



ENTRY OF APPEARANCE

CASE NUMBER TO-2004-0207	IN RE IMPAIRMENT - MASS MARKET
NAME CARL J. LUMLEY	ATTORNEY <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
ADDRESS 130 S. BEMISTON SUITE 200 CLAYTON MO 63105 Tel: 314-725-8988	
APPEARING FOR McMetro Access Transmission Services, LLC, Brooks Fiber Communications of Missouri, Inc., Intermedia Communications, Inc., MCI WorldCom Communications, Inc. DECA Communications, Inc. Aba Local Communications Co., NavTex Communications of Missouri, Inc., Xo Missouri Inc., Big River Telephone Co. LLC, Socket Telecom LLC	
TRANSCRIPT ORDER <input checked="" type="checkbox"/> Number of Copies of Printed Transcript <input type="checkbox"/> Number of Copies of ASCII Diskette* <input checked="" type="checkbox"/> E-mail address clumley@cohyg.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) **NOV 25 2003**
waives the reading of the transcript by this Commission.

DATE _____ SIGNATURE OF PARTY OR ATTORNEY FOR PARTY WAIVING READING OF TRANSCRIPT _____
Missouri Public Service Commission

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

(PLEASE PRINT)

ENTRY OF APPEARANCE

CASE NUMBER TO-2004-0207	IN RE Possibility of Impairment without Unbundled Local Circuit. Switching When Serving the Mass Market
NAME Paul G. Lane	ATTORNEY <input type="checkbox"/> YES <input type="checkbox"/> NO
ADDRESS SBC Missouri One SBC Center, Room 3520 St. Louis, Missouri 63101 Tel: 314-235-4300	
APPEARING FOR Southwestern Bell Telephone, L.P. d/b/a SBC Missouri	
TRANSCRIPT ORDER Number of Copies of Printed Transcript Number of Copies of ASCII Diskette E-mail address <u>paul.lane@sbc.com</u>	
TRANSCRIPT DELIVERY (PLEASE CHECK ONE) <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 checked="" type="checkbox"/> Send by (Circle One): Fed. Express/Airborne/ <u>UPS</u> (Account No. <u>A 4624-X1</u>)	
*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.	

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FILED
NOV 25 2003
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ENTRY OF APPEARANCE

CASE NUMBER	TO - 2004-0207	IN RE	Enquiry Into Impairment
NAME	LISA Creighton Hendricks	ATTORNEY	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
ADDRESS	6450 Sprint Parkway OP, KS 66251		
APPEARING FOR	Sprint Mo Inc and Sprint Communications L.P.		
FILED ³ NOV 25 2003			
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 checked="" type="checkbox"/> E-mail address Lisa.C.Creighton@hendricks.com		<input type="checkbox"/> Will Pick up at PSC Receptionist's Desk	
E-mail: sprint.com		<input type="checkbox"/> Send by (Circle One): Fed. Express/Airborne/ _____ (Account No. _____)	
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ENTRY OF APPEARANCE

CASE NUMBER <u>TD-2004-0207</u>	IN RE <u>Commission Inquiry re: Mass Market</u>
NAME <u>LARRY W. Dority, Fischer & Dority, P.C.</u>	ATTORNEY <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
ADDRESS <u>101 Madison, Suite 400</u> <u>Jefferson City, Mo 65101</u>	
Tel: <u>573-636-6758</u>	
APPEARING FOR <u>CenturyTel of Missouri, LLC & Spectra Communications Group, LLC d/b/a</u> <u>CenturyTel</u>	
TRANSCRIPT ORDER <u>1</u> 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 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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Missouri Public
Service Commission

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ENTRY OF APPEARANCE

CASE NUMBER	IN RE
TD-2004-0207	MASS MARKET IMPAIRMENT
NAME	ATTORNEY
CHARLES BRENT STEWART	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
ADDRESS	
4603 JOHN GARRY DRIVE, SUITE 11	
COLUMBIA, MO 65203	
APPEARING FOR	FILED ³ Tel: 573-499-0635
SAGE TELECOM, INC.	NOV 25 2003
Missouri Public Service Commission	
TRANSCRIPT ORDER	
TRANSCRIPT DELIVERY (PLEASE CHECK ONE)	
<input checked="" type="checkbox"/> Number of Copies of Printed Transcript	<input checked="" type="checkbox"/> Mail First Class
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E-mail address _____	<input type="checkbox"/> Will Pick up at PSC Receptionist's Desk
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ENTRY OF APPEARANCE

CASE NUMBER	T0-2004-0207		IN RE	Possibility of Impairment w/o Unbundled Local Circuit	
NAME	Jason L. Ross			ATTORNEY	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
ADDRESS	Greensfelder Hemker & Gale, P.C. ; 10 South Broadway, 2000 Equitable Bldg. St. Louis, Missouri				
APPEARING FOR	Fidelity Communication Services I, Inc. Fidelity Communication Services II, Inc. Fidelity Communication Services III, Inc. Fidelity Cablevision, Inc.				
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 checked="" type="checkbox"/> E-mail address <u>jlr@greensfelder.com</u>	<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 10-2004-0207	IN RE Impairment without Unbundled Local Circuit Switching
NAME Mark W. Comley	ATTORNEY <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
ADDRESS 601 Phnom, Suite 301, PO Box 527	
JC Mo 65102-0537 Tel: 573-634-2266	
APPEARING FOR ATT Communications of the Southeast Inc.	
TCG St Louis Inc, TCG Kansas City, Inc.	
Birch Telecom of Missouri Inc.	
Z-Tel Communications, Inc.	
Missouri Public	
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 checked="" type="checkbox"/> E-mail address comley.m@ncrpsc.com	<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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NOV 25 2003

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MISSOURI PUBLIC SERVICE COMMISSION

(PLEASE PRINT)

ENTRY OF APPEARANCE

CASE NUMBER TO-2004-0207	IN RE COMMISSION INQUIRY POSSIBILITY OF IMPAIRMENT
NAME BILL MAGNESS	ATTORNEY <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
ADDRESS CASEY GENTZ, L.L.P., 919 CONGRESS AVE, STE. 1060 AUSTIN, TX 78701	
Tel: 512-225-0019	
APPEARING FOR A.T.T. COMM. OF THE SOUTHWEST, A.T.T. LOCAL SERVICES ON BEHALF OF TCG ST. LOUIS AND TCG KANSAS-CITY, INC., BIRCH TELECOM OF MISSOURI, INC. AND Z-TEL COMMUNICATIONS, INC.	
TRANSCRIPT ORDER ____ 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 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 10-2004-0267	IN RE
NAME PATRICK R. COWLISHAW	ATTORNEY <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
ADDRESS JACKSON WALKER LLP, 901 Main St., Suite 6000, DALLAS, TX 75202	
Tel: 214/953-6000	
APPEARING FOR AT&T COMMUNICATIONS OF THE SOUTHWEST, INC., AT&T LOCAL SERVICES ON BEHALF OF TCG ST. LOUIS, INC. AND TCG KANSAS CITY, INC.	
TRANSCRIPT ORDER ____ 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 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	TO-2004-0207	IN RE	Inquiry into impairment
NAME	Mary Ann (Garr) Young & William D Steinmeier		ATTORNEY <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
ADDRESS	William D Steinmeier PC POB104595 JCMO 65102-4595		
	Phone: 573-634-8109 email: myyoung0654@aol.com		
APPEARING FOR	<p>_____ Xspedius Management Co. Switched Services, LLC, d/b/a Xspedius Communications, and Xspedius _____ Management Co. of Kansas City, LLC, d/b/a Xspedius Communications, McLeodUSA Telecom _____ Services, Inc., Ameritel Missouri, Inc., and Allegiance Telecom of Missouri, Inc.</p>		
TRANSCRIPT ORDER	TRANSCRIPT DELIVERY (PLEASE CHECK ONE)		
<input type="checkbox"/> Number of Copies of Printed Transcript	<input type="checkbox"/> Mail First Class		
<input checked="" type="checkbox"/> Number of Copies of ASCII Diskette*	<input checked="" type="checkbox"/> Will Pick up in Mailbox Outside PSC Records Dept.		
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FILED
NOV 25 2003
Missouri Public
Service Commission



ENTRY OF APPEARANCE

CASE NUMBER	TO 2004-0207	IN RE	Mass Mault 1 impairment
NAME	Michael Dondino	ATTORNEY	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
ADDRESS	P.O. Box 2230 Jefferson City MO 65102 Tel: 751-5557		
APPEARING FOR	OPC Public		
	Michael Dondino 24570		

TRANSCRIPT ORDER

Number of Copies of Printed Transcript _____
Number of Copies of ASCII Diskette* _____
E-mail address _____

TRANSCRIPT DELIVERY (PLEASE CHECK ONE)

- ☐ Mail First Class
☐ Will Pick up in Mailbox Outside PSC Records Dept.
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Missouri Public

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CASE NUMBER	TD-2004-0207		IN RE	Possibility of Impairment w/o Unbundled Local Circuit Switching Mass market	
NAME	Nathan Williams		ATTORNEY	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
ADDRESS	PO Box 360				
		Jefferson City MO 65102	Tel: 573 751 8702		
APPEARING FOR	Staff of the Public Service Commission				
FILED³					
NOV 25 2003					

TRANSCRIPT ORDER

____ Number of Copies of Printed Transcript
____ Number of Copies of ASCII Diskette*
____ E-mail address _____

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