| | | | REQUEST TO ESTABL | | RECEIVED- |
|---------------------------------|------------|--|---|---|------------------------------|
| Date: | | (| Please type or print. File original Docket No.: | 10029-TX | 11 JAN 12 AM |
| 1. From Staff / Division: | | vision: | Rad/Curry | | COMMISSI |
| 2. OPR: | Curry | | | | CLLMN |
| 3. OCR: | GCL | | | | |
| 4. Suggested Docket Title: | | | Compliance investigation of Easy of Rule 25-4.118, F.A.C., Local, Lo | Telephone Services Company f cal Toll, or Toll Provider Selectic | ior apparent violation n. |
| 5. Program/Module/Submod | | | dule Assignment: | B.10.A | |
| 6. Sugge | sted Doc | cket Mail L | ist. | | |
| a. Provide NAMES/ | | AMES/ACR | ONYMS, if registered company. | Provided as an Attachm | ent |
| Company Code, if applicable: | | Parties (include address, if different from MCD): | | Representatives (name and address): | |
| TX390 | | Easy Tele | ephone Services Company | Manuel Torrens | |
| | | | | | |
| | | | | | |
| | | | | | |
| b. Pr | ovide CC | OMPLETE | NAME AND ADDRESS for all othe | rs. (match representatives to | companies) |
| Company Code, if applicable: | | Interested persons, if any, (include address, if different from MCD): | | Representatives (name and address): | |
| | | (include address, if different from MCD). | | Representatives (name and | auuress). |
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| 7. Check one: | | 🔲 Supp | oorting Documentation Attached | To be provided with Rec | ommendation |
| Comment | s: | | | | |
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