

32 Button Series I

AGENCY: _____ Prime Ext: _____

DEPT. _____ Desk/Wall: _____

NAME: _____

BAC: _____

Bldg./Floor/Room: _____

| | | | | |
|------------------|---|---------------------------------------|---|-----------------------|
| Outgoing dialing | 1 | Unrestricted | 3 | Internal & Local only |
| Restrictions | 2 | Internal, Local & STATE Long Distance | 4 | Internal only |
| | | | 5 | International |

Private Line _____ VoiceMail (y / n): _____

Appearance: _____ Revert Ext. #: _____

| | | | | | | | |
|------------------|---------|---------|---------|---------|---------|---------|---------|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| Prime (R / N) | (R / N) | (R / N) | (R / N) | (R / N) | (R / N) | (R / N) | (R / N) |
| 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 |
| (R / N) | (R / N) | (R / N) | (R / N) | (R / N) | (R / N) | (R / N) | (R / N) |
| 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 |
| 25 | 26 | 27 | 28 | 29 | 30 | 31 | 32 |
| VM | | | FWD/ALL | FWD/BSY | FWD/NA | SAV/REP | PICKUP |

Notes: _____
