



5/15/06

(PLEASE PRINT)

ENTRY OF APPEARANCE

CASE NUMBER HA-2006-0294	IN RE Trigen-Kansas City Energy Corporation
NAME Jeffrey A. Keevil	ATTORNEY <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
ADDRESS 4603 John Garry Drive, Suite 11 Columbia, MO 65203	
APPEARING FOR Trigen-Kansas City Energy Corporation	
FILED 3 Tel: 573-499-0635 MAY 19 2006 Missouri Public Service Commission	
TRANSCRIPT ORDER 1 Number of Copies of Printed Transcript 1 Number of Copies of ASCII Diskette* E-mail address _____	TRANSCRIPT DELIVERY (PLEASE CHECK ONE) <input checked="" type="checkbox"/> Mail First Class <input type="checkbox"/> Will Pick up in Mailbox Outside PSC Records Dept. <input type="checkbox"/> Will Pick up at PSC Receptionist's Desk <input type="checkbox"/> Send by (Circle One): Fed. Express/Airborne/ _____ (Account No. _____)
* Note: To receive an ASCII Diskette of the transcript, the written request for an ASCII Diskette must be made at the time of hearing and a printed copy of the transcript must be purchased.	

WAIVER OF READING OF TRANSCRIPT BY COMMISSIONERS

Section 536.080(2) RSMo. requires in contested cases that each official of an agency who renders or joins in rendering a final decision either hear the evidence, read the full record including all of the evidence, or personally consider portions of the record cited or referred to in an argument or brief. By written stipulation or oral stipulation in the record at a hearing, the parties may waive the reading of the transcript.

Pursuant to this section, _____
(PARTY)
waives the reading of the transcript by this Commission.

DATE

SIGNATURE OF PARTY OR ATTORNEY FOR PARTY WAIVING READING OF TRANSCRIPT
▶

WAIVER OF PREPARATION OF TRANSCRIPT

Section 386.420.4 RSMo. provides that preparation of a printed transcript may be waived by unanimous consent of all the parties.

Pursuant to this section, _____
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MISSOURI PUBLIC SERVICE COMMISSION

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ENTRY OF APPEARANCE

CASE NUMBER	HA-2006-6294	IN RE	Trigen-Kansas City Energy Corporation
NAME	Diana C. Carter	ATTORNEY	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
ADDRESS	312 E. Capitol Ave., PO Box 456 Jefferson City, MO 65102		
APPEARING FOR	Missouri Gas Energy		
		FILED	3: 573- 635-7166
		MAY 19 2006	
Missouri Public Service Commission			
TRANSCRIPT ORDER	TRANSCRIPT DELIVERY (PLEASE CHECK ONE)		
<input checked="" type="checkbox"/> Number of Copies of Printed Transcript	<input type="checkbox"/> Mail First Class		
<input type="checkbox"/> Number of Copies of ASCII Diskette	<input type="checkbox"/> Will Pick up in Mailbox Outside PSC Records Dept.		
E-mail address _____	<input type="checkbox"/> Will Pick up at PSC Receptionist's Desk		
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ENTRY OF APPEARANCE

CASE NUMBER HA-2006-0294	IN RE TRIGEN ELECTRIC ENERGY - Kansas City
NAME D. DAVID PORTER	ATTORNEY <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
ADDRESS Truman Medical Center, 2301 Holmes; KCMo 64108 Truman Medical Center, Incorporated	FILED³ Tel: 816/404-3628
APPEARING FOR	
MAY 19 2006	
Missouri Public Service Commission	
TRANSCRIPT ORDER	TRANSCRIPT DELIVERY (PLEASE CHECK ONE)
<input checked="" type="checkbox"/> Number of Copies of Printed Transcript	<input type="checkbox"/> Mail First Class
<input type="checkbox"/> Number of Copies of ASCII Diskette	<input type="checkbox"/> Will Pick up in Mailbox Outside PSC Records Dept.
<input checked="" type="checkbox"/> E-mail address david.porter@trumed.org	<input type="checkbox"/> Will Pick up at PSC Receptionist's Desk
	<input type="checkbox"/> Send by (Circle One): Fed. Express/Airborne/ _____ (Account No. _____)
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MISSOURI PUBLIC SERVICE COMMISSION

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ENTRY OF APPEARANCE

CASE NUMBER	6A-2006-0294	IN RE	FILED ³
NAME	ROBERT FRANSON	MAY 19 2006	
ADDRESS	P.O. Box 360 Jefferson City MO	Tel: (573) 751-6657	
APPEARING FOR	Staff of the Public Service Commission		
TRANSCRIPT ORDER		TRANSCRIPT DELIVERY (PLEASE CHECK ONE)	
<input type="checkbox"/> Number of Copies of Printed Transcript		<input type="checkbox"/> Mail First Class	
<input type="checkbox"/> Number of Copies of ASCII Diskette		<input type="checkbox"/> Will Pick up in Mailbox Outside PSC Records Dept.	
E-mail address _____		<input type="checkbox"/> Will Pick up at PSC Receptionist's Desk	
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