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| Date: | 10/24/2 | | | | | cket No.: | - | | 5-TF | | THE SERVICE SE | 2 | |
| 1. From Division / Staff: | | | Gcl (| Gervasi) | | | | | | | X () | A 8 | - |
| 2. OPR: | GCL (Gervasi) | | | | | | | | | | | 26 | Č |
| 3. OCR: | TEL (Ba | ates); ECC |) (McNi | ulty) | | | | | | | | | |
| 4. Suggested Docket Title: | | | | | | | f Rule : | 5-4.118, F.A.C., Local, Local Toll, or Toll Pro Rule 25-4.083, F.A.C., Preferred Carrier Freeze Relations. | | | | | |
| 5. Program/Module/Submod | | | dule Assignment: | | | | B/7. | B/7./A. | | | | | |
| 6. Sugge | sted Doc | ket Mail L | ist. | | | | | | * | | | | |
| a. Provide NAMES/ACRONYMS, if registered company. | | | | | | | Provid | ded as | an Att | achment | : | | |
| Company Code, if applicable: Parties (include a | | | addres | s. if diffe | rent fro | m MCD): | Rep | reseni | atives | (name | and add | iress): | |
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| OFFICE O PUBLIC COUNSEL | F | | | | | | | | | | | | |
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| | | MPLETE | | | | for all oth | ers. (r | match | repres | entativ | es to co | mpanie | es) |
| Company Code, if applicable: | | Interested persons, if any, (include address, if different from MCD): | | | | | Rep | resen | tatives | (name | and add | iress): | |
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| 7. Check | one: | ☐ Supp | orting | Docume | ntation | Attached | \boxtimes | To be | provid | led wit | th Recon | nmend | ation |
| Comment | s: | | | | *** | | | | | | | | |
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CLK PScholik 010-C (Rev. 11/10)