

FILED 5/30/2017

DOCUMENT NO. 05099-2017

FPSC - COMMISSION CLERK

| REQUEST TO ESTABLISH DOCKET (Please type or print. File original with CLK.) | | |
|---|---|---|
| Date: | 5/30/2017 | |
| 1. From Division / Staff: | Tel/Curry | |
| 2. OPR: | TEL | |
| 3. OCR: | GCL | |
| 4. Suggested Docket Title: | <u>2018 State certification §54.313 and §54.314, annual reporting requirements for high-cost recipients, and certification of support for eligible telecommunications carriers.</u> | |
| 5. Program/Module/Submodule Assignment: | A19, B11 | |
| 6. Suggested Docket Mailing List | | |
| a. Provide NAMES/ACRONYMS, if registered company | | <input type="checkbox"/> Provided as an Attachment |
| Company Code, if applicable: | Parties (include address, if different from MCD): | Representatives (name and address): |
| TL710 | Frontier Florida LLC | |
| | | |
| | | |
| | | |
| b. Provide COMPLETE NAME AND ADDRESS for all others (match representatives to companies) | | |
| Company Code, if applicable: | Interested persons, if any, (include address, if different from MCD): | Representatives (name and address): |
| | | |
| | | |
| | | |
| | | |
| 7. Check one: | <input type="checkbox"/> Supporting documentation attached | <input checked="" type="checkbox"/> To be provided with Recommendation |
| Comments: | | |

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