



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, Leo J. Bub, Robert J. Gryzmala	
ATTORNEY <input checked="" 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 <input checked="" type="checkbox"/> E-mail address paul.lane@sbc.com	
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/UPS (Account No. A424-X1)	
Missouri Public Service Commission	
FEB 09 2004	
* 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, _____ (PARTY) waives the preparation of a printed transcript.

DATE _____ SIGNATURE OF PARTY OR ATTORNEY FOR PARTY WAIVING PREPARATION OF TRANSCRIPT _____



ENTRY OF APPEARANCE

CASE NUMBER TC-2004-0207	IN RE Commission Hearing INTO Mass Market Insurance
NAME Mark W. Cornlay	ATTORNEY <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
ADDRESS 601 Pioneer, Suite 301 PO Box 537	
JC Ph 651-02-0537	Tel:
APPEARING FOR ATT of SW Inc.; ATOT Local Services on behalf of TCG St. Louis, TCG Kansas City, Birch Telecom Mission & Ztel Communications Inc.	
FILED	
FEB 09 2004	
TRANSCRIPT ORDER _____ Number of Copies of Printed Transcript _____ Number of Copies of ASCII Diskette E-mail address Cornlay@ncorp.com	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

(PLEASE PRINT)

ENTRY OF APPEARANCE

CASE NUMBER 70-2004-0207	IN RE IMPAIRMENT
NAME CARL S. 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 NWVOX, XO, BIG RIVER, COVAR, SOCKET McI meter, Brooks, McI Worldcom, Intermed. a	
FEB 09 2004	
TRANSCRIPT ORDER 1 Number of Copies of Printed Transcript Number of Copies of ASCII Diskette 1 E-mail address clumley@cohy.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.)
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ENTRY OF APPEARANCE

CASE NUMBER <u>JD-2004-0207</u>	IN RE <u>Commission Inquiry INTO IMPAIRMENT</u>
NAME <u>LISA Creighton Henderson</u>	ATTORNEY <input type="checkbox"/> YES <input type="checkbox"/> NO
ADDRESS <u>6450 Sprint Parkway</u> <u>Overland Park, KS 66251</u>	
Tel: <u>913-35-9363</u>	
APPEARING FOR <u>Sprint Mo Inc and Sprint</u>	
FEB 09 2004	
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 <u>Lisa.C.Creighton@hondai.com</u> <u>@mail.sprint.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 type="checkbox"/> Send by (Circle One): Fed. Express/Airborne/ (Account No. _____)
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DATE

SIGNATURE OF PARTY OR ATTORNEY FOR PARTY WAIVING PREPARATION OF TRANSCRIPT



ENTRY OF APPEARANCE

CASE NUMBER TO-2004-0207	IN RE INQUIRY - MASS MARKET
NAME CHARLES BRENT STEWART	ATTORNEY <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
ADDRESS 4003 JOHN GARRY DRIVE SUITE 11 COLUMBIA MO 65203	
Tel: 573-499-0635	
APPEARING FOR SAGE TELECOM, INC.	
FEB 09 2004	
TRANSCRIPT ORDER <input checked="" type="radio"/> Number of Copies of Printed Transcript ____ Number of Copies of ASCII Diskette* E-mail address STEWART499@aol.com	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. _____)

* 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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DATE

SIGNATURE OF PARTY OR ATTORNEY FOR PARTY WAIVING PREPARATION OF TRANSCRIPT



ENTRY OF APPEARANCE

CASE NUMBER TD-2004-0207	IN RE Mass Market Inquiry
NAME LARRY W. Dority, Fischer & Dority, P.C.	ATTORNEY <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
ADDRESS 101 Madison, Suite 400 Jefferson City, Mo 65101	
Tel: 573-636-6758	
APPEARING FOR CenturyTel of Missouri, LLC Spectra Communications Group, LLC d/b/a CenturyTel	
FEB 09 2004	
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 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.	

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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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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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FILED

FEB 09 2007 (PLEASE PRINT)

ENTRY OF APPEARANCE

CASE NUMBER <u>TO-2004-0207</u>	IN RE <u>Triennial Review Order Inv.</u>	Missouri Public Service Commission
NAME <u>Mary Ann (Garr) Young</u>		ATTORNEY <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
ADDRESS <u>William D Steinmeier PC POB 104595 JCMO 65110-4595</u> <u>2031 Tower Dr JCMO 65109</u> Tel: <u>513 634 8109</u>		
APPEARING FOR <u>Ameritel Missouri, Inc.</u> <u>myoung0654@aol.com</u> <u>Alliance Telecom of Missouri, Inc</u> <u>McLeod USA Telecommunications Services Inc; Xspedius Management</u> <u>Co Switched Services LLC & Xspedius Management Co. of KC LLC</u>		
TRANSCRIPT ORDER <u>1</u> Number of Copies of Printed Transcript <u>1</u> Number of Copies of ASCII Diskette E-mail address <u>myoung0654@aol.com</u>		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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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

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DATE

SIGNATURE OF PARTY OR ATTORNEY FOR PARTY WAIVING PREPARATION OF TRANSCRIPT



MISSOURI PUBLIC SERVICE COMMISSION

(PLEASE PRINT)

ENTRY OF APPEARANCE

CASE NUMBER 78-2604-0207	IN RE Common Inquiry Into Mass Market Insurance
NAME Bill Magnus	ATTORNEY <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
ADDRESS 919 Congress Ave. Suite 1068 Austin, Texas 78701	
Tel: 512-460-9808	
APPEARING FOR AT&T Communications of TSN, Inc. AT&T Local Services on behalf of TCG St. Louis & TCG Kansas City, Birch Telecom of Missouri, & Z-Tel Communications Inc.	
TRANSCRIPT ORDER 1 Number of Copies of Printed Transcript Number of Copies of ASCII Diskette E-mail address <u>bmagnus@phone.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. Public Service Commission <input type="checkbox"/> Will Pick up at PSC Receptionist's Desk <input type="checkbox"/> Send by (Circle One): Fed. Express/Airborne/ (Account No. _____)
FEB 09 2004	
*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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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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Pursuant to this section, _____
(PARTY)
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DATE

SIGNATURE OF PARTY OR ATTORNEY FOR PARTY WAIVING PREPARATION OF TRANSCRIPT



MISSOURI PUBLIC SERVICE COMMISSION

(PLEASE PRINT)

ENTRY OF APPEARANCE

CASE NUMBER ID - 2004-0207	IN RE Com'n Inquiry Into Possibility of Impairment. . .
NAME Katherine K. Mudge	ATTORNEY <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
ADDRESS 816 Congress Avenue, Ste. 1270 Austin TX 78701	
Tel: (512) 322-9868	
APPEARING FOR Sage Telecom, Inc.	
FEB 09 2004	
Missouri Public Service Commission	
TRANSCRIPT ORDER 1 Number of Copies of Printed Transcript 1 Number of Copies of ASCII Diskette* 1 E-mail address kmudge@reglaw.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. _____)
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Pursuant to this section, Sage Telecom, Inc.

(PARTY)

waives the reading of the transcript by this Commission.

DATE 1/26/04 SIGNATURE OF PARTY OR ATTORNEY FOR PARTY WAIVING READING OF TRANSCRIPT

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Pursuant to this section, _____

(PARTY)

waives the preparation of a printed transcript.

DATE _____ SIGNATURE OF PARTY OR ATTORNEY FOR PARTY WAIVING PREPARATION OF TRANSCRIPT



ENTRY OF APPEARANCE

CASE NUMBER 10-2004-0207	IN RE FCC TRD
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	
FEB 09 2004	

TRANSCRIPT ORDER

____ Number of Copies of Printed Transcript
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____ E-mail address _____

TRANSCRIPT DELIVERY (PLEASE CHECK ONE)

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