Twilio Inc. Letter of Authorization (LOA)



1.	Customer Name	(your name should	appear exactly	as it does on v	our telephone bill
	Castonner Hanne	() our marrie should	appear exactly	as it aces on	dai celepiione biii

First Name	Last Name			
Business Name (if the service is in your company's name)				

2. Service Address on file with your current carrier (Please note, this must be a physical location and can not be a PO Box):

Address					
City	State/Province	Zip/Postal Code			

3. List all the Telephone Number(s) which you authorize to change from your current phone service provider to Twilio Inc.

Phone Number*	Service Provider	
()		
()		
()		
()		

By signing the below, I verify that I am, or represent (for a business), the above-named service customer, authorized to change the primary carrier(s) for the telephone number(s) listed, and am at least 18 years of age. The name and address I have provided is the name and address on record with my local telephone company for each telephone number listed. I authorize Twilio Inc. or its designated agent to act on my behalf and notify my current carrier(s) to change my preferred carrier(s) for the listed number(s) and service(s), to obtain any information Twilio Inc deems necessary to make the carrier change(s), including, for example, an inventory of telephone lines billed to the telephone number(s), carrier or customer identifying information, billing addresses, and my credit history.

Authorized Signature	Print	Date

^{*}If you have more than 4 numbers, please list on an extra page