

# Schedule A:

## Alltel Initial Hardship Application Details

<b>Your Name</b>	
<b>Alltel Account Number</b>	
<b>You are</b>	Our customer / Authorised representative of our customer
<b>Invoice/Statement details your application relates to*</b>	
<b>Details of financial hardship*</b>	
<b>Do you have an existing financial hardship arrangement with Alltel?</b>	Yes / No*
<b>If "Yes", please provide details</b>	
<b>Your contact number</b>	
<b>Your contact postal address</b>	
<b>Your contact email address</b>	
I wish to make an application for a financial hardship arrangement with Alltel. Please contact me about this letter.	
<b>Your signature</b>	
<b>Date</b>	

- \* Note that only an Alltel customer, or their authorised representative, may submit this application.
- \* Must be in name of same person as above, unless person above is their authorised representative.
- \* Delete whichever inapplicable.
- \* Clearly identify each invoice that presents payment difficulties including following as applicable: name of invoiced party, date, invoice number, amount, service type.
- \* Refer to [Alltel Financial Hardship Policy](#) for information on qualifying circumstances.
- \* Delete whichever inapplicable.
- \* Including date of arrangement if known.