

REQUEST TO ESTABLISH DOCKET  
(PLEASE TYPE)

Date 1/6/97

Docket No. 970037-7<sup>c</sup>

1. Division Name/Staff Name COMMUNICATIONS/HAWKINS

2. OPR \_\_\_\_\_

3. OCR \_\_\_\_\_

4. Suggested Docket Title Request for cancellation of Pay Telephone Certificate No. 4579 by Northwest Florida Payphones, Inc. (TF650)

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.)

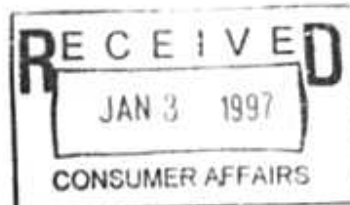
1. Parties and their representatives (if any)

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

2. Interested Persons and their representatives (if any)

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

6. Check one:  Documentation is attached.  
 Documentation will be provided with the recommendation.



Northwest Florida Payphones, Inc  
6776 LeGrande Court  
Milton, Fl. 32570

23, December, 1996

MEMORANDUM

From: President/owner

To: Florida Public Service Commission

Subj: Certificate Cancellation

1. I received my Certificate [no. 4579] on April 1, 1996 and operated the business until the present. As of December 22, 1996 I sold all my payphones and the equipment. I no longer own any payphones and have no use for this Certificate. Please cancel my Certificate as of 12-22-96.

Thank You

*William F. Coffey*  
William F. Coffey



Fold at line over top of envelope to  
the right of the return address

**CERTIFIED**

P 150 003 515

**MAIL**



Florida Public Service Commission  
2540 Shumard Oak Blvd.  
Tallahassee, Fl. 32399-0850

RETURN TO SENDER

3239910850 01

