)

I put the customers phone# in the list project S is keeping for people who have been switched

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 04-09-98 Time: 9:11 (AM) PM (Circle One)

CSR Name: Angel Garcia Badge #: CSC

Customer Name: Camacho, Alex Javier BTN: 305 822 8878

Address: 8851 NW 187 st 3414 Apt.#:

City: Hialeah Garde ST: FL ZIP: 33018 INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust was changed to GTE without
There permision Cust Req Cancelation
of the Order.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/9/98 Time: 12:59 (AM) PM (Circle One)

CSR Name: Sonia Estrada Badge #:

Customer Name: Juan C. Wong BTN: 3052237919

Address: 9405 W Flagler ST Apt.#: D 110

City: Miami ST: FL ZIP: 33172 INT? OOT? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cost call to cancel GTEC DO NOT REQ
SERVICE would like be cancel.
He also will not pay bill.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/9 Time: 1:09 AM (PM) (Circle One)

CSR Name: _____ Badge #: _____

Customer Name: Felix P RiverA BTN: (305) 859-8557

Address: 5943 SW 4th St Apt.#: _____

City: MIAMI ST: FL ZIP: 33144 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CUS was upset he was switched w/o authorization.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-9-98 Time: 5:43 AM (PM) (Circle One)

CSR Name: LAURA ARREOLA Badge #: _____

Customer Name: Joel Gonzalez BTN: 305-624-4280

Address: 18705 NW 45 ave. Apt.#: _____

City: Miami ST: Fl. ZIP: 33055 INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust. was changed to GTE w/o Authorization

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/9 Time: 2:42 AM (PM) (Circle One)

CSR Name: Jose Pena Badge #:

Customer Name: Elizabeth Berry BTN: (305)623-9183

Address: 4531 [redacted] NW 196th St Apt.#:

City: OPA LOCKA ST: FL ZIP: 33055 INT? (OOL?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

cus was switched w/o authorization

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

24542

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/14/98 Time: 11:47 (AM) PM (Circle One)

CSR Name: JOSE Badge #:

Customer Name: GARCIA, YOLANDA BTN (305) 826-1575

Address: 6750 W 24T H CT Apt.#: UNIT 12

City: HLH ST: FL ZIP: 33016 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cus was switched w/o auth - was upset. wants to cancel immediately

RESEARCH: (For Customer Service Use Only)

looked in QMF Shown active

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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Exhibit REP-18
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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/13 Time: 11:57 (AM) PM (Circle One)

CSR Name: Jose Pena Budge #:

Customer Name: Valle, Maricela BTN: (305) 885-3696

Address: 1398 W 29th St Apt.#: 1st W

City: HLH ST: FL ZIP: 33012 INT? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cus claims she had Pic Restriction
was ~~Swatte~~ switched c/o auth.

RESEARCH: (For Customer Service Use Only)

QMF should activate

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-13-97 Time: 11:20 (AM) PM (Circle One)

CSR Name: Romelia Aya Badge #:

Customer Name: Esther Lugo BTN: 305-387-9059

Address: 12700 SW 107th Ter. Apt.#:

City: Miami ST: FL ZIP: INT? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer said never pay service. Would like to cancel.

RESEARCH: (For Customer Service Use Only)

Customer is still active in DMT and in Solar would like to cancel.

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
Fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/ /98 Time: 7:30 (AM) PM (Circle One)

CSR Name: Naomi Ramos Badge #:

Customer Name: Hayde, Hernandez BTN: 305 559 7651

Address: 9971 SW 40 Ter Apt.#:

City: Miami ST: FL ZIP: 33165 INIT OOP? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu complaining about being switch over without their authorization, attorney to cncl service immediately. Cr acct

Also didn't Make the Calls.

RESEARCH: (For Customer Service Use Only)

I order Color, Bill msas, Acct Active in QMF

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

24546

Docket No. 990362-TI
Exhibit REP-18
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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-13-98 Time: _____ AM PM (Circle One)

CSR Name: Rosalia Aza Badge #: _____

Customer Name: Thomasa Garcia BTN: 305-63-1094

Address: 217 NW 28 St. Apt.#: _____

City: Miami ST: FL ZIP: 33145 INT? (OOF)?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust did not req change, would like to cancel

RESEARCH: (For Customer Service Use Only)

Customer still active in Qwest Saler
would like to cancel

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

24547

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/13 Time: 10:00 AM (PM) (Circle One)

CSR Name: MICHAEL FITZGERALD Badge #: CSC

Customer Name: FERNANDO MORLANS BTN: 305-245-4573

Address: 15280 SW 304 ST Apt.#:

City: HOMESTEAD ST: FL ZIP: 33033 INF? (OOF?)
(Circle ~~One~~)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

The caller was switched to GTFLD who asking for the service. They want the order cancelled so they can return to their previous carrier.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/13 Time: 4:30 AM (PM) (Circle One)

CSR Name: MICHAEL FITZGERALD Badge #: CSC

Customer Name: CESARINA LOPEZ BTN: 305-649-7018

Address: 720 NW 27 Colt Apt.#:

City: MIAMI ST: FL ZIP: 33125 INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

The caller had been switched to GTELD w/o authorization and wanted the service cancelled so they could return to their previous carrier.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/466-4939

Today's Date: 4/13/98 Time: 10:44 AM PM (Circle One)

CSR Name: Brenda Valenzuela Badge #: CSC/Prog 5

Customer Name: Angel Gonzalez BTN: (305) 220-6551

Address: 675 NW 122 PASSAGE Apt.#:

City: MIAMI ST: FL ZIP: 33182 INT? OOT?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer wants the order cancelled
Never asked for the service.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-13-98 **Time:** 8:49 (AM) PM (Circle One)

CSR Name: Melecio Alvarez **Badge #:**

Customer Name: Perez, Danny **BTN:** (305) 836-3821

Address: 885 E 29 st **Apt.#:**

City: Hialeah **ST:** FL **ZIP:** 33013 **INF?** O(OF)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust never request GTELD + never recive a phone call or a letter she just recive a bill plus she never [redacted] heard of GTELD.

RESEARCH: (For Customer Service Use Only)

Solar - I order

QME [redacted] Deactivated

MSOS had a bill for $5.37 so I give her Cr.

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/13/98 Time: 1:30 AM (PM) (Circle One)

CSR Name: Naomi Ramos Badge #:

Customer Name: Ruiz Francisco BTN: 476-8241 305

Address: 3690 SW 14 ST 1 Apt.#:

City: Miami ST: FL ZIP: 33134 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cx decided to cxcl serv. She didn't req GTE UD

RESEARCH: (For Customer Service Use Only)

I order - Act - Payment Due Cx acct

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-14-98 Time: 10:56 (AM) PM (Circle One)

CSR Name: Melecio Alvarez Badge #: CSC

Customer Name: Perez, Andres BTN: (305) 446-6302

Address: 4538 SW 1 st Apt.#:

City: Miami ST: FL ZIP: 33134 INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

cust recive a bill from us, but she said that she never request to be
so she wants to Cancel ASAP

RESEARCH: (For Customer Service Use Only)

Solar I order
QMF Active
MSOS Cal can has a bill

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

24553

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4.14.98 **Time:** 307 **AM** (PM) **(Circle One)**

CSR Name: Roy Roethlisberger **Badge #:** _____

Customer Name: Roy Roethlisberger **BTN:** 813 677-3916

Address: 11231 Fiddlewood Dr **Apt.#:** _____

City: Riverview **ST:** FL **ZIP:** 33569 **INF? OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer has no knowledge of ever wanting GTLD for long distance Customer was switched from MCI to GTE on 4.7.98

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/14 Time: 9:00 AM (PM) (Circle One)

CSR Name: MICHAEL FITZGERALD Badge #: CSC

Customer Name: JUAN LOPEZ BTN: 305-643-5831

Address: 1500 NW 1 ST. 2 Apt.#:

City: MIAMI ST: FL ZIP: 33125 INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

The caller was switched to GTELD w/o authorization and wanted the order cancelled. He had already been activated and wanted to return to his previous carrier.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/14/98 Time: 9:30 AM (PM) (Circle One)

CSR Name: Raul Badge #:

Customer Name: Joan, Romero BTN: 305 634 0548

Address: 2323 NW 15th St Apt.#:

City: Miami ST: FL ZIP: 33125 INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust Resive a letter thanking Her For Switching Company She never Req @ GTELD She like to Cancel any order.

RESEARCH: (For Customer Service Use Only)

Solar. QME She ~~not~~ Have a Ristric order in Her local company

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4.14.98 **Time:** 307p **AM** (PM) **(Circle One)**

CSR Name: Roy Roethlisberger **Badge #:** _____

Customer Name: Roy Roethlisberger **BTN:** 813 677-3916

Address: 11231 Fieldkwod Dr **Apt.#:** _____

City: Riverview **ST:** FL **ZIP:** 33569 **INF? OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer has no knowlege of ever wanting GTLD for long distance. Customer was switched from MCI to GTE on 4.2.98

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-14-98 Time: 10:56 (AM) PM (Circle One)

CSR Name: Melecio Alvarez Badge #: CSC

Customer Name: Perez, Andres BTN: (305) 446-6302

Address: 4538 SW 1 st Apt.#:

City: Miami ST: FL ZIP: 33134 INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

cust recive a bill from us, but
she said that she never request ETEO
so she wants to Cancel ASAP

RESEARCH: (For Customer Service Use Only)

Solar I order
QMF Active
MSOS Cal Con has a bill

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

24558

APR. 16. 1998 6:43PM HNUERSUN & LN NET INC NO. 437 P. 6/19

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 04/15/98 Time: 3:20 AM (PM) (Circle One)

CSR Name: Francisco Cossio Badge #:

Customer Name: Lorenzo Aristides BTN: 305 362 9102

Address: 5290 W 21 st ct Apt.#:

City: Hialeah ST: FL ZIP: 33016 INT? (OOT?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust claim never req GTE LS

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

24559

APR.16.1998 6:44AM ANDERSON FIN NET INC NO.437 P.14/19

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/15/98 **Time:** 4:07 **AM** (PM) **(Circle One)**

CSR Name: Brenda Valenzuela **Badge #:** CSC

Customer Name: Leon, Oswaldo **BTN:** (305) 864-9202

Address: 6765 HARDING AVE **Apt.#:** 6

City: MIAMI BEACH **ST:** FL **ZIP:** 33141 **INF?** (OOF?) **(Circle ~~One~~)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer was switched to GTE SVC and never asked for it. Wants the order cancelled.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

APR.16.1998 6:45AM ANDERSON FIN NET INC NO.437 P.19/19

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/15/98 Time: 4:00 AM (PM) (Circle One)

CSR Name: Dave Badge #:

Customer Name: AIDA VELO BTN: 305 512 8155

Address: 7279 W 24 Ave. Apt.#: 243

City: Hialeah ST: FL ZIP: 33016 INF? (OOF)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust never ReQ the Service
she like to cancel ordr.

RESEARCH: (For Customer Service Use Only)

@ Solar. California Cont/

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

24561

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-15-98 **Time:** _____ **AM PM (Circle One)**

CSR Name: Romelia Aza **Badge #:** _____

Customer Name: ODalys Castellanos **BTN:** 305-883-9642

Address: 1065 W 27 St. 7 **Apt.#:** _____

City: Hialeah **ST:** fl. **ZIP:** 33010 **INF? OOF?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust sd she did not req change would like to cancel.

RESEARCH: (For Customer Service Use Only)

Customer is active in Solar + gruf And says she also rcvd bill in MSOS, would like to cancel.

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

24562

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/15/98 Time: 11:12 (AM) PM (Circle One)

CSR Name: Naomi Ramos Badge #:

Customer Name: Orlando Esquivel BTN: 305-672-5722

Address: 3200 Collins Ave 88 Apt.#:

City: Miami Beach ST: FL ZIP: 33140 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu never req GTELD serv, cut cu
req to cncl order

RESEARCH: (For Customer Service Use Only)

No payment, I ordr

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

24563

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-15-98 Time: 1:10 AM (PM) (Circle One)

CSR Name: Romelia Aza Badge #:

Customer Name: Felecia Fernandez BTN: 305-691-9188

Address: 2850 E 5th Ave Apt.#:

City: Hialeah ST: FL. ZIP: INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust was switched w/o authorization
please cancel.

RESEARCH: (For Customer Service Use Only)

Cust is Active in Solar w/a Restriction
in QM-F.

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

24564

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/15/98 **Time:** 12:36 **AM** (PM) **(Circle One)**

CSR Name: Noemi Ramos **Badge #:** _____

Customer Name: Diaz, Midalmis **BTN:** 305-273-7650

Address: 4930 SW 98 Ave **Apt.#:** _____

City: Miami **ST:** FL **ZIP:** 3365 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cx Never req GTE serv, cxl srv

RESEARCH: (For Customer Service Use Only)

Tords, payment due or ovrd

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

24565

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/15 Time: 8:00 (AM) PM (Circle One)

CSR Name: Jose Peña Badge #:

Customer Name: GARCIA, Jose BTN: (941) 337-4292

Address: 1365 FLORAL DR Apt.#:

City: Fort Myers ST: FL. ZIP: 33916 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust was switched w/o authorize claims

RESEARCH: (For Customer Service Use Only)

QMF still shows active.

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

24566

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-15-98 Time: 10:11 AM PM (Circle One)

CSR Name: Melecia Alvarez Badge #:

Customer Name: Vargas, Leticia BTN: (305) 267-5161

Address: 8095 NW 8 st Apt.#: 306

City: Miami ST: FL ZIP: 33126 INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

cust never request STEP but they
recive a bill so she wants to cancel.

RESEARCH: (For Customer Service Use Only)

Solar F order
MSOS (Cal Com) got a bill

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

24567

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/15/98 Time: 9:29 (AM) PM (Circle One)

CSR Name: Naomi Ramos Badge #: _____

Customer Name: Carlos J Casto BTN: 305-693-1012

Address: 3340 NW 101 ST Apt.#: _____

City: Miami ST: FL ZIP: 33147 INF? (OOF)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu didn't ~~BOT~~ req GTELD SERV

RESEARCH: (For Customer Service Use Only)

NO payment Due, Rest Ords

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

24568

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/15/98 Time: 8:48 (AM) PM (Circle One)

CSR Name: Naomi Ramos Badge #: _____

Customer Name: Ramiro Ramos BTN: 305 275 1362

Address: 10621 SW 67th St Apt.#: _____

City: Miami ST: FL ZIP: 33173 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu never asked to be switch to GTEID, CNCL
Sewat cu req

RESEARCH: (For Customer Service Use Only)

Cancel Act acct - I ordr

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

24569

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/15 Time: 8:47 (AM) PM (Circle One)

CSR Name: Jose Pena Badge #:

Customer Name: Lesbia Rodriguez BTN: (305) 827-0641

Address: 5437 W 23 AVE Apt.#:

City: Hialeah Gardens, ST: FL ZIP: 33016 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Lns was switched w/o auth
was upset

RESEARCH: (For Customer Service Use Only)

Shows active in QMF

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/15/98 Time: 9:14 (AM) PM (Circle One)

CSR Name: Naomi Ramos Badge #:

Customer Name: Jose Gragg BTN: 305556-5411

Address: 6373 W 22 LN Apt.#:

City: Hialeah ST: FL ZIP: 33016 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cx with AT&T Was Switch over Without Autho,

RESEARCH: (For Customer Service Use Only)

I ordr, OMF Active, Payment One

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/15/98 Time: 8:25 (AM) PM (Circle One)

CSR Name: Naomi Ramos Badge #:

Customer Name: Carmen Mercado BTN: 305-226-6482

Address: 640 SW 114 Ave 111 Apt.#:

City: Miami ST: FL ZIP: 33174 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cx Complaining about being switched over without Authn, Cx Acct

RESEARCH: (For Customer Service Use Only)

Payment Due, OMF Reist, O Ords

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-15-98 Time: 9:55 AM PM (Circle One)

CSR Name: Melecio Alvarez Badge #: CSC

Customer Name: Guerrero, Guillermo BTN: (305) 512-3812

Address: 201 W 65 st Apt.#: 206

City: Hialeah ST: FL ZIP: 33012 INF? Q
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

a sale Rep. went to their house & offer STS LD but they tell her that they weren't interested in LD at all but they recive a bill that I give them or for it. So they want to cancel ASAP

RESEARCH: (For Customer Service Use Only)

Solar got an I-order

MSOS (Cal con) got a bill

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-15-98 **Time:** _____ **AM PM (Circle One)**

CSR Name: Romelia Aza **Badge #:** _____

Customer Name: Isaac **BTN:** 305-860-8762

Address: 244 SW. 9St 27 **Apt.#:** _____

City: Miami **ST:** Fl. **ZIP:** 33130 **INF? OOF?** (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer called very upset sd she was switched w/o her authorization would like to cancel.

RESEARCH: (For Customer Service Use Only)

Customer is active in Solar + Out. said she has a block w/ her local but does not appear in OUT.

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/15 **Time:** 8:40 (AM) PM (Circle One)

CSR Name: Jose Pena **Badge #:**

Customer Name: MAGALI MONSANTO **BTN:** (813) 933-5344

Address: 7801 Haversham Pl **Apt.#:** A

City: TAMPA **ST:** FL **ZIP:** 3364 **INF?** (QOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

cus was given wrong info
was upset.

RESEARCH: (For Customer Service Use Only)

QMF showed active

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 04/15/98 Time: 3:20 AM (PM) (Circle One)

CSR Name: Francisco Cossio Badge #:

Customer Name: Lorenzo Aristides BTN: 305 362 9102

Address: 5290 W 21 st ct Apt.#:

City: Hialeah ST: Fl ZIP: 33016 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust claim never reg GTE CS

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

24576

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/15/98 **Time:** 4:07 **AM** (PM) **(Circle One)**

CSR Name: Brenda Valenzuela **Badge #:** CSC

Customer Name: Leon, Osvaldo **BTN:** (305) 864-9202

Address: 67165 HARDING AVE **Apt.#:** 6

City: MIAMI BEACH **ST:** FL **ZIP:** 33141 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer was switched to GTE SVC and never asked for it. Wants the order cancelled.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/15/98 Time: 4:00 AM (PM) (Circle One)

CSR Name: Dawn Badge #: _____

Customer Name: AIDA VELO BTN: 305 512 8155

Address: 7279 W 24 Ave. Apt.#: 243

City: Hialeah ST: FL ZIP: 33016 INF? (OOF) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust never ReQ the Service
she like to cancel ordr.

RESEARCH: (For Customer Service Use Only)

@ Solar. California Contel

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

24578

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Exhibit REP-18
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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/16/98 Time: 10:03 (AM) PM (Circle One)

CSR Name: Luis Henderson. Badge #:

Customer Name: SALAS DANIEL BTN: 305-819-2409

Address: 7880 . NW. 167 TERR. Apt.#:

City: Hialeah ST: FL ZIP: 33016. INT? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CST. Never Req. GTE&LO. CST have Receive a letter said Thank you For Chose GTE. But She never Req.

please Cancel..

RESEARCH: (For Customer Service Use Only)

Order was placed. and Complete. 6y THCMX10 02/25/98 20.25.

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-16-98 Time: 12:30 AM (PM) (Circle One)

CSR Name: Melecio Alvarez Badge #:

Customer Name: Romero, Oscar BTN: (305) 685-9360

Address: 6050 NW 139st Bldg 11 Apt.#:

City: Opa locka ST: FL ZIP: 33054 INF? (OOF)?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

cust never request GTELD but he recive a bill from us so he wants to cancel the serv.

RESEARCH: (For Customer Service Use Only)

I order in Saker a bill in MSOS Cnl can

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-16-98 Time: _____ AM PM (Circle One)

CSR Name: Angel Garcia Badge #: CSC

Customer Name: UBALDO Villa BTN: 305 625-6024

Address: 6537 NW 197 LN Apt.#: _____

City: Miami ST: FL ZIP: 33015 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

cust was changed to GTE and she got a bill
cust doesnot want any long distance service
and wants the order to be canceled-

RESEARCH: (For Customer Service Use Only)

Cust is not active in BMF and she has
a T order in Solar.

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-16-98 Time: 8:50 (AM) PM (Circle One)

CSR Name: Marco Peña Badge #:

Customer Name: Francisca Gomes BTN (305) 247-1230

Address: 812 E Mowry Dr 606 Apt.#:

City: Homestead ST: FL ZIP: 33030-8102 INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

She was switched w/o Auth. She has a bill for 63¢, she will recieve a cr for 63¢ and she wants to be cansl.

RESEARCH: (For Customer Service Use Only)

OMF show that she has a restriction, Solar shows she has a "O" order and an "I" order. So she just wants to be cansl.

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-16-98 Time: 8:40 (AM) PM (Circle One)

CSR Name: Romelia AzA Badge #:

Customer Name: America Caudra BTN: 305-265-9812

Address: 1401 S.W. 67 Ave 33 Apt.#:

City: Miami ST: Fl. ZIP: 33155 INF? (OOF)? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust was switched w/o authorization, does not wish to have GTECO.

RESEARCH: (For Customer Service Use Only)

Customer is active in Solar + Out
Also recd bill in MSOS

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-21 Time: _____ AM (PM) (Circle One)

CSR Name: Laura Arreola Badge #: _____

Customer Name: Ana Rodriguez BTN: 305-861-9834

Address: 1235 Normandy Dr Apt.#: 7

City: Miami beach ST: FL ZIP: 33141 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust. not order GTE wtf
Would like to cancel

RESEARCH: (For Customer Service Use Only)

QMF- Activated - 3-12-98
Solar- 1 order
MSOS- Bill - For 47.92

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-21-98 Time: 2:50 AM (PM) (Circle One)

CSR Name: Joaquin Munoz Badge #:

Customer Name: MARTIN ESPINOZA TN: (305) 825 8984

Address: 1301 W 72 ST Apt.#:

City: Hialeah ST: FL ZIP: 33014 INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cancel order Cust did Not Authorize chng
Is active in QMA
Has bill for $117.20

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-21-98 **Time:** 4:50 **AM** (PM) **(Circle One)**

CSR Name: Joaquin Munoz **Badge #:** _____

Customer Name: ELIDA Betanco **BTN:** (305) 547 1473

Address: 1729 NW 19 TER 5 **Apt.#:** _____

City: Miami **ST:** FL **ZIP:** 33125 **INF?** (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust did Not Authorize Change had bill for some calls to Nicaragua Related them to At&t's rates

She is still Active in QMF as of 2/22/98.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/12 Time: 5:20 AM (PM) (Circle One)

CSR Name: Joaquin Munoz Badge #:

Customer Name: Alicia Perez BTN: (305) 510 9424

Address: 7160 FAIRWAY DR J12 Apt.#:

City: Miami B ST: FL ZIP: 33014 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust did not authorize Change
has Restriction in QMF. 4/[illegible]/98
Had Outstanding bill for .02 which I credited.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-21-98 **Time:** 4:00 **AM (PM) (Circle One)**

CSR Name: Joaquin Munoz **Badge #:** _____

Customer Name: Diego Garcia **BTN:** (305) 557 4250

Address: 6410 W 22 CT **Apt.#:** _____

City: Hialeah **ST:** FL **ZIP:** 33012 **INF? OOF?** (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust did Not Authorize Change
has Restriction in OMF
No Payment is Necessary on her bill
and has a closing Statement

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-21-98 Time:_____ AM PM (Circle One)

CSR Name: Romelia AZA Badge #:_____

Customer Name: Marlenes Rodriguez BTN: 305-819-2892

Address: 71 E. 62 St. Apt.#:_____

City: Hialeah ST: Fl. ZIP: 33013 INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust was switched w/o authorization
Cust would like to cancel

RESEARCH: (For Customer Service Use Only)

Cust is active in Solar ✦ QMF.

RETURN CALL TO CUSTOMER

BY WHOM:_____ DATE:_____ TIME:_____

COMMENTS:_____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-21-98 Time: 8:15 (AM) PM (Circle One)

CSR Name: Melecia Alvarez Badge #: CSC

Customer Name: Fernandez Irene BTN: (305) 224-9146

Address: 4775 SW 6 ST Apt.#:

City: Miami ST: FL ZIP: 33134 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust wants to cancel she is not [redacted] satisfy with serv be cause snyder rep give her wrong info about the Freemin. she tell her that The Freemin could be use at any time any day

RESEARCH: (For Customer Service Use Only)

Solar I order

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-21-98 Time: _____ AM PM (Circle One)

CSR Name: Romelia AZA Badge #: _____

Customer Name: Jaime Flores BTN: 305-221-4363

Address: 10305 SW 40 St 117 Apt.#: _____

City: Miami ST: FL ZIP: 33165 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust called sd was switched w/o authorization would like to cancel.

RESEARCH: (For Customer Service Use Only)

cust is active in Solar and Qwt also rcvd bill.

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: [redacted] 4/20/98 Time: 7:19 (AM) PM (Circle One)

CSR Name: Luis Henderson Badge #: CSC/S

Customer Name: Continud Hanger S BTN: 305-752-1294

Address: 11070 SW 142 CT Apt.#:

City: Miami ST: FL ZIP: 33186 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cst Never Auth. to be switcher to GTECO.
he have recive a bill for 2.34, + credit. full amount. because he don't want GTECO.
he is happy w/ hes LD
Thank You.
CSC/S/LLH

RESEARCH: (For Customer Service Use Only)

QMF: Cst is Activate since 3/21/98.
Solar: Cst have + order since 3/13/98.
Created by THCMX10

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-21-98 Time: 7:10 (AM) PM (Circle One)

CSR Name: Melecio Alvarez Badge #: CSC

Customer Name: Chavez, Carlos S BTN: (305) 557-9964

Address: 1405 W 40 st Apt.#:

City: Higleah ST: FL ZIP: 33012 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust recive a bill from us which I give her credit for because she never request GTELD and she call to Cancel a month ago but she wasn't Cancel So please Cancel her order ASAP

RESEARCH: (For Customer Service Use Only)

Solar I order
MSOS (Cal Con) got a bill

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-21-98 Time:_____ AM PM (Circle One)

CSR Name: Romelia AZA Badge #:_____

Customer Name: Marlenes Rodriguez BTN: 305-819-2892

Address: 71 E. 62 St. Apt.#:_____

City: Hialeah ST: Fl. ZIP: 33013 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust was switched w/o authorization
Cust would like to cancel.

RESEARCH: (For Customer Service Use Only)

Cust is active in Solar + DMF.

RETURN CALL TO CUSTOMER

BY WHOM:_____ DATE:_____ TIME:_____

COMMENTS:_____

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-21-98 Time: 8:15 (AM) PM (Circle One)

CSR Name: Melecia Alvarez Badge #: CSC

Customer Name: Fernandez Irene BTN: (305) 224-9146

Address: 4775 SW 6 ST Apt.#:

City: Miami ST: FL ZIP: 33134 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

cust wants to cancel she is not [redacted] satisfy with serv because snyder rep give her wrong info about the Freemin. she tell her that The Freemin could be use at any time any day

RESEARCH: (For Customer Service Use Only)

Solar I order

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: [redacted] 4/20/98 Time: 7:19 (AM) PM (Circle One)

CSR Name: Luis Henderson. Badge #: CSC/S

Customer Name: Continud Hanuel S BTN: 305 - 752-1294

Address: 11070 SW 142 CT Apt.#:

City: Miami ST: FL ZIP: 33186. INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cst Never Auth. to be switcher to hTECO.
he have recive a bill for 2.34, I credit. full amount. because he don't want hTECO.
he is happy on hes CO.
Thank You.
CSC/9/LLH

RESEARCH: (For Customer Service Use Only)

QMF: Csr is Activate Since 3/21/98.
Solar: Csr have 1 order Since 3/13/98.
Created by TMCMX10

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-21-98 Time: 7:10 (AM) PM (Circle One)

CSR Name: Melecio Alvarez Badge #: CSC

Customer Name: Chavez, Carlos S BTN: (305) 557-9964

Address: 1405 W 40 st Apt.#:

City: Higleah ST: Fl ZIP: 33012 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust recive a bill from us which I give her credit for because she never request GTELD and she call to Cancel a month ago but she wasn't Cancel So please Cancel her order ASAP

RESEARCH: (For Customer Service Use Only)

Solar I order
MSOS (Cal Con) got a bill

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/28/98 Time: 9:38 (AM) PM (Circle One)

CSR Name: Naomi Ramos Badge #:

Customer Name: Hugo, Yanez BTN: 305-826-7456

Address: 10 E. 65 St 101 Apt.#:

City: Miami ST: FL ZIP: 33136 INF? OOE? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cx claim that her Brother made these calls and left to Peru. Cx claiming NOT to pay Due statement on acct. She has AT&T Serv

RESEARCH: (For Customer Service Use Only)

1) QWF - I ords - Due Statement

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date:_____ Time:_____ AM PM (Circle One)

CSR Name: Romelia Ara Badge #:_____

Customer Name Quincy Ocasio BTN: 305-545-6667

Address: 600 NW S. River Dr 401 Apt.#:_____

City: Miami ST: FL ZIP: 33136 INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust was switched w/o auth.
would like to cancel.

RESEARCH: (For Customer Service Use Only)

Cust is active in Solar and QMF

RETURN CALL TO CUSTOMER

BY WHOM:_____ DATE:_____ TIME:_____

COMMENTS:_____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date:_____ Time:_____ AM PM (Circle One)

CSR Name: Bomelia Aza Badge #:_____

Customer Name: Humberto Lopez BTN: 305-885-7457

Address: 55 W. 33 St Apt.#:_____

City: Hialeah ST: Fl. ZIP: 33122 INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust was switched w/o auth.
would like to cancel

RESEARCH: (For Customer Service Use Only)

Cust is active in Solar
W/R in QMF

RETURN CALL TO CUSTOMER

BY WHOM:_____ DATE:_____ TIME:_____

COMMENTS:_____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date:_____ Time:_____ AM PM (Circle One)

CSR Name: Romelia AzA Badge #:_____

Customer Name: Hilda Coy BTN: 305-649-5745

Address: 455 SW. 16 Ave Apt.#: B6

City: Miami ST: FL ZIP: 33135 INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cus was switched w/o auth.
Wants to Cancel.

RESEARCH: (For Customer Service Use Only)

Cus is active in Solar + QNF

RETURN CALL TO CUSTOMER

BY WHOM:_____ DATE:_____ TIME:_____

COMMENTS:_____

24604

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/29/98 Time: 10:57 (AM) PM (Circle One)

CSR Name: Sonia Estrada Badge #:

Customer Name: Florlagonca BTN: 305-620 5095

Address: 19941 NW 61-th AVE Apt.#:

City: Miami ST: FL ZIP: 33015 INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust call irate bcz is been rcvd letter frm bTE ~~F~~ she do not req. service. cust also claims she already cancel adus her order never was cancel. she will write to Florida central office. adus her desconnction date will be in 30 days.

RESEARCH: (For Customer Service Use Only)

QwF- Active 4/05/98
Solar - 1 order with total # Inter Plans
mods - bill .9 cents

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-29-98 Time: 1.50 AM (PM) (Circle One)

CSR Name: Luis Badge #:

Customer Name: Garcia, Juan BTN: 305-696 2057

Address: 839 E 29 ST Apt.#:

City: HIALEAH ST: FL ZIP: 33013 INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer was IRATE about bill she received. Refused to pay because she never authorized Switch. Canceled service

RESEARCH: (For Customer Service Use Only)

Solar - "I" order T4CRXG5 3.2.98 11:58
MSDS - Bill for 4.26
QMF - NOTHING IN QMF.

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-29-98 Time: _____ AM PM (Circle One)

CSR Name: Romelia Aza Badge #: _____

Customer Name: Jose BTN: 602-937-1632

Address: 291 E 4 St Apt.#: _____

City: Hialeah ST: FL ZIP: 85301 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust sd that she will have her ld changed does not want GTE

RESEARCH: (For Customer Service Use Only)

Cus has I order in Solar and L in QMP

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

24607

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-29-98 Time: _____ AM PM (Circle One)

CSR Name: Romelia AZA Badge #: _____

Customer Name: Andrew Fernandez BTN: 305-820-5062

Address: 7030 W. 10 Ave Apt.#: _____

City: Hialeah ST: Fl. ZIP: 33014 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust sd there is no one there by that nm. Wants ~~the~~ this LD cancelled.

RESEARCH: (For Customer Service Use Only)

Order is A in Solar & OAF

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

24608

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 04/29 Time: 7:45 AM (PM) (Circle One)

CSR Name: Wendy A Miller Badge #:

Customer Name: Castillo, Adalgisa BTN: (407) 380 6421

Address: 6410 TIDEWAVE ST Apt.#:

City: ORLANDO ST: FL ZIP: 32822 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT (NEEDED)

****

PROBLEM: (Pls, be very specific and describe thoroughly.)

Cust was changed W/O authorization.

RESEARCH: (For Customer Service Use Only)

Solar I 04/24
D

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 04/29 Time: 4:30 AM (PM) (Circle One)

CSR Name: Wendy A Miller Badge #: _____

Customer Name: Leisle Baitan BTN: (305)545 6740

Address: 468 SW 3RD ST Apt.#: _____

City: MIAMI ST: FL ZIP: 33130 INF? (OOF)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT (NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust was changed w/o authorization.

RESEARCH: (For Customer Service Use Only)

OMF: A 4/15
SOLAR: C 04/06

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 04/29 Time: 8:07 AM (PM) (Circle One)

CSR Name: Wendy A. Miller Badge #:

Customer Name: Osvaldo Rodriguez BTN: (305) 444 8809

Address: 4991 SW 11 ST Apt.#:

City: Miami ST: FL ZIP: 33134 INF? O(OF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust very upset because he never ordered GTEHD, he has an O order in Solar but he wants a letter stating that he doesn't have anything to do with GTE + that he never was Active with us. He doesn't want to receive any more bills.

RESEARCH: (For Customer Service Use Only)

BMF: R
SOLAR: O 05/07

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/29/98 Time: 10:50 AM (PM) (Circle One)

CSR Name: Francisco Cossio Badge #:

Customer Name: Roberto Hernandez BTN: 305 558 3274

Address: 2497 W 71 PL. Apt.#:

City: Hialeah ST: FL ZIP: 33016 INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust was change swth out his permission need
Serv. disc and switch back to BTT.

RESEARCH: (For Customer Service Use Only)

QMF D. 3/27/98
Bill 26-93 Due date May 9/98
Solar I order 3/12/98

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-29 Time: 5:43 AM (PM) (Circle One)

CSR Name: LAURA ARREOLA Badge #:

Customer Name: Ana Sariel BTN: 305-273-1607

Address: 6800 SW. 97 ave. Apt.#:

City: Miami ST: FL ZIP: 33173 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu was switched w/o Authorization
Would like to cancel

RESEARCH: (For Customer Service Use Only)

Solar - I order
NSOS - Bill - 3:47 credited
QMF - Restriccion 3-11

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/29/98 Time: 2:13 AM (PM) (Circle One)

CSR Name: Sonia Estrada Badge #:

Customer Name: Ernesto Guerra BTN: 305.8276457

Address: 297 E. 41th ST Apt.#:

City: Hialeah ST: FL ZIP: 33013 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cost call to cancel GTEFL did not req serv! would like be cancel. She is been rcvd a letter frm GTE. Do not wants service.

RESEARCH: (For Customer Service Use Only)

QMF - 4/10/98 Restriction with local. MSOS - no INFO Solar - I order.

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

24614

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/29/98 Time: 9:25 (AM) PM (Circle One)

CSR Name: Sonia Estrada Badge #:

Customer Name: Blanca Cordoba BTN: 305-557 6923

Address: 2861 W 76th ST Apt.#:

City: Hialeah ST: FL ZIP: 33016 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Costumer call 2 cancel GTECO did not req service would like be cancel is been recvd letter.

RESEARCH: (For Customer Service Use Only)

QwF- non info

Solar- 2 order with total $ Intc II

MSOS - no info

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

24615

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Exhibit REP-18
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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/29/98 Time: 10:38 (AM) PM (Circle One)

CSR Name: Sonia Estrada Badge #:

Customer Name: Lydia Diaz BTN: 305-5588756

Address: 1601 Meridian Ave. 3 Apt.#:

City: Miami ST: FL ZIP: 33139 INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cost call to cancel GTECO did not request service would like be cancel. Cus recvd bill for 6.00 but do not wants GTE

RESEARCH: (For Customer Service Use Only)

QwF - Active 2/22/98

MSOS - NO INFO

Solar - I order with Tom & Inter

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

24616

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-29 Time: _____ AM (PM) (Circle One)

CSR Name: Laura Arriola Badge #: _____

Customer Name: Rogue Mena BTN: 305-223-2057

Address: 9260 SW 38 st Apt.#: _____

City: Miami ST: FL ZIP: 33165 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust was changed w/o Authorization
Would like to cancel

RESEARCH: (For Customer Service Use Only)

Msos - Bill credited -3.97
Solar - 1 order
QMF - Deactivated - 2-9-98

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

24617

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-30-98 Time: 10:57 (AM) PM (Circle One)

CSR Name: Joa Peña Badge #:

Customer Name: Alba Leon BTN: 305 821 8622

Address: 6095 W. 19 AVE Apt.#:

City: Hialeah ST: FL ZIP: 33012 INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CUSTOMER switched w/o Auth
requested to cancel

RESEARCH: (For Customer Service Use Only)

OMF shows Active

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-30-98 Time: _____ AM PM (Circle One)

CSR Name: Romelia Aza Badge #: _____

Customer Name: Jaun Angel Perera BTN: 305-856-7367

Address: 428 SW. 9 ST Apt.#: _____

City: Miami ST: Fl. ZIP: 33130 INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust. sd was switched w/o auth.
would like to Cancel

RESEARCH: (For Customer Service Use Only)

Cust is active in Solar and pending
in QM

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 04-30-98 Time: 11:18 (AM) PM (Circle One)

CSR Name: Marco Peña Badge #:

Customer Name: Olga Hernandez BTN: (305) 545-7329

Address: 1059 NW 1st 1 Apt.#:

City: Miami ST: FL ZIP: 33135 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu call because he never order GTELD and he receive one Bill for 1.48 dollars and he receive a credit from G.T.E.

RESEARCH: (For Customer Service Use Only)

CALF CONTEL show that bill

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-30-98 Time: _____ AM PM (Circle One)

CSR Name: Romelia Aza Badge #: _____

Customer Name: Rosa Sardina BTN: 305-262-0957

Address: 5896 SW 25T Apt.#: _____

City: Miami Fl. ST: Fl. ZIP: 33144 INF? OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust was switched w/o auth.
would like to cancel.

RESEARCH: (For Customer Service Use Only)

Cust is active in Solar and QMF

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

24621

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/30/98 Time: 8:01 (AM) PM (Circle One)

CSR Name: Sonia Estrada Badge #:

Customer Name: Ricardo Peldez BTN: 305-6493187

Address: 1020 SW. 23 AVE 1 Apt.#:

City: Miami ST: FL ZIP: 33135 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer call to cancel GTECC did not req.. service is been recvd letter frm US. DO NOT wants Service.

RESEARCH: (For Customer Service Use Only)

QMF - Restriction 4/22/98
Solar - 1 order with total $ Inter II
MSOS - non INFO

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/30 Time: 4:22 AM (PM) (Circle One)

CSR Name: Dan Serrachilla Badge #:

Customer Name: JULIA QUINTERO BTN: 305-643-3078

Address: 750 NW. 13TH AVE Apt.#:

City: MIAMI ST: FL ZIP: 33125 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust. was charge to GTELD w/o authorization

RESEARCH: (For Customer Service Use Only)

I order 4/24/98

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/17/98 Time: 12:30 AM (PM) (Circle One)

CSR Name: Naomi Ramos Badge #:

Customer Name: Margarita, Puente BTN: 954-450-2083

Address: 364 NW 153 LN Apt.#:

City: Miami ST: FL ZIP: 33028 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Mr Puente Call Never claim to Author GTE LD Serv

RESEARCH: (For Customer Service Use Only)

Payment - Ordr not Found,

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-17-98 **Time:** 2:11 **AM** (PM) **(Circle One)**

CSR Name: Angel Garcia **Badge #:** CSC

Customer Name: Miguel Cardozo **BTN:** 305 825 9312

Address: 7086 W 29 way **Apt.#:**

City: Hialeah **ST:** FL **ZIP:** 33018 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) **NOT NEEDED**

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

cust was changed to GTE cust got a bill
cust req cancelation of order

RESEARCH: (For Customer Service Use Only)

Cust is active in OMF. Cust has
I order in saler.

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/17/98 **Time:** 4:45 **AM PM (Circle One)**

CSR Name: Flavia **Badge #:** _____

Customer Name: Almeida Liliana **BTN:** (305) 380 0512

Address: 15666 SW 95th LN **Apt.#:** _____

City: Miami **ST:** FL **ZIP:** 33196 **INF? (OOF?)**
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust never ReQ Cote long destance
she got letter By Mail. She likes to cancels.

RESEARCH: (For Customer Service Use Only)

She Has a F order In Sder.

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/18/98 Time: 1:52 (AM) (PM) (Circle One)

CSR Name: Naomi Ramos Badge #:

Customer Name: Mace, Portillo BTN: 305-326-0593

Address: 204 NW 11 Ave Apt.#:

City: Miami ST: FL ZIP: 33128 INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cu didn req GTE. Ser wants to cxc Serv

RESEARCH: (For Customer Service Use Only)

Reist ords, Payment Due

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-18-98 Time: 12:35 AM (PM) (Circle One)

CSR Name: Joaquin Munoz Badge #:

Customer Name: Ricardo Luke BTN: 305 642 4553

Address: 1350 NW 1 ST Apt.#:

City: Miami ST: FL ZIP: 33125 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Has Restriction on QMF 02/03/98
Has Bid for $6.42 credited
Cancel order

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 04.18.98 **Time:** 4:05 **AM** (PM) **(Circle One)**

CSR Name: Wendy A Miller **Badge #:** _____

Customer Name: Rogelio L. Gonzalez **BTN:** (305) 822-5626

Address: 2424 W 73Rd PL **Apt.#:** _____

City: Hialeah **ST:** FL **ZIP:** 33016 **INF? DOE?** **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer was changed to GTELD w/o authorization

RESEARCH: (For Customer Service Use Only)

Solar: Tordor 04/09/98
QME: 04/16 Active

RETURN CALL TO CUSTOMER

BY WHOM: _____ **DATE:** _____ **TIME:** _____

COMMENTS: _____

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 04.23.98 **Time:** 3:32 **AM** (PM) **(Circle One)**

CSR Name: Wendey A Miller **Badge #:**

Customer Name: Angel Cordova **BTN:** (305) 545 7935

Address: 425 SW 10 AVE 308 **Apt.#:**

City: Miami **ST:** FL **ZIP:** 33130 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT (NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Customer claims he never ordered GTECO, he doesn't even have a phone line. But the name + address that appear in the Bill are his.

RESEARCH: (For Customer Service Use Only)

Solar: I 02/19
OMF: A 3/05

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

FORM - SNYDER **CUSTOMER COMPLAINT**

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-24-98 Time: 5:20 AM (PM) (Circle One)

CSR Name: Joaquin Munoz Badge #:

Customer Name: Alejandro Crespo BTN: (305) 485 1725

Address: 1300 SW 55 ST Apt.#:

City: Miami ST: FL ZIP: 33125 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Is Deactive in QMF
Has Bill for #75.24

RESEARCH: (For Customer Service Use Only)

Cust is very upset she did not authorize switch, she wants to be called back and have this explained to her

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 04/24/98 Time: 5:00 AM (PM) (Circle One)

CSR Name: Joaquin Munoz Badge #: _____

Customer Name: Priscilla A Chavez BTN: 305-856-7635

Address: 1536 SW 9th St Apt.#: 34

City: Miami ST: FL ZIP: 33135 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Is active in QMF 3/05/98
Has T order in solar
Did not give permission for switch
Cancel order

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/24 [redacted] Time: 3:50 AM (PM) (Circle One)

CSR Name: Joaquin Munoz Badge #:

Customer Name: Enrique CARRERA BTN: (305) 696 5502

Address: 721 E 32 ST Apt.#:

City: Hialeah ST: FL ZIP: 33013 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Is Pending in QMF 4/22/98
Has Inter NM solar 4/21/98
No Bill found

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/24/98 Time: 3:30 AM (PM) (Circle One)

CSR Name: Francisco Cossio Badge #:

Customer Name: Chernisti Osvaldo BTN: 305 541 0255

Address: 2380 SW. 11 ST. Apt.#:

City: Miami ST: FL ZIP: 33135 INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust claim never req BTEL he need serv disc.

RESEARCH: (For Customer Service Use Only)

Solar I order 4/10/98
QMF Restricted 4/11/98
Bill Credit .58

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-24-98 Time: 7:50 AM (PM) (Circle One)

CSR Name: Joaquin Munoz Badge #: _____

Customer Name: LAURA Jurdoneta BTN: (305) 541 6143

Address: 3888 NW Seventh St Apt.#: _____

City: Miami ST: FL ZIP: 33126 INF? (OOF?)
(Circle ~~One~~)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Never ordered GTE LD
Cancel order
Is deactive in OMA

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: _____ DATE: _____ TIME: _____

COMMENTS: _____

24635

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-24-98 Time: 5:15 AM (PM) (Circle One)

CSR Name: Angel Garcia Badge #: C5c

Customer Name: Angel Davila BTN: 813 806 0283

Address: 6606 Memorial Hwy Apt.#:

City: Tampa ST: FL ZIP: 3315 (INF) OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust has loc GTE but doesn't want GTE Long Distance cust got a letter and wants to cancel service

RESEARCH: (For Customer Service Use Only)

deactivated in Qwest Order in Secco

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

24636

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-24-98 Time: 2:30 AM (PM) (Circle One)

CSR Name: Angel Garcia Badge #: CSC

Customer Name: Baret Margarita BTN: 305 225 4153

Address: 810 So. 12th Apt.#:

City: Miami ST: FL ZIP: 33184 INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust got 2 bills and wants the service to be canceled.

RESEARCH: (For Customer Service Use Only)

Active on QMF, I order in SOLAR

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-24-98 Time: 3:00 AM (PM) (Circle One)

CSR Name: Angel Garcia Badge #: C5C

Customer Name: Rodriguez, Virginia BTN: 305 643 0839

Address: 2003 SW. 2St Apt.#:

City: Miami ST: FL ZIP: 33135 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

cust got a letter and cust never asked for GTE cust wants to cancel.

RESEARCH: (For Customer Service Use Only)

Pending in QME Tracer inside.

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-24-98 Time: 6'15 AM (PM) (Circle One)

CSR Name: Angel Garcia Badge #: CSC

Customer Name: Lopez, Juan BTN: 305 885 9261

Address: 1350 W. 29 St Apt.#:

City: Hialeah ST: FL ZIP: 33012 INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust ~~[illegible]~~ never req GTE and be got 2 bills Cust wants to cancel service.

RESEARCH: (For Customer Service Use Only)

No info in OMF, Trader in Slap

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4-24-98 Time: 2:45 AM (PM) (Circle One)

CSR Name: Angel Garcia Badge #: CSC

Customer Name: Araujo, Norma BTN: 407 812 4065

Address: 1435 Tambourine dr. Apt.#:

City: Orlando ST: FL ZIP: 32837 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust was sent 2 bills she never ask for GTE and wants to cancel service.

RESEARCH: (For Customer Service Use Only)

deactivated in QME I order in Solar

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

24640

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 4/24/98 **Time:** 9:20 (AM) PM (Circle One)

CSR Name: Sonia Estrada **Badge #:**

Customer Name: Manuel Espindola **BTN:** 305-8257823

Address: 5779 W. 28 AVE **Apt.#:**

City: Hialeah **ST:** FL **ZIP:** 33016 **INF? OOF?** (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

lady name Magali bonnet call did not req. service B claims phone is on hey name not manuel she said he is her step father but he does not live there And she is been recvd bill she wont pay because she didnt req. Cos is vry irate would like be cancel. nand if she recvd anothe letter or bill she will sbit GTE For fraud.

RESEARCH: (For Customer Service Use Only)

Solar is I order with TOTAL 3
QMF: Active 2/02/98
MSOS: she got bill for 2.35

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

24641

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11/24/98 **Time:** 7:10 **AM (PM) (Circle One)**

CSR Name: Shelia Cramer

Sales Channel: ~~SNYDER~~ **IF / (OOF) (Circle One)**

Customer Type: (Circle One)
~~Consumer – Long Distance Only~~
~~Small Business-Long Distance Only~~
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)

		Other Complaint Types:
Rudeness	Pricing/Calling Plan Issue	
Unauthorized Switch	Rate Discrepancy	
~~Promotion Discrepancy~~	Misunderstanding	
Billing Issue	Payment Not Received	
Repair Problems	Provisioning	
Slammed	Cursed Customer	
~~Deceased Person~~		

Customer Service Group: (Circle One)

SITEL	AFNI
AFNI-TUCSON	BSC
THORNTON	PHONE MARTS
NIAGARA FALLS	REPAIR
ALPHARETTA	Other:

Customer First Name: Carl
Customer Last Name: Moll
Customer Address: 8445 NW. 165th ST.
City: Miami Lks. **State** FL. **Zip** 33016-6136.
Customer BTN: 305-826-8745 **Customer WTN (S):**
Social Security #:
If Available, Provide:
Birthdate:
Language:
Market:
Product:
Pricing Plan(s):

Please Circle: CUSTOMER REQUESTED CALLBACK (YES / NO **CUSTOMER THREATENING ESCALATION YES / NO)**

PROBLEM: (Please be very specific and describe thoroughly):
His service was switched w/o auth. Mr. Moll requested a ltr letter from Management Re. this switch.

RESEARCH/RESOLUTION: (What action did you take?):
Active in GMF.

24642

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 11/24/98 TIME 6:35 AM ____ (PM)

CSR NAME Jana Wilson BADGE # 88194

CUSTOMER NAME Melanie Gravois BTN # 4072753069

ADDRESS 12265 Fox Hound Ln APT # ____

CITY Orlando STATE FL ZIP CODE 32826

IS RESPONSE NEEDED? YES / NO PROJECT? ____

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

This customer was switched to GTE without her authorization. I checked both inbound & outbound. I did not find an order. She would like this investigated and a call back as soon as possible. Thanks.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1998 - Ø DMSS-N/O

RETURN CALL TO CUSTOMER

COMMENTS

24643

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11/23/98 Time: 7:05 AM (PM) (Circle One)

CR Name: Yami

Sales Channel: SNYDER IF / OOF (Circle One)

Customer Type: (Circle One)
- Consumer – Long Distance Only
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)

		Other Complaint Types:
Rudeness	Pricing/Calling Plan Issue	
Unauthorized Switch	Rate Discrepancy	
Promotion Discrepancy	Misunderstanding	
Billing Issue	Payment Not Received	
Repair Problems	Provisioning	
Slammed	Cursed Customer	
Deceased Person		

Customer Service Group: (Circle One)

SITEL	AFNI
AFNI-TUCSON	BSC
THORNTON	PHONE MARTS
NIAGARA FALLS	REPAIR
ALPHARETTA	Other:

Customer First Name: Rosanne
Customer Last Name: Petro (bill) Schuerman (BPMS)
Customer Address: 311 Bluejay Way
Orlando State Florida Zip 32828
Customer BTN: 407-384-8[illegible] Customer WTN (S):
Social Security #: N/A
If Available, Provide:
Birthdate:
Language: English
Market:
Product:
Long Plan(s):

Please Circle: CUSTOMER REQUESTED CALLBACK YES / NO CUSTOMER THREATENING ESCALATION YES / NO

PROBLEM: (Please be very specific and describe thoroughly):

Customer wants to know how line got switched. Says he has filed this incident to "Austin authorities." Please Call ASAP

RESEARCH/RESOLUTION: (What action did you take?):

24644

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

'oday's Date: 11/23/98 Time: 7:26. AM PM (Circle One)

R Name: Shelia Cramer.

's Channel: SNYDER IF OOF (Circle One)

tomer Type: (Circle One)
- Consumer – Long Distance Only
- ~~Small Business-Long Distance Only~~
- Consumer –Bundles
- Small Business-Bundles

plaint Type: (Circle One)

Rudeness	Pricing/Calling Plan Issue	Other Complaint Types:
Unauthorized Switch	Rate Discrepancy	
~~Promotion Discrepancy~~	Misunderstanding	
Billing Issue	Payment Not Received	
Repair Problems	Provisioning	
Slammed	Cursed Customer	
Deceased Person		

stomer Service Group: (Circle One)

SITEL	AFNI
AFNI-TUCSON	BSC
THORNTON	PHONE MARTS
NIAGARA FALLS	REPAIR
ALPHARETTA	Other:

omer First Name: Manuel
ustomer Last Name: Piedra.
ustomer Address: 7410 SW 87 CT.
: Miami State FL. Zip 33173-3577
ustomer BTN: 305-271-1713. Customer WTN (S):
al Security #:
Available, Provide:
hdate:
guage:
arket:
: luct:
icing Plan(s):

se Circle: CUSTOMER REQUESTED CALLBACK YES / NO CUSTOMER THREATENING ESCALATION YES / NO

OBLEM: (Please be very specific and describe thoroughly):

'would like full investigation. Person's name on bill has
deceased for 1 year.

EARCH/RESOLUTION: (What action did you take?):

Referred to LEC.
PIC - Active. Add = Active.

24645

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FORM-SNYDER **CUSTOMER COMPLAINT**

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4944

Today's Date: 11/23/98 **Time:** 7:21 **AM (PM)** (Circle One)

CSR Name: Naomi Smith

Sales Channel: ~~SNYDER~~ IF/OOF (Circle One)

Customer Type: (Circle One)
- ~~Consumer~~ – Long Distance Only
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- ~~Rudeness~~
- ~~Unauthorized Switch~~
- ~~Promotion Discrepancy~~
- Billing Issue
- Repair Problems
- Slammed
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types

Customer Service Group: (Circle One)
- SITEL
- WENTZVILLE
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- AFNI
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: MARIE + ROBERT

Customer Last Name: POST

Customer Address: 3316 BISHOP PARK OR

City: WINTER PARK **State** FL **Zip** 32792-2814

Customer BTN: 407-672-9084 **Customer WTN (S):** _____

Social Security #: _____

Birthdate: _____

Language: _____

Market: _____

Product: _____

Pricing Plan(s): _____

Please Circle: ESCALATION-YES ESCALATION-NO CALLBACK NEEDED-(YES) CALLBACK NEEDED-NO

PROBLEM: (Please be very specific and describe thoroughly):

With unauthorized switch?

RESEARCH/RESOLUTION: (What action did you take?):

24646

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FORM-SNYDER **CUSTOMER COMPLAINT**

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4944

Today's Date: 11/23/98 **Time:** 12:14 **AM** (PM) **(Circle One)**

CSR Name: _____

Sales Channel: SNYDER IF/OOF (Circle One)

Customer Type: (Circle One)
(Consumer – Long Distance Only)
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)
Rudeness
(Unauthorized Switch)
Promotion Discrepancy
Billing Issue
Repair Problems
Slammed
Deceased Person

Pricing/Calling Plan Issue
Rate Discrepancy
Misunderstanding
Payment Not Received
Provisioning
Cursed Customer

Other Complaint Types:
_____
_____
_____
_____
_____

Customer Service Group: (Circle One)
SITEL
WENTZVILLE
THORNTON
NIAGARA FALLS
ALPHARETTA

AFNI
BSC
PHONE MARTS
REPAIR
Other: _____

Customer First Name: Lucia [redacted]
Customer Last Name: Romero
Customer Address: 5050 NW 7th St.
City: Miami **State** Fl **Zip** 33126
Customer BTN: 305 461-3403 **Customer WTN (S):** _____
Social Security #: _____
Birthdate: _____
Language: Spanish
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: ESCALATION-YES ESCALATION-NO CALLBACK NEEDED-YES CALLBACK NEEDED-NO

PROBLEM: **(Please be very specific and describe thoroughly):**

Lady didn't authorize switch and she has a bill for $200.00.

RESEARCH/RESOLUTION: (What action did you take?):

24647

DATE TURNED IN: November 23, 1998 DATE COMPLETED: ____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE November 23, 1998 TIME 5:57 AM ____ PM ✓

CSR NAME Cheryl Scott BADGE # 19217

CUSTOMER NAME Howard August BTN # (954) 475-2526

ADDRESS 2786 S. University Dr APT # ____

CITY Davie STATE FL ZIP CODE 33328-1420

IS RESPONSE NEEDED? ~~YES~~/NO PROJECT? GTE LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Mr. August was highly upset because he believes he was slammed by GTE. He wants to know who authorized the switch & when it was done. He was very irate & ~~[illegible]~~ said he is going to call the FCC in the morning.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

I apologized to him & thanked him for bringing it to our attention.

1998-E

Snyder-TC, 3160 dcm 11/05 EFF 11/20

RETURN CALL TO CUSTOMER

COMMENTS

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 11/23/98 TIME 1657 AM _____ PM ✓

CSR NAME Elaine Timms BADGE # 7367

CUSTOMER NAME Patricia Pedroso BTN # 305 251 0770

ADDRESS 10900 SW 116th APT # _____

CITY Miami STATE FL ZIP CODE 33176

IS RESPONSE NEEDED? (YES) NO PROJECT? long d

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

customer has been switched to GTE w/o permission has received two confirmation letters on Nov. 11 & Nov 19. Needs explanation.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

No order

1998 - a

Snyder - TC, 360 dom 11/12 EFF 12/01

RETURN CALL TO CUSTOMER

COMMENTS

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FORM-SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4944

Today's Date: 11-23-98 **Time:** 9:54 (AM) PM (Circle One)

CSR Name: Veronica Riggs

Sales Channel: (SNYDER) IF/~~BOF~~ (Circle One)

Customer Type: (Circle One)
- ~~Consumer – Long Distance Only~~
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)

Rudeness	Pricing/Calling Plan Issue	Other Complaint Types:
Unauthorized Switch	Rate Discrepancy	
Promotion Discrepancy	Misunderstanding	
Billing Issue	Payment Not Received	
~~Repair Problems~~	Provisioning	
(~~Slammed~~)	Cursed Customer	
Deceased Person		

Customer Service Group: (Circle One)

SITEL	(~~AFNI~~)
WENTZVILLE	BSC
THORNTON	PHONE MARTS
NIAGARA FALLS	REPAIR
ALPHARETTA	Other:

Customer First Name: Marie Claire
Customer Last Name: Bruno
Customer Address: 1155 NE 137St
City: Miami **State** FL **Zip** 33161
Customer BTN: 305-891-0879 **Customer WTN (S):** 305-891-0879
Social Security #: N-A
Birthdate:
Language:
Market:
Product:
Billing Plan(s):

Please Circle: ESCALATION-(YES) ESCALATION-NO CALLBACK NEEDED-YES CALLBACK NEEDED-NO

PROBLEM: (Please be very specific and describe thoroughly):
Lu was switched w/out permission, does not speak English. Please contact Abel Estassin at 9825 collids Ave Miami Beach FL 33140

RESEARCH/RESOLUTION: (What action did you take?):
Sent out all bills

24650

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-22-98 **Time:** 4:40 **AM** (PM) (Circle One)

CSR Name: Aaron Doty

Sales Channel: SNYDER IF / (OOF) (Circle One)

Customer Type: (Circle One)
(Consumer – Long Distance Only)
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)

Rudeness	Pricing/Calling Plan Issue	Other Complaint Types:
Unauthorized Switch	Rate Discrepancy	
Promotion Discrepancy	Misunderstanding	
Billing Issue	Payment Not Received	
~~Repair Problems~~	Provisioning	
(Slammed)	Cursed Customer	
~~Deceased Person~~		

Customer Service Group: (Circle One)

SITEL	(AFNI)
AFNI-TUCSON	BSC
THORNTON	PHONE MARTS
NIAGARA FALLS	REPAIR
ALPHARETTA	Other:

Customer First Name: Wolfgang
Customer Last Name: Gihr
Customer Address: 6166 NE 195 St
City: Miami **State** FL **Zip** 33179
Customer BTN: 305+653-5406 **Customer WTN (S):**
Social Security #:
If Available, Provide:
Birthdate:
Language:
Market:
Product:
Pricing Plan(s):

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION (YES) / NO

PROBLEM: (Please be very specific and describe thoroughly):

RESEARCH/RESOLUTION: (What action did you take?):

24651

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FORM-SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4944

Today's Date: 11/21/98 **Time:** 2:12 **AM (PM)** (Circle One)

CSR Name: Naomi Smith

Sales Channel: SNYDER IF/(OOF) (Circle One)

Customer Type: (Circle One)
(Consumer) Long Distance Only
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)
Rudeness
(Unauthorized Switch)
Promotion Discrepancy
Billing Issue
Repair Problems
Slammed
Deceased Person

Pricing/Calling Plan Issue
Rate Discrepancy
Misunderstanding
Payment Not Received
Provisioning
Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
SITEL
WENTZVILLE
THORNTON
NIAGARA FALLS
ALPHARETTA
(AFNI)
BSC
PHONE MARTS
REPAIR
Other: _____

Customer First Name: FRANKLIN
Customer Last Name: WAYNE
Customer Address: 16152 EMERALD COVE RD
City: WESTON **State** FL **Zip** 33331
Customer BTN: 954-385-9024 **Customer WTN (S):** _____
Social Security #: _____
Birthdate: _____
Language: _____
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: ESCALATION-YES ESCALATION-NO CALLBACK NEEDED-(YES) CALLBACK NEEDED-NO

PROBLEM: (Please be very specific and describe thoroughly):

Customer never ordered service. Called 3x and no one cancelled her. Wants to know who authorized switch + why no action was taken the 1st few times she called.

RESEARCH/RESOLUTION: (What action did you take?):

24652

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-21-98 **Time:** 4:35 AM (PM) (Circle One)

CSR Name: Rachel A

Sales Channel: SNYDER IF / (OOF) (Circle One)

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- Unauthorized Switch
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- (Slammed)
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Carl
Customer Last Name: Mills
Customer Address: 291 NE 152nd St
City: N Miami Beach **State** FL **Zip** 33162
Customer BTN: 305-947-2945 **Customer WTN (S):** _____
Social Security #: _____
If available, Provide:
Birthdate: _____
Language: _____
Market: _____
Product: _____
Calling Plan(s): _____

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION (YES) / NO

PROBLEM: (Please be very specific and describe thoroughly):
Want to know how they were switched and Why

RESEARCH/RESOLUTION: (What action did you take?): filled out this form

24653

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FORM-SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4944

Today's Date: 11-21-98 **Time:** 10:30 (AM) PM (Circle One)

CSR Name: JUAN VAZQUEZ

Sales Channel: SNYDER IF (OOF) (Circle One)

Customer Type: (Circle One)
(Consumer – Long Distance Only)
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)

Rudeness	Pricing/Calling Plan Issue	Other Complaint Types:
(Unauthorized Switch)	Rate Discrepancy	
Promotion Discrepancy	Misunderstanding	
Billing Issue	Payment Not Received	
Repair Problems	Provisioning	
Slammed	Cursed Customer	
Deceased Person		

Customer Service Group: (Circle One)

SITEL	(AFNI)
WENTZVILLE	BSC
THORNTON	PHONE MARTS
NIAGARA FALLS	REPAIR
ALPHARETTA	Other:

Customer First Name: HERMINIA
Customer Last Name: ABRIL
Customer Address: 9240 FONTAINEBLEAU BLVD Apt 506
City: Miami **State** FL **Zip** 33172
Customer BTN: // **Customer WTN (S):**
Social Security #: //
Birthdate: //
Language: SPANISH
Market: //
Product: //
Pricing Plan(s): //

Please Circle: ESCALATION-YES ESCALATION-(NO) CALLBACK NEEDED-(YES) CALLBACK NEEDED-NO

PROBLEM: (Please be very specific and describe thoroughly):

CUSTOMER WANTS TO KNOW WHO CHANGED HER SERV. CALL BACK PLEASE.

RESEARCH/RESOLUTION: (What action did you take?):

24654

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: Nov. 21, 1998 **Time:** 12:55 **AM (PM)** (Circle One)

CSR Name: Makeba T. Moore

Sales Channel: SNYDER **IF / (OOF)** (Circle One)

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- Unauthorized Switch
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- (Slammed)
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- AFNI-TUCSON
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Hart
Customer Last Name: Lilly
Customer Address: 2655 SW 25th Ave.
City: Miami **State** FL. **Zip** 33133
Customer BTN: 305-285-5888 **Customer WTN (S):** 305-285-5888
Social Security #: N/A
If Available, Provide:
Birthdate:
Language:
Market:
Product:
Pricing Plan(s):

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION (YES) / NO

PROBLEM: (Please be very specific and describe thoroughly):

Lisa never wanted GTE LD were upset at first but did calm down. She wants to know how her service got switched to GTE LD.

RESEARCH/RESOLUTION: (What action did you take?):

24655

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: NOV 30,1998 **Time:** 10:30 (AM) PM (Circle One)

CSR Name: Angelica Vazquez

Sales Channel: (SNYDER) IF / OOF (Circle One)

Customer Type: (Circle One)
(Consumer – Long Distance Only)
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)

Rudeness	Pricing/Calling Plan Issue	Other Complaint Types:
(Unauthorized Switch)	Rate Discrepancy	
Promotion Discrepancy	Misunderstanding	
Billing Issue	Payment Not Received	
Repair Problems	Provisioning	
Slammed	Cursed Customer	
Deceased Person		

Customer Service Group: (Circle One)

SITEL	(AFNI)
AFNI-TUCSON	BSC
THORNTON	PHONE MARTS
NIAGARA FALLS	REPAIR
ALPHARETTA	Other:

Customer First Name: Edgar
Customer Last Name: Ortiz
Customer Address: 6016 E 38TH ST
City: Tampa **State** FL **Zip** 33613
Customer BTN: 305 694-1425 **Customer WTN (S):**
Social Security #:
If Available, Provide:
Birthdate:
Language:
Market:
Product:
Pricing Plan(s):

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) NO CUSTOMER THREATENING ESCALATION YES (NO)

PROBLEM: (Please be very specific and describe thoroughly):
Wants to know how the switch happens

RESEARCH/RESOLUTION: (What action did you take?):

CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 11/30/98 Time: 5:43 AM (PM) (Circle One)

CSR Name: Naomi Smith Badge #:

Customer Name: Emily Dowling BTN: 407-664-3927

Address: 1313 Rockwood Rd Apt.#:

City: Winter Park ST: FL ZIP: 32789 INF? (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust unauthorized switch, How + Why happened??

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 11/30/98 Time: 7134 AM (PM) (Circle One)

CSR Name: Naomi Smith Badge #:

Customer Name: IVENER VERNELUS BTN: 305-769-0527

Address: 251 NW 139th St Apt.#:

City: Miami ST: FL ZIP: 33168 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: (ESCALATION NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

CUST. NEIGH RKO SERV. DOES NOT WANT ANYMORE TO DO W/GTELD. WANTS TO KNOW WHO + WHY THIS ICORPS COMING UP. EVEN THOU HE CALLS TO CANC. CALL BACK REQ.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 11/30/98 Time: 11:38 (AM) PM (Circle One)

CSR Name: SAUL Flores Badge #:

Customer Name: FERNANDO Espino BTN: 305-662-4805

Address: refuses to give correct address Apt.#:

City: ST: ZIP: INF? OOF? (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cx wants to know how and why FD was switched, who authorized it - states address on acct. is incorrect - hasn't been at that address for 11 mos - refused to give correct address - acct. open since Oct -

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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FORM - SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 11/30/98 Time: 12:58 AM (PM) (Circle One)

CSR Name: Naomi Smith Badge #:

Customer Name: ERNEST CARPENTER BTN: 305-621-8507

Address: 840 NW 116TH TER Apt.#:

City: MIAMI ST: FL ZIP: 33169 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (Cruger NEEDED) NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

SWITCHED W/OUT AUTHORIZATION, WITH 4 HOW? CALL BACK.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 11-30-98 Time: 4:39 AM (PM) (Circle One)

CSR Name: Pat Allen Badge #:

Customer Name: Juan Hernandez BTN: 407-292-4477

Address: 5555 Pitch Pine Dr. Apt.#:

City: Orlando ST: FL ZIP: 32819 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust would like To speak To someone
who can explain who slammed him
he wants To take the person to court

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: DATE: TIME:

COMMENTS:

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FORM-SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4944

Today's Date: 11-30-98 **Time:** 5:00 **AM** (PM) **(Circle One)**

CSR Name: Erin M

Sales Channel: (SNYDER) IF (OOF) (Circle One)

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)

Rudeness	Pricing/Calling Plan Issue	Other Complaint Types:
Unauthorized Switch	Rate Discrepancy	
Promotion Discrepancy	Misunderstanding	
Billing Issue	Payment Not Received	
Repair Problems	Provisioning	
(Slammed)	Cursed Customer	
Deceased Person		

Customer Service Group: (Circle One)

SITEL	(AFNI)
WENTZVILLE	BSC
THORNTON	PHONE MARTS
NIAGARA FALLS	REPAIR
ALPHARETTA	Other:

Customer First Name: Elizabeth ~~Howard~~
Customer Last Name: Howard
Customer Address: 1860 NE 123rd Apt #411
City: N Miami **State** FL **Zip** 33161
Customer BTN: 305-895-3146 **Customer WTN (S):** Same.
Social Security #:
Birthdate:
Language:
Market:
Product:
Pricing Plan(s):

Please Circle: ESCALATION-YES ESCALATION-NO (CALLBACK NEEDED-YES) CALLBACK NEEDED-NO

PROBLEM: (Please be very specific and describe thoroughly):

Mom wants written verification of deal that Elizabeth signed up for GTELA. Her # is 706-442-3383. She says order # is 17709814

RESEARCH/RESOLUTION: (What action did you take?):

DATE TURNED IN: _____ DATE COMPLETED: ___

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 11-20-98 TIME _____ AM _____ PM _____

CSR NAME Liz BADGE # _____

CUSTOMER NAME Beatrice Riera BTN # 3055530571

ADDRESS _____ APT # _____

CITY _____ STATE _____ ZIP CODE _____

IS RESPONSE NEEDED? (YES) NO PROJECT? long distance

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

unauthorized switch

Call back.

confirmation letter is addressed to a Ramon

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1998 Ø DMS-N/D

RETURN CALL TO CUSTOMER

COMMENTS

24663

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11/30/98 **Time:** 12:00 **AM (PM)** (Circle One)

CSR Name: Michael Fitzgerald

Sales Channel: SNYDER **IF / (OOF)** (Circle One)

Customer Type: (Circle One)
Consumer – Long Distance Only
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)

Rudeness	Pricing/Calling Plan Issue	Other Complaint Types:
Unauthorized Switch	Rate Discrepancy	
Promotion Discrepancy	Misunderstanding	
Billing Issue	Payment Not Received	
Repair Problems	Provisioning	
Slammed	Cursed Customer	
Deceased Person		

Customer Service Group: (Circle One)

SITEL	AFNI
AFNI-TUCSON	BSC
THORNTON	PHONE MARTS
NIAGARA FALLS	REPAIR
ALPHARETTA	Other:

Customer First Name: Richard
Customer Last Name: Fisher
Customer Address: 13100 SW 19 AVE
City: MIAMI **State** FL **Zip** 33176
Customer BTN: 305-378-9897 **Customer WTN (S):**
Social Security #: [redacted]

If Available, Provide:
Birthdate:
Language:
Market:
Product:
Pricing Plan(s):

Please Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION (YES) / NO

PROBLEM: (Please be very specific and describe thoroughly):

This is the second time this person has been slammed. DO NOT SOLICIT!

RESEARCH/RESOLUTION: (What action did you take?):

DATE TURNED IN: _____ DATE COMPLETED: ____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 30 Nov 98 TIME _____ AM _____ PM _____

CSR NAME Kathy Sanders BADGE # 87911

CUSTOMER NAME Mrs. Jose Lugo BTN # (305) 631-4016

ADDRESS 47 NW 33rd Ave APT # _____

CITY Miami STATE FL ZIP CODE 33142

IS RESPONSE NEEDED? YES / NO PROJECT? UD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Customer was shunned by GTE. After getting on the phone & AFNI for customer, customer was offered to issue a credit of $75.14 on a balance of (104.35). Customer felt that since GTE shunned her that GTE should be responsible for the full amount. If GTE is not willing to pay full amount then customer is going to file a law suit against GTE. Customer wants to file a complaint & have a response from someone at the corporate level to respond in writing for that someone to be able to speak upon.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Took complaint as stated by customer and let someone know that customer will not pay full amt if the full amount is paid and customer is switched back to AT&T. AFNI got customer straight to GTE and credit of 75.14 applied to account. Talked to Sup Brian S. RETURN CALL TO CUSTOMER in the amount of your now than 75.14 credit

COMMENTS 1997-0 DMSS-N/O

24665

DATE TURNED IN: 11-30-98 DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 11-30-98 TIME 12:17 pm AM _____ PM X

CSR NAME Dalton Bullard BADGE # 87749

CUSTOMER NAME Michael Oliver BTN # 305-673-5407

ADDRESS 3121 Sheridan APT # _____

CITY Miami Beach STATE FL ZIP CODE 33140

IS RESPONSE NEEDED? (YES) NO PROJECT? LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Cust was switched to GTE LD w/out permission. He wants the tape pulled so that he may review the conversation.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1998- @ DMSS- N/O

RETURN CALL TO CUSTOMER

COMMENTS

24666

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CUSTOMER COMPLAINT FORM - ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)

Fax to: Quality Assurance Department - GTECC @ 372/465-4867

Today's Date: 11/30/98 4:52:40 PM

CSR Name: JOSE PENA

Sales Channel: SNYDER OOF

Customer Type: CONSUMER - LONG DISTANCE ONLY

Complaint Type: UNAUTHORIZED SWITCH/SLAMMED

Misc. Complaint Type:

Customer Service Group: AFNI CSC

Customer First Name: DAVID

Customer Last Name: JENKINS

Customer Address: 1521 ALTON RD

City: MIAMI BE State: FL Zip: 33139

Customer BTN: 305-253-7117 Customer WTN: 305-253-7117

Social Security #:

If Available, Provide:

Birthdate:

Language: ENGLISH

Market:

Product:

Pricing Plan(s):

CUSTOMER REQUESTED CALLBAC [No] CUSTOMER REQUESTED ESCALATION: [Yes]

PROBLEM: (Please be very specific and describe thoroughly):

WAS SWITCHED W/O AUTH THREATEN TO CALL THE FEDERAL COMMUNICATION CENTER HAD CALLS TO UK

RESEARCH/RESOLUTION: (What action did you take?):

TOLD CUS I WAS GONNA CANC OFFER TO RERATE CALLS TO UK THEN HE TOLD ME HE WAS NOT GONNA PAY EVEN IF WE RERATED THE CALLS AND HUNG UP ON ME

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FORM-SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4944

Today's Date: 11-27-98 **Time:** 11:28 (AM) PM **(Circle One)**

CSR Name: Jennette Lee

Sales Channel: SNYDER IF/(OOF) (Circle One)

Customer Type: (Circle One)
Consumer – Long Distance Only
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)

		Other Complaint Types
Rudeness	Pricing/Calling Plan Issue	
Unauthorized Switch	Rate Discrepancy	
Promotion Discrepancy	Misunderstanding	
Billing Issue	Payment Not Received	
~~Repair Problems~~	Provisioning	
(Slammed)	Cursed Customer	
Deceased Person		

Customer Service Group: (Circle One)

SITEL	(AFNI)
WENTZVILLE	BSC
THORNTON	PHONE MARTS
NIAGARA FALLS	REPAIR
ALPHARETTA	Other:

Customer First Name: Edward
Customer Last Name: Young
Customer Address: 2411 SW 37th St
City: Miami **State** FL **Zip** 33155
Customer BTN: (305) 221-9396 **Customer WTN (S):**
Social Security #:
Birthdate:
Language:
Market:
Product:
Pricing Plan(s):

Please Circle: ESCALATION-(YES) ESCALATION-NO CALLBACK NEEDED-(YES) CALLBACK NEEDED-NO

PROBLEM: (Please be very specific and describe thoroughly):

This customer's service was taken over and he wants to know why and how it happened.

RESEARCH/RESOLUTION: (What action did you take?):

24668

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FORM-SNYDER **CUSTOMER COMPLAINT**

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4944

Today's Date: 11-27-98 **Time:** 11:06 (AM) PM **(Circle One)**

CSR Name: Dorothy Lee

Sales Channel: SNYDER (IFOOF) **(Circle One)**

Customer Type: (Circle One)
Consumer – Long Distance Only
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)

Rudeness	Pricing/Calling Plan Issue	Other Complaint Types
Unauthorized Switch	Rate Discrepancy	
Promotion Discrepancy	Misunderstanding	
Billing Issue	Payment Not Received	
Repair Problems	Provisioning	
(Slammed)	Cursed Customer	
Deceased Person		

Customer Service Group: (Circle One)

SITEL	(AFNI)
WENTZVILLE	BSC
THORNTON	PHONE MARTS
NIAGARA FALLS	REPAIR
ALPHARETTA	Other:

Customer First Name: Timothy
Customer Last Name: Clouser
Customer Address: 4414 Clairmont Ave
City: Sarasota **State** FL **Zip** 34231
Customer BTN: (941)925-9077 **Customer WTN (S):**
Social Security #:
Birthdate:
Language:
Market:
Product:
Pricing Plan(s):

Please Circle: ESCALATION-YES ESCALATION-NO CALLBACK NEEDED-YES CALLBACK NEEDED-NO

PROBLEM: **(Please be very specific and describe thoroughly):**

This customer's service was taken over by GTE and she wants to know why and how it happened. During the day she can be reached at work at (941)925-9908

RESEARCH/RESOLUTION: (What action did you take?):

24669

FORM-SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED OUT COMPLETELY)

Fax to: Quality Assurance Department – GTECC @ 972/465-4944

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Today's Date: 11/28/98 **Time:** 5116 **AM** (PM) **(Circle One)**

CSR Name: Naomi Smith

Sales Channel: SNYDER IF/(OOF) (Circle One)

Customer Type: (Circle One)
(Consumer) – Long Distance Only
~~Small Business~~-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)
~~Rudeness~~
(Unauthorized Switch)
~~Promotion Discrepancy~~
Billing Issue
Repair Problems
Slammed
Deceased Person

Pricing/Calling Plan Issue
Rate Discrepancy
Misunderstanding
Payment Not Received
Provisioning
Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
SITEL
WENTZVILLE
THORNTON
NIAGARA FALLS
ALPHARETTA
(AFNI)
BSC
PHONE MARTS
REPAIR
Other: _____

Customer First Name: Harold

Customer Last Name: Marcano

Customer Address: 107 Royal Pic Dr

City: Oakland Park **State** FL **Zip** 33309

Customer BTN: 954-730-8617 **Customer WTN (S):** _____

Social Security #: _____

Birthdate: _____

Language: _____

Market: _____

Product: _____

Pricing Plan(s): _____

Please Circle: ESCALATION-(YES) ESCALATION-NO CALLBACK NEEDED-(YES) CALLBACK NEEDED-NO

PROBLEM: (Please be very specific and describe thoroughly):

Who authorized? Customer will not pay bill bill called back w/ answers. Call has been routed to AFT @ 5:16.

RESEARCH/RESOLUTION: (What action did you take?):

24670

FORM-SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4944

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Today's Date: 11/29/98 Time: 6:29 AM (PM) (Circle One)

CSR Name: Naomi Smith

Sales Channel: SNYDER IF (OOF) (Circle One)

Customer Type: (Circle One)
(Consumer – Long Distance Only)
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)
Rudeness
(Unauthorized Switch)
Promotion Discrepancy
Billing Issue
Repair Problems
Slammed
Deceased Person
Pricing/Calling Plan Issue
Rate Discrepancy
Misunderstanding
Payment Not Received
Provisioning
Cursed Customer
Other Complaint Types: _____

Customer Service Group: (Circle One)
SITEL
WENTZVILLE
THORNTON
NIAGARA FALLS
ALPHARETTA
(AFNI)
BSC
PHONE MARTS
REPAIR
Other: _____

Customer First Name: IRMA
Customer Last Name: LOPEZ
Customer Address: 1917 WINDSOR OAK DR
City: APOPKA State FL Zip 32703
Customer BTN: 407-884-1810 Customer WTN (S): _____
Social Security #: _____
Birthdate: _____
Language: _____
Market: _____
Product: _____
Pricing Plan(s): _____

Please Circle: ESCALATION-(YES) ESCALATION-NO CALLBACK NEEDED-(YES) CALLBACK NEEDED-NO

PROBLEM: (Please be very specific and describe thoroughly):

CUST UNWILLING TO PAY BILL UNTIL INVESTIGATION DONE ON WHO AUTHORIZED SWITCH. HOW, WHY SWITCH OCCURRED???

RESEARCH/RESOLUTION: (What action did you take?):

24671

FORM-SNYDER **CUSTOMER COMPLAINT**

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4944

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Today's Date: 11/27/98 **Time:** 2:40 **AM** **PM** (Circle One)

CSR Name: Dxel

Sales Channel: SNYDER IF/OOF (Circle One)

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- (Rudeness)
- (Unauthorized Switch)
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- Slammed
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
- SITEL
- WENTZVILLE
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Carlos
Customer Last Name: Perez
Customer Address: 7525 SW 61 St
City: Miami **State** FL **Zip** 33143
Customer BTN: (305)661 1229 **Customer WTN (S):** _____
Social Security #:
Birthdate:
Language: english
Market: Sydney
Product:
Pricing Plan(s):

Please Circle: ESCALATION-YES ESCALATION-NO CALLBACK NEEDED-YES CALLBACK NEEDED-NO

PROBLEM: (Please be very specific and describe thoroughly):

very angry man.

RESEARCH/RESOLUTION: (What action did you take?):

24672

DATE TURNED IN: _____ DATE COMPLETED: ___

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 11-25-98 TIME 4:25 AM ____ PM ✓

CSR NAME Donnie Avila BADGE # 119848

CUSTOMER NAME Melda ~~Eva~~ Garcia BTN # 8136342544

ADDRESS PO Box 1386 APT # ____

CITY Wimauma STATE FL ZIP CODE 33598

IS RESPONSE NEEDED? (YES) NO PROJECT? LD

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

8136346044 8:30-5:00pm can be reached at. Customer was slammed by GTE. She has already received a credit but she wants further action. She was very upset and wants someone to call her back concerning her unauthorized switch.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1998 - 6/8/98 site 40 4461992 156569617
Verified - tape 8706 10243 ANI 7381
Snyder-TC, 360 dom, 2cc 10/29 FF 11/09

RETURN CALL TO CUSTOMER

COMMENTS

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CUSTOMER COMPLAINT FORM – ETHNIC/INTL MARKETING

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4867

Today's Date: 11-25-98 **Time:** 7:40 **AM (PM)** (Circle One)

CSR Name: Rachel A

Sales Channel: SNYDER IF / (OOF) (Circle One)

Customer Type: (Circle One)
(Consumer) Long Distance Only
Small Business-Long Distance Only
Consumer –Bundles
Small Business-Bundles

Complaint Type: (Circle One)
Rudeness
(Unauthorized Switch)
Promotion Discrepancy
Billing Issue
Repair Problems
(Slammed)
Deceased Person

Pricing/Calling Plan Issue
Rate Discrepancy
Misunderstanding
Payment Not Received
Provisioning
Cursed Customer

Other Complaint Types: _____

Customer Service Group: (Circle One)
SITEL
AFNI-TUCSON
THORNTON
NIAGARA FALLS
ALPHARETTA

(AFNI)
BSC
PHONE MARTS
REPAIR
Other: _____

Customer First Name: Michael
Customer Last Name: Cook
Customer Address: 10032 Arbor Ridge Tr
City: Orlando **State** FL **Zip** 32817
Customer BTN: 407-384-0883 **Customer WTN (S):** _____
Social Security #: _____
If Available, Provide:
Birthdate: _____
Language: _____
Market: _____
Product: _____
Pricing Plan(s): _____

Issue Circle: CUSTOMER REQUESTED CALLBACK (YES) / NO CUSTOMER THREATENING ESCALATION (YES) / NO

PROBLEM: (Please be very specific and describe thoroughly):
Want to know who switched their service and why

RESEARCH/RESOLUTION: (What action did you take?):

24674

FORM-SNYDER

CUSTOMER COMPLAINT

(MUST BE FILLED OUT COMPLETELY)
Fax to: Quality Assurance Department – GTECC @ 972/465-4944

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Today's Date: 11-24-98 **Time:** 11:30 ~~AM~~ **PM (Circle One)**

CSR Name: Erin M.

Sales Channel: (SNYDER) IF/(OOF) (Circle One)

Customer Type: (Circle One)
- (Consumer – Long Distance Only)
- Small Business-Long Distance Only
- Consumer –Bundles
- Small Business-Bundles

Complaint Type: (Circle One)
- Rudeness
- (Unauthorized Switch)
- Promotion Discrepancy
- Billing Issue
- Repair Problems
- Slammed
- Deceased Person
- Pricing/Calling Plan Issue
- Rate Discrepancy
- Misunderstanding
- Payment Not Received
- Provisioning
- Cursed Customer
- Other Complaint Type: _____

Customer Service Group: (Circle One)
- SITEL
- WENTZVILLE
- THORNTON
- NIAGARA FALLS
- ALPHARETTA
- (AFNI)
- BSC
- PHONE MARTS
- REPAIR
- Other: _____

Customer First Name: Michael
Customer Last Name: Augustine
Customer Address: 6800 NW 39th ST. AVE
City: Coconut Creek **State** FL **Zip** 33073
Customer BTN: 954-428-5322 **Customer WTN (S):** SAME
Social Security #:
Birthdate:
Language: English.
Market:
Product:
Pricing Plan(s):

Please Circle: ESCALATION-YES ESCALATION-NO (CALLBACK NEEDED-YES) CALLBACK NEEDED-NO

PROBLEM: (Please be very specific and describe thoroughly):

Customer was taken over. Disputing calls to be billed. Wants to know who switched he says * NO Letter NO PAYMENT *

RESEARCH/RESOLUTION: (What action did you take?):

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CUSTOMER COMPLAINT

FORM - SNYDER

(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/465-4939

Today's Date: 11-24 **Time:** 4:40 **AM** (PM) **(Circle One)**

CSR Name: KWood **Badge #:**

Customer Name: ~~305~~ Blanca Bello **BTN:** 305 265 4337

Address: Unit 11, 301 NW 84th Ct **Apt.#:**

City: Miami **ST:** FL **ZIP:** 33126 **INF?** (OOF?) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

****

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cx not required to talk to anyone. Unit # left off address & cx not yet STLD bill so bill sent

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: **DATE:** **TIME:**

COMMENTS:

24676

DATE TURNED IN: _____ DATE COMPLETED: ____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 11-24-98 TIME _____ AM _____ PM 532

CSR NAME _____ BADGE # _____

CUSTOMER NAME Michael Quinby BTN # 3008645781

ADDRESS _____ APT # _____

CITY Refused STATE _____ ZIP CODE _____

IS RESPONSE NEEDED? YES / NO PROJECT? long distance

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Unauthorized switch

Name on order is Larry Zytz.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

Sny order - TC, 360dom 11/11 Eff 11/30 1998-Ø

RETURN CALL TO CUSTOMER

COMMENTS

24677

DATE TURNED IN: _____ DATE COMPLETED: _____

CUSTOMER COMPLAINT FORM

(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 11-20-98 TIME 1:07 AM _____ PM X

CSR NAME Christina Renouw BADGE # _____

CUSTOMER NAME Edgar Vargas BTN # 305 382 9225

ADDRESS 13603 Southwest 81st APT # _____

CITY Miami STATE Florida ZIP CODE 33183

IS RESPONSE NEEDED? (YES) / NO PROJECT? Long Distance

PROBLEM: (BE VERY SPECIFIC AND DESCRIBE IN DETAIL)

Cust. was switched to BTI Long Distance w/out auth. Very upset, wants to know who switched and why.

WHAT DID YOU DO TO SOLVE THIS PROBLEM?

1998 - a DMSS-N/O

RETURN CALL TO CUSTOMER

COMMENTS

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 2/25 **Time:** 1:50 **AM (PM)** (Circle One)

CSR Name: Dan Schmidlin-Avery **Badge #:**

Customer Name: IRMA HERNANDEZ **BTN:** 305-541-0466

Address: 1844 SW 45T **Apt.#:** 2

City: Miami **ST:** FL **ZIP:** 33131 **INF:** (OOF)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust. was change to GTELD w/o authorization

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: Carol **DATE:** 3-4-98 **TIME:** 2:25 pm

COMMENTS: Reg is on Back End - Retraining

24679

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 2/21 **Time:** 3:39 **AM** (PM) (Circle One)

CSR Name: Dan Serradilla - Avery **Badge #:** _____

Customer Name: ORTIZ MARITZA **BTN:** 305-233-8860

Address: 16925 SW. 119 PL **Apt.#:** _____

City: Miami **ST:** FL **ZIP:** 33177 **INF?** (HOP?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust. was change to GTELD w/o authorization

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: Carol **DATE:** 3-4-98 **TIME:** 2:25

COMMENTS: Rep is on Back End - Retraining

24680

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 2/21 **Time:** 4:11 **AM** (PM) **(Circle One)**

CSR Name: Dan Serradilla-Avery **Badge #:** _____

Customer Name: JESUS VILLAMAR **BIN:** 305-826-9534

Address: 1060 W. 74TH ST **Apt.#:** _____

City: HIALEAH **ST:** FL **ZIP:** 33014 **DNP:** (OOP:) **(Circle One)**

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust. was charge to GTELD w/o authorization

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: Carol **DATE:** 3-4-98 **TIME:** 2:25 pm

COMMENTS: Pg is on front and back observation by QC/ Supervisor DSM / Retraining

24681

FEB. -13 98(FRI) 13:06 LD FULFILLMENT TEL:972 887 2443

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 2/22 **Time:** 2:30 **AM** (PM) (Circle One)

CSR Name: Michael Fitzgerald **Badge #:** CSC

Customer Name: Felipe Actiaga **BTN:** 305-556-9247

Address: 2223 W. 64 St. **Apt.#:** 204

City: Hialeah **ST:** FL **ZIP:** 33016 **INF?** (OOF?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

PROBLEM: (Pls. be very specific and describe thoroughly.)

The caller had been switched to GTELD w/o his consent and wanted the order Cancelled

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: Carol **DATE:** 3-4-98 **TIME:** 2:25pm

COMMENTS: Rep is in Front End QC - DSM Examination Retraining

24682

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 2/23 **Time:** 5:30 **AM** (PM) (Circle One)

CSR Name: Michael Fitzgerald **Badge #:** CSC

Customer Name: Rolando Bobadilla **BTN:** 718-854-2979

Address: 1920 SW 2 ST. **Apt.#:** 13

City: Miami **ST:** FL **ZIP:** 33135 **INF:** (OOF) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION (NEEDED) NOT NEEDED

PROBLEM: (Pls. be very specific and describe thoroughly.)

The caller was very upset that he was switched to GTELD w/o his authorization. He had called in previously to cancel the order but was still receiving letters from GTE in the mail. I assured him that his order was cancelled.

RESEARCH: (For Customer Service Use Only)

The customer requested that a letter be sent to him assuring that he was no longer w/ GTELD

RETURN CALL TO CUSTOMER

BY WHOM: Carol **DATE:** 3-3-98 **TIME:** 1pm

COMMENTS: Rep has been terminated

24683

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 2/19 **Time:** 7:00 **AM** (PM) (Circle One)

CSR Name: MICHAEL Fitzgerald **Badge #:** CSC

Customer Name: LUIS CRESPO **BTN:** 305-364-9967

Address: 6075 W. 15 Ct. **Apt#:**

City: Hialeah **ST:** FL **ZIP:** 33012 **INP?** (OOP?) (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED **NOT NEEDED**

PROBLEM: (Pls. be very specific and describe thoroughly.)

The customer said that he had been switched to GTLD w/o his knowledge and wanted the order cancelled so he could continue w/ his previous LD carrier.

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: Carol **DATE:** 3-4-98 **TIME:** 2:25p.m.

COMMENTS: Rep Is on Back End, Retraining

24684

HOT

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 2/19 Time: 9:00 AM (PM) (Circle One)

CSR Name: MICHAEL Fitzgerald Badge #: CSC

Customer Name: Jorge Lopez BTN: 305-888-0438

Address: 1432 W. 29 St. Apt.#: 2

City: Hialeah ST: FL ZIP: 33012 INFO (OOB?) (Circle One)

DEFINITELY

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

PROBLEM: (Pls. be very specific and describe thoroughly.)

The customer had received a letter in the mail saying he had obtained GTE as his LD carrier. He was extremely upset. I spent the next 45 minutes explaining to him that we did not know exactly who authorized the switch. I also had to explain that we could not fax him a copy of our contract w/ his signature on it. He wanted this fax to give to his lawyer.

RESEARCH: (For Customer Service Use Only)

I told the customer I could cancel the order and offered to give him the TN# Complaint # but he refused. He just wanted his order cancelled and said he would talk to his lawyer.

RETURN CALL TO CUSTOMER

BY WHOM: Carol DATE: 3-4-98 TIME: 2:25pm

COMMENTS: Rep is in front end observation by QC/OSM LOA Examination

24685

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 2-17-98 **Time:** 7:45 **AM (PM)** (Circle One)

CSR Name: Dawn Semadeni-Avery **Badge #:** _____

Customer Name: Luis Bejarano **BTN:** 305-866-8954

Address: 7304 Carlyle Av **Apt#:** 4

City: Miami Beach **ST:** FL **ZIP:** 33141 **INF? OUT?** (Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust. was charge to GTEL0 without his permision

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: Carol **DATE:** 3-4-98 **TIME:** 2:25 pm

COMMENTS: Rep is in Front End Observation by QC, DSM Lea : Examination

24686

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 2-17-98 Time: 6:52 AM PM (Circle One)

CSR Name: Dora Scandella-Avery Badge #:

Customer Name: Jorge Flores BTN: 305-828-1610

Address: 5467 W. 18 AVE Apt.#:

City: HIALEAH ST: FL ZIP: 33012 INF: OOF?
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED NOT NEEDED

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust. was charge to GTELD without his permission

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: Carol DATE: 3-4-98 TIME: 2:25pm

COMMENTS: Repts in Front End Observation Tape / OSM
LOA Examination

24687

CUSTOMER COMPLAINT FORM - SNYDER
(MUST BE FILLED-OUT COMPLETELY)
fax to: Michael Lyons - GTECC @ 972/550-8903

Today's Date: 2-17-98 Time: 6:46 AM (PM) (Circle One)

CSR Name: Dora Serradilla-Avery Badge #:

Customer Name: Rafael Gonzalez BTN: 305-556-8203

Address: 1035 W 77 ST Apt#: 505

City: HIALEAH ST: FL ZIP: 33014 INF? (OOF?)
(Circle One)

PLEASE CIRCLE RESPONSE: ESCALATION NEEDED (NOT NEEDED)

PROBLEM: (Pls. be very specific and describe thoroughly.)

Cust. was change to GTECO without his permission

RESEARCH: (For Customer Service Use Only)

RETURN CALL TO CUSTOMER

BY WHOM: Carol DATE: 3-4-98 TIME: 2:25

COMMENTS: Rep-s Back End / Refraining

24688

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 2-9-98 TIME 3:07 AM PM ✓

CSR NAME Claudia Aguilar BADGE # 142047

CUSTOMER NAME EDOUIN VARGAS BTN # (305)6858670

ADDRESS 680 E 49th ST APT #

CITY Hialeh ST FL ZIP 33013

PLEASE CIRCLE RESPONSE: (NEEDED) NOT NEEDED

Spanish speaking Customer!
Copy given to Acct. Mngr. 2/11

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)
EDOUIN VARGAS CALLING FOR MOTHER. NEVER AUTHORIZED SWITCH TO STE LONG DISTANCE. WANTS TO KNOW WHO SWITCHED HER AND WHO AUTHORIZED.

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
OMNS-ICP & TCW01 3100 Free Inter miles 1/11 SAIV

RETURN CALL TO CUSTOMER

BY WHOM [illegible] DATE 3-4-98 TIME

COMMENTS Rep has a Written Warning.

24689

UNAUTHORIZED SWITCH. ESCALATED

CUSTOMER COMPLAINT FORM
(MUST BE FILLED OUT COMPLETELY)

TODAY'S DATE 2-9-98 TIME 3:07 AM ___ PM ✓

CSR NAME Claudia Aguilar BADGE # 142047

CUSTOMER NAME EDDWIN VARGAS BTN # (305)6858670

ADDRESS 680 E 49th ST APT # ___

CITY Hialeh ST FL ZIP 33013

PLEASE CIRCLE RESPONSE; (NEEDED) NOT NEEDED

Spanish speaking Customer.
Copy given to Acct. Mngr. 2/11

PROBLEM: (BE VERY SPECIFIC, AND DESCRIBE THOROUGHLY)
EDDWIN VARGAS CALLING FOR MOTHER. NEVER AUTHORIZED SWITCH TO STE LONG DISTANCE. WANTS TO KNOW WHO SWITCHED HER AND WHO AUTHORIZED.

2/10

RESEARCH: (FOR CUSTOMER SERVICE USE ONLY)
DMS-10 & TCAP 3000 free Inter MIAS 2/11 SALY

RETURN CALL TO CUSTOMER

BY WHOM ___ DATE ___ TIME ___

COMMENTS ___

24690