



ENTRY OF APPEARANCE

CASE NUMBER	AY 2000-175	IN RE.	Electric Telephone Sptd
NAME	Michael PANDINO	ATTORNEY	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
ADDRESS	P.O. Box 7800 Jefferson City MO 65102		
APPEARING FOR	OAC Mellie		
FILED ² <i>Michael Pandino</i> NOV 19 1999 <i>2858</i>			

TRANSCRIPT ORDER:	TRANSCRIPT DELIVERY (PLEASE CHECK ONE)
<input checked="" type="checkbox"/> Number of Copies of Printed Transcript	<input checked="" type="checkbox"/> 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"/> 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, _____
(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	OX-2000-175	IN RE.	proposed Rule 4 CSR 240-1P.00
NAME	Dennis L. Frey	ATTORNEY	<input type="checkbox"/> YES <input type="checkbox"/> NO
ADDRESS	P.O. Box 360 Jefferson City, MO 65102		
APPEARING FOR	staff of MO P.S.C.		
FILED² NOV 19 1999			
TRANSCRIPT ORDER:		TRANSCRIPT DELIVERY (PLEASE CHECK)	
<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 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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