REQUEST TO ESTABLISH DOCKET (Please Type)							
Date:	7/8/2008		Docket No.:	-TX	080	45.	3-11
1. Division Name/Staff Name: Cmp/M. Watts							
2. OPR:	СМР						
3. OCR: GCL							
5. Sugg	ested Docket Mailing	ompliance investigation of N f Section 364.183(1), F.S., f Rule 25-4.0161, F.A.C., Re List (attach separate she ACRONYMS ONLY if a regu	Access to Com egulatory Asses et if necessary)	pany Records and sment Fees; Telec	l apparent fir	st-time	violation 1
1.		NAME AND ADDRESS for a sepresentatives (if any): td. Corp. (TX923)	all others. (Mat	ch representative	es to compa	nies.)	
2.	interested persons	and their representatives	(if any):			DOCUMENT NUMBER-DATE	- TIT -
6. Check one:    Documentation is attached.   Documentation will be provided with recommendation.							