



10/10/2006

(PLEASE PRINT)

## ENTRY OF APPEARANCE

CASE NUMBER TA-2007-0093	IN RE BIG RIVER TELEPHONE
NAME CARL J. LUMLEY	ATTORNEY <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
ADDRESS 130 S. BEMISTON SUITE 2W CLAYTON MO 63105 Tel: 314-725-8788	
APPEARING FOR BIG RIVER TELEPHONE	
FILED <sup>3</sup> OCT 20 2006 Missouri Public Service Commission	
TRANSCRIPT ORDER 1 Number of Copies of Printed Transcript Number of Copies of ASCII Diskette 1 E-mail address clumley@antimem.com	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 ▶
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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, \_\_\_\_\_  
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**ENTRY OF APPEARANCE**

CASE NUMBER TA-2007-0093	IN RE Application of Big River Telephone Co., LLC, to expand its certificate of basic local service authority to include exchange of BPS Telephone Company		ATTORNEY <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
NAME W.R. England, III/Sondra B. Morgan			
ADDRESS 312 E. Capitol Avenue, P.O. Box 456 Jefferson City, MO 65102-0456			
Tel: 573/635-7166			
APPEARING FOR BPS Telephone Company			
OCT 20 2006 MISSOURI PUBLIC SERVICE COMMISSION			
TRANSCRIPT ORDER 1 Number of Copies of Printed Transcript Number of Copies of ASCII Diskette * E-mail address		TRANSCRIPT DELIVERY (PLEASE CHECK ONE) <input type="checkbox"/> Mail First Class <input checked="" 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. )	
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## ENTRY OF APPEARANCE

CASE NUMBER	A-2007-0093		IN RE	Big River Telephone	
NAME	Michael DANDINO				ATTORNEY <input type="checkbox"/> YES <input type="checkbox"/> NO
ADDRESS	P.O. Box 2230				FILED <sup>3</sup> FILED OCT 20 2006
	Jefferson City MO 65102				
APPEARING FOR	OPL Public				
					Missouri Public Service Commission
					Michael Dandino 24590
TRANSCRIPT ORDER			TRANSCRIPT DELIVERY (PLEASE CHECK ONE)		
<input type="checkbox"/> Number of Copies of Printed Transcript <input type="checkbox"/> Number of Copies of ASCII Diskette* <input type="checkbox"/> E-mail address _____			<input 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. _____)		
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## ENTRY OF APPEARANCE

CASE NUMBER <b>TA 2007-0093</b>	IN RE <b>APPLICATION OF BIG RIVER TELEPHONE CO LLC</b>
NAME <b>JENNIFER HEINTZ</b>	ATTORNEY <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
ADDRESS <b>PO Box 360</b> <b>JEFFERSON CITY MO 65102</b>	
Tel: <b>573-751-8701</b>	
APPEARING FOR <b>Mo PSC</b>	
<b>FILED</b> <b>OCT 20 2006</b>	
TRANSCRIPT ORDER <input checked="" type="checkbox"/> Number of Copies of Printed Transcript <input type="checkbox"/> 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. _____)
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