	•	TABLISH DOCKET SE TYPE) Docket No
Date	ate <u>0 3 0 1</u>	Docket No
1. 2.	. Division Name/Staff Name $\underline{ECR} - \underline{S}$	SLEMKEWICZ
	. ocr <u>LEG</u>	
4.	•	XTENSIUN OF TIME UNTIL JUNE 30,
		INVAL REPORT REQUIRED BY
	NATURAL GAS COMPANY, INC	WISTRATIUE CODE, BY ST. JOE
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. (<u>Match representatives to clients.</u>)		
	 B. Provide COMPLETE name and address for all other 1. Parties and their representatives (if any) 	rs. (<u>Match representatives to clients.</u>)
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	ST. JOE NATURAL GAS	
	COMPANY, INC.	
	······································	
	Interested Persons and their representative	s (it any)
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6.	5. Check one: Documentation is attached.	,
	Documentation will be provided	with the recommendation.
I:\	:\PSC\RAR\WP\ESTDKT.	
PSC	SC/RAR 10 (Revised 01/96)	DOCIMENT
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		U/13/ JUN-85
		DOCUMENT NUMBER DATE 07131 JUN-85 FPSC-RECORDENTING