



## ENTRY OF APPEARANCE

CASE NUMBER	HX 99-443	IN RE	Aff. Trans. for Steam Utilities
NAME	John Coffman	ATTORNEY	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
ADDRESS	P.O. Box 7800 Jefferson City MO 65102		
APPEARING FOR	Office of the Public Counsel		

**FILED**  
OCT 7 1999  
Missouri Public  
Service Commission

## TRANSCRIPT ORDER:

1 Number of Copies of Printed Transcript  
\_\_\_\_\_ Number of Copies of ASCII Diskette\*

## TRANSCRIPT DELIVERY: (PLEASE CHECK ONE)

- ☐ Mail First Class  
☐ Will Pick up in Mailbox Outside PSC Records Dept.  
☐ Will Pick up at PSC Receptionist's Desk  
☐ 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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20A



## ENTRY OF APPEARANCE

CASE NUMBER	IN RE.
HX 99-443	
NAME	ATTORNEY <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Lera L. Shemwell	
ADDRESS	
PO Box 360	
J C Mo	
APPEARING FOR	
Staff of MoPSC	

**FILED**  
OCT 7 1999  
Missouri Public Service Commission

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<input type="checkbox"/> Number of Copies of Printed Transcript	<input type="checkbox"/> Mail First Class
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## ENTRY OF APPEARANCE

CASE NUMBER <b>HK-99-443</b>	IN RE. <b>Proposed Affiliate Transaction Rule</b>
NAME <b>JEFF KEEVIL</b>	ATTORNEY <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
ADDRESS <b>1001 Cherry Street, Suite 302 Columbia, MO 65201</b>	
APPEARING FOR <b>Trigen-Kansas City Energy Corporation</b>	
<b>FILED</b> OCT 7 1999 Missouri Public Service Commission	
TRANSCRIPT ORDER: <b>1</b> Number of Copies of Printed Transcript Number of Copies of ASCII Diskette*	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	HX-99-443	IN RE.	stream off rail rule
NAME	Gary W Duff	ATTORNEY	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
ADDRESS	PO Box 456 Jefferson City, MO		
APPEARING FOR	St. Joseph Light & Power Co.		
<b>FILED</b> OCT 7 1999 Missouri Public Service Commission			

TRANSCRIPT ORDER:	TRANSCRIPT DELIVERY (PLEASE CHECK ONE)
<input checked="" 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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## ENTRY OF APPEARANCE

CASE NUMBER <b>HX-99-443</b>	IN RE. <b>Affiliate Transaction Rules - Steam</b>
NAME <b>WILLIAM J. NIEHOFF</b>	ATTORNEY <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
ADDRESS <b>1901 Chouteau Ave, St. Louis, Mo (MC 1310) 63103</b>	
APPEARING FOR <b>Amicus</b>	
TRANSCRIPT ORDER: <input checked="" type="checkbox"/> Number of Copies of Printed Transcript <input type="checkbox"/> Number of Copies of ASCII Diskette*	
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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## MISSOURI PUBLIC SERVICE COMMISSION

(PLEASE PRINT)

## ENTRY OF APPEARANCE

CASE NUMBER HX-99-443	IN RE.
NAME SHAWN FAGAN	ATTORNEY <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
ADDRESS 616 W. SURF #3 CHICAGO IL 60657	
APPEARING FOR AMEREN CORPORATION AND UNION ELECTRIC COMPANY	
TRANSCRIPT ORDER: ____ Number of Copies of Printed Transcript ____ Number of Copies of ASCII Diskette*	
TRANSCRIPT DELIVERY: (PLEASE CHECK ONE) <input type="checkbox"/> Mail First Class <input type="checkbox"/> Will Pick up in Mailbox Outside PSC Records Division <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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