

REQUEST TO ESTABLISH DOCKET
(PLEASE TYPE)

Date 6/26/96

Docket No. 960777-TC

1. Division Name/Staff Name COMMUNICATIONS/HAWKINS

2. DPR _____

3. DCR _____

4. Suggested Docket Title Request for cancellation of
Pay Telephone Certificate No. 4340
by Calvin Bradshaw Burke (TF504)

5. Suggested Docket Mailing List (attach separate sheet if necessary)

- A. Provide NAMES ONLY for regulated companies or ACRONYMS ONLY regulated industries,
as shown in Rule 25-22.104, F.A.C.
B. Provide COMPLETE name and address for all others. (Match representatives to clients.)

1. Parties and their representatives (if any)

Calvin Bradshaw
Burke

2. Interested Persons and their representatives (if any)

6. Check one:

Documentation is attached.

Documentation will be provided with the recommendation.

MEN WHO WIN

6/20/96

To the Florida Public Commission,
I would like to cancel my
license to operate a public pay phone.
I no longer have any pay phones
in service as of April, 1996.

Docket No. 95-337-TC

Certificate No. 4340

Calvin Bradshaw Burke

7779 Lynchburg Ct. E.

Jacksonville, FL 32277

Thank you,

Calvin Bradshaw Burke

