

Case Assignment and Scheduling Record

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

Docket No. 990619-TI Date Docketed: 05/13/1999 Title: Request for name change on Interexchange Telecommunications Certificate No. 5732 from Single Billing Services, Inc. to Single Billing Services, Inc. d/b/a Asian American Association.
Company: Asian American Association (Single Billing Service Single Billing Services, Inc.)

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

Referred to: _____
("()" indicates OPR)

ADM AFA APP CAF (CHU) EAG GCL LEG RAR RRR WAW
_____ _____ _____ _____ X _____ _____ X _____ _____ _____

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

Time Schedule

Program/Module Bl(d)

**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**

Due Dates

Staff Assignments

OPR Staff T Williams

Staff Counsel K Pena, C Bedell

OCRs () _____

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- 1. Recommendation to Legal
- 2. Administrative Order
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Previous Current

	Previous	Current
1. Recommendation to Legal	NONE	06/24/1999
2. Administrative Order	NONE	07/09/1999
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Recommended assignments for hearing and/or deciding this case:

Full Commission _____ Commission Panel _____
Hearing Examiner _____ Staff X

Date filed with RAR: 05/18/1999

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: 05/18/1999

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Program/Module BI(d)

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	<u>Staff Assignments</u>	
<u>OPR Staff</u>	_____	_____
	_____	_____
	_____	_____
<u>Staff Counsel</u>	_____	_____
<u>OCRs ()</u>	_____	_____
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	<u>Due Dates</u>	
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 Hearing Examiner _____ Staff _____
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Commissioners					ALM
GR	DS	CL	JN	JC	

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Approved: _____
 Date: / /