

Case Assignment and Scheduling Record

Section 1 - Division of Records and Reporting (RAR) Completes

Docket No. 990419-TC Date Docketed: 04/01/1999 Title: Request for cancellation of Pay Telephone Certificate No. 5921 by Jack Marion Baker, effective 3/31/99.
 Company: Jack Marion Baker

Official Filing Date: _____
 Last Day to Suspend: _____ Expiration: _____

Referred to: _____ ADM _____ AFA _____ APP _____ CAF _____ (CMJ) _____ EAG _____ GCL _____ LEG _____ RAR _____ RRR _____ WAW _____
 ("(") indicates OPR)

Section 2 - OPR Completes and returns to RAR in 10 workdays.

Time Schedule

Program/Module Bl(f)

**WARNING: THIS SCHEDULE IS AN INTERNAL PLANNING DOCUMENT.
 IT IS TENTATIVE AND SUBJECT TO REVISION.
 FOR UPDATES CONTACT THE RECORDS SECTION: (850) 413-6770
 Current CASR revision level**

	<u>Staff Assignments</u>					
<u>OPR Staff</u>	<u>P Isler</u>					
<u>Staff Counsel</u>	<u>K Pena</u>					
<u>OCRs ()</u>						

	<u>Due Dates</u>	
	Previous	Current
0		
1. Staff Recommendation	NONE	04/22/1999
2. Agenda - Regular	NONE	05/04/1999
3. Standard Order	NONE	05/24/1999
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Recommended assignments for hearing and/or deciding this case:
 Full Commission Commission Panel _____
 Hearing Examiner _____ Staff _____
 Date filed with RAR: 04/12/1999
 Initials: OPR _____
 Staff Counsel _____

Section 3 - Chairman Completes

Assignments are as follows:

- Hearing Officer(s)

Commissioners						Hrg. Exam.	Staff
ALL	GR	DS	CL	JN	JC		
X							

- Prehearing Officer

Commissioners					ADM
GR	DS	CL	JN	JC	
					X

Where panels are assigned the senior Commissioner is Panel Chairman; the identical panel decides the case.
 Where one Commissioner, a Hearing Examiner or a Staff Member is assigned the full Commission decides the case.

Approved: _____
 Date: 04/12/1999

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Time Schedule

Program/Module BI(f)

Staff Assignments

OPR Staff	_____

Staff Counsel	_____

OCRs ()	_____

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Due Dates

Previous Current

1.	_____	_____	_____
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37.	_____	_____	_____
38.	_____	_____	_____
39.	_____	_____	_____
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 Hearing Examiner _____ Staff _____

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Approved: _____
 Date: ____ / ____ / ____