

Association of Ameritech /SBC Retirees®, Inc

*Proudly working on behalf of retirees of Ameritech, SBC, and predecessor/successor
Bell Companies of the New AT&T, located throughout the United States*



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Fourth Quarter Newsletter December, 2009

FROM THE PRESIDENT'S DESK, December, 2009

My fellow retirees,

I hope that you all enjoyed very Happy Holidays. Whether you celebrated Merry Christmas, Happy Hanukkah, or Kwanzaa, it is my sincere wish that you and your family enjoyed healthy happy days.



There are several subjects of importance that AASBCR® is working with at this time. Primary among them is health care. As I write this, we are awaiting the United States Senate's handling of health-overhaul legislation. No matter the outcome, AASBCR® along with the National Retiree Legislative Network, will continue to fight for retirees. Some of the relevant issues are:

- Medicare Expansion allowing uninsured people ages 55 to 64 to purchase Medicare coverage. Looks like the Senate has forsaken this issue.
- Importation of prescription drugs to allow more competition and better prices. Seems as though the big pharmaceutical firms have convinced our Senators to delay this measure.
- Medicare cuts to subsidize the health care plan. The NRLN as well as participating retiree groups including AASBCR® will continue to fight "dumping" costs onto retirees.
- We still have the unfair Equal Employment Opportunity Commission (EEOC) ruling from December 2007 looming. This ruling, with a request to strike denied by the Supreme Court, allows companies to eliminate health care for retirees 65 and on Medicare. We are continuing to fight to have this measure either overturned or replaced with retiree friendly legislation.

We also cannot forget about pensions. Companies have used pension funds for severance allowances or lump sum buyouts. In addition they have been used to pay for Executive Management non-qualified pensions or other deferred compensation. Finally, we cannot allow companies to sell pension funds to third party financial or other institutions. We must get legislation to stop these abuses.

I am sure that all of you agree that AASBCR® needs to continue our partnership with the NRLN. The NRLN is suffering in today's economy as well. They are looking at raising the dues of their member retiree groups. We need to keep retiree issues in front of our House of Representatives and Senate if we are to have a chance to get suitable legislation passed. Stay tuned for more details as they are available.

Have a healthy, happy, and safe new year.

Carole Lovell

AASBCR® State Representatives

Florida, Louisiana	Pat Reichard	Ohio	Jim Martin
Illinois	Phil Schelinski	Ohio	Elaine Wolan
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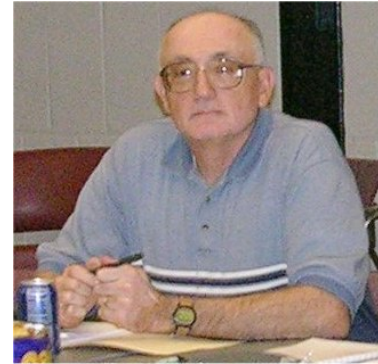
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December 26, 2009

From the Desk of Ray Sternot, VP-Legislation



By now all of you should be aware that both the House of Representatives and the Senate has passed a healthcare bill entitled Affordable Healthcare for All. It will now be sent to a joint committee to resolve the differences and then voted on again by both chambers. The joint committee will hash out the differences between the House and Senate versions and have the combined bills voted on once again in each chamber before a possible signature by the President.

AASBCR[®] cannot tell anyone how to assess what Congress finally creates or could create about healthcare. There could be items that will be in any bill, if finally passed by Congress and signed by the President, that retirees may or may not like. In our opinion, the model health bill for retirees should be about helping companies sustain company sponsored healthcare while not shifting all cost increases to employees or retirees. It should be to protect Medicare by eliminating waste and lowering the cost curve through delivery improvements and better negotiations with and competition among big Pharmaceutical and Insurance companies. It is one that minimizes Government involvement but calls for more competition nationally.

There are many things to be said for and against either the Senate or the House bills. However, there are several items about retiree healthcare and healthcare in general that all of us retirees might have wished had been in some previous bills that have been passed and signed into law. One item, in the House versions, is a protection against postretirement reduction of retiree health benefits.

That section is: **SEC. 717. PROTECTION AGAINST POSTRETIREMENT REDUCTION OF RETIREE HEALTH BENEFITS.** (see the complete detail wording of section 717 below)

Additionally, in both the House and Senate versions of the bills there is a patient bill of rights that includes the following:

Both the House and Senate bills would make it against the law for insurance companies to deny you coverage on the basis of a pre-existing condition or illness. Both would stop insurers from charging exorbitant premiums on the basis of age, health, or gender. Both would prevent insurance companies from dropping your coverage when you get sick. And both would put a limit on how much you have to pay out of pocket for the treatments you need in a year or lifetime.

However, nothing is guaranteed. These points could be stripped from the joint committee process of combining a House and Senate version.

As I have said before, this has been a very active year so far in Congress. Healthcare is on the minds of everyone. And that will continue to be the case for the coming months.

It is clear that retiree healthcare as we know it or prefer it to be is going away because of the increasing costs to companies. Unless something changes, companies will continue to shift costs to retirees and/or

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eliminate healthcare coverage altogether if allowed to do so. In fact, the December 26, 2008, EEOC ruling protects companies under the EEOC rules from being sued if they do so.

Because AT&T is healthy, we have not seen our benefits totally stripped. We've dodged that bullet so far. However some retirees have not. In general though, costs to retirees are getting greater. That is why it is important that healthcare reform focus on lowering costs, improving services, and providing healthcare alternatives for companies and retirees and by putting this type of retiree legislation into the proposed healthcare bill.

So we all have to ask after we review the final bill whether we believe it will be good for retirees and companies. That is, will it lower employer costs and protect retiree earned healthcare benefits? Will it limit out of pocket expenses and catastrophic condition? Does it do more good than harm to retirees?

As a member and officer within the NRLN and on the legislative team, I can report that we are working hard to get our message to the various committees in Congress. I encourage you to view the NRLN's Legislative Agenda. As a result of this flurry of legislative activity, I expect that the NRLN and AASBCR[®] will be calling for all AASBCR[®] members to contact their Representatives and Senators when the final healthcare bill comes to a vote in Congress no matter what side you are on.

One final item that I would like to mention is that AASBCR[®] supports the NRLN Insurance Agency as many NRLN members/organizations have lost their insurance and healthcare benefits already and it makes sense to offer a lower cost alternative to those NRLN members who may need one.

In the future, you may get a notice or informational summary from AASBCR[®] that would provide information about the NRLN agency offering and indicate to those interested in obtaining more details to go to the NRLN site.

Best wishes for the New Year!

Ray Sternot

More... from the Desk of Ray Sternot,
VP-Legislation



My role as the AASBCR[®] VP of Legislation is to work closely with the NRLN and provide input/focus on our legislative agenda.

Comments: Retiree Healthcare as we know it is going away because of its cost to companies. Companies will continue to shift costs to retirees and/or eliminate healthcare altogether. That is why it is important that healthcare reform focus on lowering costs; improving services and providing healthcare alternatives for companies and retirees.

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What have we accomplished this year?

- 1.) Updated/revised NRLN Legislative Agenda with expanded emphasis on Healthcare (the timing is right).
- 2.) Healthcare for All Focus paper (Not only for under/un-insured) – NRLN action plan development.
- 3.) Election questions/answers at the NRLN (national level).
- 4.) Growing the AASBCR[®] and NRLN grassroots organization.

National Retiree Legislative Network Agenda on Health Care Reform Legislation

- Retiree health care must be a priority during Congress' deliberations on health care reform. Guard against harming Medicare or company-sponsored health care benefits that retirees have earned.
- Health care reform should include a provision which would prevent broken promises to retirees by providing what the NRLN calls a **Maintenance of Cost Payment (MCP)**. The MCP would establish a fixed monthly payment to retirees equivalent to the dollar value of benefits an employer provided at retirement, prior to the reduction or cancellation of retirement benefits such as health care, prescription drugs, life insurance, long-term care, catastrophic coverage and other benefits. The MCP would be used to purchase replacement coverage for as much of the lost benefits as possible. Under the NRLN's proposal, companies would be entitled to tax credits to encourage them to continue to offer defined benefit plans or provide the MCP. Members of Congress need to promote this proposal during the health care debate.
- Don't tax retirees for the health care benefits they may still receive from their former employer.
- When an employer eliminates its health care plan, retirees usually lose "catastrophic coverage" which limits out-of-pocket medical expenses to a fixed amount, such as \$1,500. Given this loss, the NRLN believes that **catastrophic coverage** should be added to Medicare to prevent retiree bankruptcies.
- It is difficult for many men and women age 50 to 64 who have been laid off or retired early—either forced or voluntary—to purchase affordable health care insurance because of their age. They should be allowed to **buy into Medicare at a cost** that does not burden the system.
- Funding should be provided in health care reform legislation to **eliminate the "doughnut hole"** in the Medicare Part D prescription drug plan.
- Congress should pass legislation that allows for the importation of prescription drugs, competitive bidding by makers of prescription drugs, and funding for the FDA to reduce generic drug backlogs; and the prohibition of drug companies from making payoffs to generic manufacturers who withhold the introduction of new generic drugs into the marketplace.

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- Health care reform should include both **private and public health insurance options.**
- Similar to Medicare, the government-sponsored plan should offer open competition to private insurance companies, i.e. the plan should mirror Medicare's offerings without the government taking over medical facilities and without intrusion into an individual's selection of medical-care insurance options. A government-sponsored plan should allow reasonable doctors' fees but not control doctors' service offerings nor result in the rationing of America's health care.

For more on the NRLN go to www.nrln.org and click on the link to read the NRLN's complete Legislative Agenda.

(DETAIL) SEC. 717. PROTECTION AGAINST POSTRETIREMENT REDUCTION OF RETIREE HEALTH BENEFITS.

`(a) In General- Every group health plan shall contain a provision which expressly bars the plan, or any fiduciary of the plan, from reducing the benefits provided under the plan to a retired participant, or beneficiary of such participant, if such reduction affects the benefits provided to the participant or beneficiary as of the date the participant retired for purposes of the plan and such reduction occurs after the participant's retirement unless such reduction is also made with respect to active participants. Nothing in this section shall prohibit a plan from enforcing a total aggregate cap on amounts paid for retiree health coverage that is part of the plan at the time of retirement.

`(b) No Reduction- Notwithstanding that a group health plan may contain a provision reserving the general power to amend or terminate the plan or a provision specifically authorizing the plan to make post-retirement reductions in retiree health benefits, it shall be prohibited for any group health plan, whether through amendment or otherwise, to reduce the benefits provided to a retired participant or the participant's beneficiary under the terms of the plan if such reduction of benefits occurs after the date the participant retired for purposes of the plan and reduces benefits that were provided to the participant, or the participant's beneficiary, as of the date the participant retired unless such reduction is also made with respect to active participants.

`(c) Reduction Described- For purposes of this section, a reduction in benefits--

` (1) with respect to premiums occurs under a group health plan when a participant's (or beneficiary's) share of the total premium (or, in the case of a self-insured plan, the costs of coverage) of the plan substantially increases; or

` (2) with respect to other cost-sharing and benefits under a group health plan occurs when there is a substantial decrease in the actuarial value of the benefit package under the plan.

For purposes of this section, the term 'substantial' means an increase in the total premium share or a decrease in the actuarial value of the benefit package that is greater than 5 percent.'

(b) Conforming Amendment- The table of contents in section 1 of such Act, as amended by sections 108 and 109, is amended by inserting after the item relating to section 716 the following new item:

`Sec. 717. Protection against postretirement reduction of retiree health benefits.'

(c) Waiver- An employer may, in a form and manner which shall be prescribed by the Secretary of Labor, apply for a waiver from this provision if the employer can reasonably

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demonstrate that meeting the requirements of this section would impose an undue hardship on the employer.

(d) Effective Date- The amendments made by this section shall take effect on the date of the enactment of this Act.



CALL FOR CANDIDATES

The nomination period for the six AASBCR® board positions will open on January 1, 2010 and nominations must be received by close of business on February 28, 2010. During this period, you may self-nominate or nominate one AASBCR® member in good standing for each of the following six positions:

Position

Vice-President, Membership
Vice-President, Legislation
Vice-President, AT&T Relations
Vice-President, Technology and CFO
Vice-President, Communications
Secretary

Please forward your nominations to:
Association of Ameritech/SBC Retirees
2010 Nominations
P.O. Box 7477
Buffalo Grove, IL 60089-7477
Or Elections2010@asbcr.org

Results of the nomination process will be posted on asbcr.org in March 2010 and in the 2010 First Quarter Newsletter. Ballots for the election of the six AASBCR® board positions will be distributed on April 1, 2010 with return requested by April 30, 2010. Results of the election process will be posted on www.asbcr.org in May 2010 and in the 2010 Second Quarter Newsletter. New officers will be installed at the AASBCR® Annual Meeting on June 10, 2010.

It is important that AASBCR® members participate in the nomination process, both as members making nominations and members seeking and accepting nominations. This will ensure that the AASBCR® continues to grow and serve retirees.

AASBCR® Nominating Committee

AASBCR® SAY ON PAY – FOURTH YEAR

AASBCR® is resubmitting the Say on Pay shareholder proposal. All AT&T shareholders are asked to vote **YES** on this issue. Please share this with all friends and relatives who hold AT&T stock in their portfolios. The AT&T 2010 Proxy Statement should be sent to shareholders of record very soon. AASBCR® believes all owners of the Company should express their approval or disapproval of the compensation packages for the CEO and other executive officers. The proposal is scheduled to be on the 2010 AT&T Shareholders Meeting Agenda and should look like this:

Stockholder Proposal (Item No. not yet assigned)

Shareholder Advisory Vote on Executive Compensation

RESOLVED, the stockholders of AT&T hereby request that the Board include, as a voting item in the proxy statement for each annual meeting of stockholders, an advisory resolution proposing that stockholders approve or disapprove the compensation of the named executive officers as set forth in the proxy statement's Summary Compensation Table ("SCT") and the accompanying narrative disclosure of material factors provided to understand the SCT. The proposal shall make clear that the vote is advisory and will not abrogate any employment agreement.

Please vote **YES** on this issue. Greater scrutiny and investor feedback is needed at AT&T since pay is weakly aligned with performance. At the time AT&T merged with BellSouth in 2006, an independent study singled out both companies as two of the eleven large U.S. companies "where the disconnect between pay and performance is particularly stark." In a July 2008 update, the same group reported that what AT&T calls 'performance shares' "continue to payout for below median total shareholder return." The bar is set so low on performance shares that executives receive 50% of the target if AT&T's total shareholder return is as low as the 20th percentile compared to its Telecom Peer Group.

AT&T's executive pension formula is far more generous than the rank-and-file managers receive. While the rank-and-file pension was frozen and converted to an annual contribution, the CEO pension continues to be a defined benefit annuity, payable for life, and targeted at 60 percent of salary plus bonus. Former CEO Ed Whitacre received a \$158.4 million pension package when he retired in 2007, the highest pension benefit for any CEO. The present value of CEO Stephenson's senior executive retirement plan already exceeds \$19.9 million.

National debate about government condoning or permitting these abuses continues. We don't need or want government intervention. The shareholder advisory vote will suffice. Currently, AT&T is on the wrong side of this issue. This proposal will help our corporation to return to the high ground and to do the right thing. Verizon has already joined the ranks of companies doing business in this more enlightened and transparent way. If you believe that AT&T is a company "where the disconnect between pay and performance is particularly stark" and that the disparities between retirement security offered to senior executives and that offered to other employees are significant, then urge your friends and family, neighbors, brokers, etc. to support the AASBCR® Shareholder Advisory Vote on Executive Compensation proposal in the 2010 AT&T Proxy Statement with a **YES** vote.

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The AASBCR® accepts a limited amount of advertisements from its members and friends. These advertisements are of wide interest to our membership. The revenue from these ads is used to offset the publication of our Quarterly Newsletter. AASBCR® offers these ads with no warranties expressed or implied.

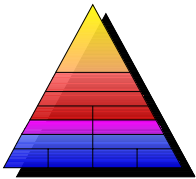
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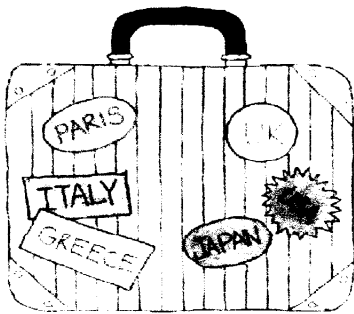
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**If you would like a review of your retirement plans or an
analysis of your portfolio, I can be reached at:**



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Computer Corner (NEW):



Computers can be a great tool for seniors. They can also be a great source of frustration when they don't work correctly. If you or one of your senior friends have discovered special ways to get something of great value from your computer, will you please share it with other members of the AASBCR®? Just send an email with an explanation of how you are able to use your computer in ways that improve your life as a retiree to vpcomm@asbcr.org. We will publish the best ideas and internet links that help us, as retirees to, make the best use of our computers and the internet.

In addition, if you need a little help making that computer work a lot better than now, just send an email to vpcomm@asbcr.org and we will do what we can to help. No guarantees, of course, since we are not professional computer geeks. But, who knows, maybe someone in our association will have the answer you need. If you have a lot of computer expertise perhaps you could volunteer to be on our list of people who analyze requests for assistance and contribute solutions to other member's computer problems.

We are especially interested in helping members who have computers, but do not use email or the internet. Currently, we print, stuff and deliver to the Post Office hundreds of Newsletters every quarter. That requires AASBCR® volunteer's time and more than \$1,216.00 each year. The cost for emailed Newsletters is \$0.00!

Correction/Clarification to the November 2, 2009 News Register

In November we responded to a **Just Ask** question about the Shingles vaccination. In our response we said that the Shingles vaccination, while not covered by Medicare, was covered by the AT&T Medical Expense Plan.

This is true for management retirees who retired *after Jan 1, 1986*. However for *all union eligible or bargained for* employees and for management employees who retired *prior to Jan 1, 1986*, the AT&T Medical Expense Plan does not cover the Shingles vaccination.

Our initial response was based on information received from the AT&T Benefit Center and from United Healthcare so we feel your pain and frustration when you get different and inconsistent answers depending on the person you talked to. AT&T retirees are covered by several different summary plan descriptions (SPD) under the AT&T Medical Expense Plan, depending on the date and Company they retired from and whether they were management or union eligible. Because of this, there is sometimes confusion on the part of those providing information about healthcare benefits under the AT&T Medical Expense Plan. We are working with AT&T Human Resources to reduce this type of confusion in the future.

THE LAST WORD - FROM THE Editor's Desk:

I have to thank Joel Brown and Mary Foley, with help from Joe Zubay, for stepping up when I came down with something that laid me low just before Christmas for the second time in the last 3 years! I'm beginning to wonder if I have an allergy to the Holidays.



Cell Phone Candid
By Dave Comings

On Christmas morning I received an e-mail from a friend of almost 50 years about an 1881 young rural man whose father gave him a practical application of the true meaning of Christmas. I thanked him, explaining that his e-mail caught me wallowing in the "poor me's". Not a good place to be today. I then remarked that had I been around in that era, I would probably have died 15 years prior from my first asthma hospitalization. But I live with an ever more advancing Medical Science, having retired from a company who treats its employees well and fairly, allowing us to partake (at not inconsiderable – but far from total – cost) of the benefits of this Medical Science. I am truly

fortunate (as we all are).

This got me thinking about many of my friends and acquaintances who are hanging on to their jobs by their fingernails, counting the years, months, days, until they can retire, hopefully with health care. And the others who didn't make it. Some of those are paying exorbitant COBRA rates. Others just don't go to a doctor unless a major body part falls off.

But, never fear, Congress is riding to the rescue! Your stage 1, highly curable cancer may be stage 4 by the time they "save" you. The far right (seemingly joined by too many members of Congress who seem to believe that their primary paycheck comes from the Medical Industry) wants no change at all. The far left wants to jump immediately to a single-payer scheme that they control. Both these dogs seem to want to sit in the manger and refuse access to anyone who might actually benefit. Meanwhile, the moderates of both parties seem to fail to realize they are in the vast majority. If they got together in a spirit of cooperation, they could get something meaningful done and leave the fringes swaying in the breeze – for that's really about all that fringes are good for. But the Democratic 'Leadership' won't invite the Republicans in because they are Republicans. And the Republicans won't work with the Democrats because they are Democrats. So our future health insurance, at least in the Senate version, seems to be set by about 5 Senators who seem to be from other states. (I don't get to vote for or against any of them!)

Winston Churchill said: "It has been said that democracy is the worst form of government except all the others that have been tried."

On a completely different note, we are coming into an election year. Not just for Local, State, National political offices, but for the AASBCR[®] Board of Directors, too! There can be no election without someone to elect. At least for the AASBCR[®] Board. The per-hour pay is lousy. But the end-of-day satisfaction can make up for that. Having watched the "process" to create a long-overdue Health care Plan that won't leave people dying behind the Hospital that could have saved them, I am more convinced than ever that I need to be represented by someone other than the people I voted for – the winners or the losers. The Need for the AASBCR[®] and the NRLN have

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never been more apparent to me than at this time. I joined, then became active, for protection from SBC/AT&T. That hasn't changed much. But I didn't realize I would need protection from my own Government! But a few years ago the Treasury allowed Corporations to 'use' Pension funds for buyouts and to help pay executive benefits. And the EEOC - the watchdog established to PREVENT discrimination - decided it wasn't discrimination to allow corporations to drop health care for those over 65 - those Medicare eligible. (But what about catastrophic care, long-term care, dental, vision, etc. that my health care covered but Medicare doesn't?) For the most part, I enjoy my life now - my retirement. I worked long and hard to get here and it is nice to see some of the fruit ripening. But I find I have to keep working my orchard or the fruit could disappear. That's why I am active in AASBCR® and support the NRLN. Please come and join me. Consider being a Board member. Or a Committee member. Or a State Representative. And, while you are at it, please reach out to your retiree friends who aren't AASBCR® members and bring them with you. It is more fun as a group activity! (And it gets me out of the house!)

Art Comings

AASBCR® Newsletter Editor

(In Absentia this Issue)

The opinions expressed above are NOT the position of the AASBCR® or the Board of Directors, and may not even be the position of the Editor by the time you are reading this.

☞ **WANTED** ☞

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Retirees do you know?**

**How many of them are
Fellow AASBCR® Retirees**

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QUARTERLY CORRESPONDENCE:

During the past quarter we have sent the following correspondence via e-mail.
(E-mail recipients please click on the following links to the AASBCR® web site.)

- [AASBCR® BLUE BULLETIN VOL.4 NO.7 - Medicare Crossover - 12/26/09](#)
 - [AASBCR® BLUE BULLETIN VOL.4 NO.6 AT&T Offers and Discounts - 11/25/09](#)
 - [11/09/09 NEWS REGISTER - Just Ask – Can I suspend my U-verse while I'm in Florida for 4 months?](#)
 - [11/02/09 NEWS REGISTER - Just Ask – Does our healthcare plan cover the Shingles vaccination?](#)
 - [AASBCR® BLUE BULLETIN VOL.4 NO.5 AT&T 2010 Healthcare Enrollment - 10/23/09](#)
 - [APRIL 2009 EDITION OF AT&T'S BOOKLET "WHERE TO GO FOR MORE INFO - INFORMATION FOR EMPLOYEE BENEFITS PLANS AND PROGRAMS" REFERENCE GUIDE FOR FREQUENTLY CALLED NUMBERS, WEB SITE ADDRESSES AND OTHER IMPORTANT AT&T BENEFITS CONTACT INFORMATION.](#)
AT&T says, "This is an [April 2009] updated summary of material modifications (SMM) for the Contact Information for Employee Benefits Plans and Programs. This SMM is a one-stop reference guide for frequently called numbers, Web site addresses and other important AT&T benefits contact information." THIS NEW VERSION WAS FOUND 10/23/09 ON THE [ACCESS.ATT.COM](#) BENEFITS WEB SITE. THIS PDF LOOKS LIKE THE MOST CURRENT VERSION. LET US KNOW IF YOU FIND A NEWER VERSION. NOTE: THIS NEW VERSION IS A MUCH LARGER FILE AT 4 MB, AND WILL TAKE LONGER TO DOWNLOAD AND OPEN THAN THE PREVIOUS 2008 VERSION.
 - [10/22/09 LEGISLATIVE LEDGER - Break Up Insurance Monopolies](#)
-

I don't suffer from insanity; I enjoy every minute of it.
Some people are alive only because it's illegal to kill them.
I used to have a handle on life, but it broke.
Don't take life too seriously; No one gets out alive.
You're just jealous because the voices only talk to me
A picture is worth a thousand words, but it uses up three thousand times the memory.
Earth is the insane asylum for the universe.
I'm not a complete idiot -- Some parts are missing.
Out of my mind. Back in five minutes.
The gene pool could use a little chlorine.
Consciousness: That annoying time between naps.
Ever stop to think, and forget to start again?
Being 'over the hill' is much better than being under it!
Wrinkled Was Not One of the Things I Wanted to Be When I Grew up.
Procrastinate Now!
I Have a Degree in Liberal Arts; Do You Want Fries With That?
A journey of a thousand miles begins with a cash advance.
Stupidity is not a handicap. Park elsewhere!
Ham and eggs ... A day's work for a chicken, a lifetime commitment for a pig.
The trouble with life is there's no background music.
I smile because I don't know what the heck is going on.