

Unforecasted Demand Notification Form

CLEC:

QWEST AM/SM:

ACNA:

Please enter name, tel #

Date prepared:

Form prepared by:

Please enter name, tel #

Disclaimer: Submission of this form is for the identification of demand other than that which was identified in the established forecast cycle. This information is in addition to the information agreed to during previous Joint Planning meetings.

Identify the quarter for which forecasted quantity should change, then enter the net difference in quantity of DSO's needed for any quarter.

State	Type of Trunk	QWEST CLLI	Co-Provider ACTI CLLI	TGSN	Quarter	Quarter	Quarter
					Year	Year	Year
TOTAL					0	0	0

