

REQUEST TO ESTABLISH DOCKET
(PLEASE TYPE)

Date 1/5/98

Docket No. RRB-TC

1. Division Name/Staff Name COMMUNICATIONS/Hawkins

2. OPR _____

3. OCR _____

4. Suggested Docket Title Request for cancellation of Pay Telephone Certificate No. 5008 by PAULO MALDONADO.

(TF966)

5. Suggested Docket Hearing 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.

TF 966

December 21, 1997

To:

FLORIDA PUBLIC SERVICE COMMISSION
2540 SHUMARD OAK BOULEVARD
TALLAHASSEE, FL 32399-0850

Dear Sirs

With this, I notify that I'd intend to cancel my certificate because I don't have pay telephones at this time and never had before.

Enclosed I'm sending my last payment in the amount of \$50.00.

Sincerely,


Paulo C. Maldonado

RECEIVED

DEC 31 1997

CMU