

REQUEST TO ESTABLISH DOCKET
(PLEASE TYPE)

Date 12/30/97

Docket No. 9716666-TC

1. Division Name/Staff Name COMMUNICATIONS/Hawkins

2. OPR _____

3. DCR _____

4. Suggested Docket Title Request for cancellation of
Pay Telephone Certificate No. 4570 by
Sahadeo Bickram.
(TF636)

5. Suggested Docket Meeting 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)

Sahadeo Bickram _____

2. Interested Persons and their representatives (if any)

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

December 15, 1997

Sahadeo Bickram
210 North East 121 Terrace
North Miami, Florida, 33161

Ph # (305) 681-8644

Ph # (305) 685- 3147

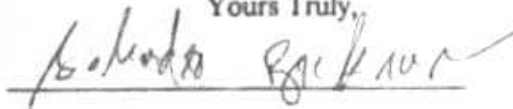
Florida Public Service Commission
2540 Shumard Oak Blvd
Tallahassee, Florida, 32399-0850

To Whom it may concern,

This letter is in reference to my Pay Phone certificate for which I would like to be cancel. My pay phone business has been close for over a year now and I am not using my certificate. Please cancel my certificate and close my account.
My FEI number is 65-0673966

Thank you:

Yours Truly,



Sahadeo Bickram

RECEIVED

DEC 15 1997

CMU