1 1	REQUEST TO ESTABLISH DOCKET
Date 2/9/96	Docket No. 960160-TC
1. Division Name/Staff Name	communications/Hawkins
3 000	
2. UFK	
3. OCR	22 11 2
Telephone Hardld D.	Certificate No. 3949 by Schreiber
5. Suggested Docket Holling L	ist (attach separate sheet if necessary)
as shown in Rule 25-22.	
	nd address for all others. (<u>Hatch representatives to clients.</u>)
	presentatives (if any)
	chreiber
Harold D. S	
Harold D. S	chreiber

6. Check one: Documentation is attached.

____ Documentation will be provided with the recommendation.

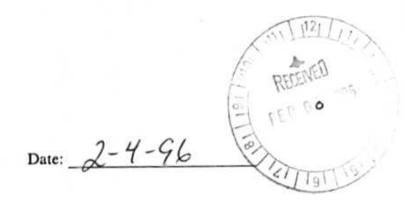
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PSC/RAR 10 (Revised 01/96)

DOCUMENT NUMBER-DATE

01586 FEB-9 #

FPSC-RECORDS/REPORTING



Ms. Brenda H. Hawkins Florida Public Service Commission Division of Communications, Room 280-D 2540 Shumard Oak Boulevard Tallahassee, FL 32399-0850

Dear Ms. Hawkins:

I wish to cancel my pay telephone certificate. I am not providing pay telephone service and understand that I am responsible for payment of Regulatory Assessment Fees until the date the certificate is cancelled by the Florida Public Service Commission.

Print name of company: COB COMMUNICATIONS

Print your name: HAROLD D. SCHREIBER

Your signature: Houold W. Schreiber