REQUEST TO ESTABLISH DOCKET (PLEASE TYPE)

Dat	e_6/10/97
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1.	Division Name/Staff Name_Communications/O'Pry
2.	The Control of the Co
3.	OCR_Legal
4. BY	Suggested Docket Title REQUEST FOR APPROVAL OF TARIFF FILING TO DE-TARIFF BILLING AND COLLECTION RATE ALLTEL FLORIDA, INC. (T-97-486, FILED 5/30/97)
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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)
ALL	TEL FLORIDA, INC.
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	2. Interested Persons and their representatives (if any)
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6.	Check one: Documentation is attached.
	x Documentation will be provided with recommendation.

1:\PSC\RAR\WP\ESTDKT.
PSC/RAR 10 (Revised 01/96)

DOCUMENT NUMBER - DATE

05745 JUN 105