

ENTRY OF APPEARANCE

CASE NUMBER 60-2004-0119		IN RE Laclede Gas Company	
NAME Michael C. Pendergast		ATTORNEY <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
ADDRESS 720 Olive St. St. Louis, Mo. 63101			
Tel: (314) 392-0532			
APPEARING FOR Laclede Gas Company			
FILED DEC 21 2004			
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	
		<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
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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, _____
(PARTY)
waives the preparation of a printed transcript.

DATE	SIGNATURE OF PARTY OR ATTORNEY FOR PARTY WAIVING PREPARATION OF TRANSCRIPT
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ENTRY OF APPEARANCE

CASE NUMBER	60-2005-0119	IN RE	Lanterns GRS Corp
NAME	Debra E. Michael	ATTORNEY	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
ADDRESS	P.O. Box 2230		
	J.C. Mo 65102-2230	Tel:	
APPEARING FOR	Office of the Public Counsel and the Public		
			FILED
			DEC 21 2004
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	
		<input type="checkbox"/> Send by (Circle One): Fed. Express/Airborne/ _____	
		(Account No. _____)	
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MISSOURI PUBLIC SERVICE COMMISSION

(PLEASE PRINT)

ENTRY OF APPEARANCE

CASE NUMBER	IN RE
NAME <i>Lera Shemwell</i>	ATTORNEY <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
ADDRESS	
Tel:	
APPEARING FOR	
FILED	
DEC 21 2004	
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.
<input type="checkbox"/> E-mail address	<input type="checkbox"/> Will Pick up at PSC Receptionist's Desk
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