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AUTOMATIC CASE ACTION FORM

Action Needed

☒ Case Withdrawn at Applicant's Request (within Auto period)

☐ Issue Certificate No. _____ to (use exact name): _____

to the list of carriers.

☐ Reflect name change from _____ to _____☐ Transfer Certificate from: _____ to _____

☐ Cancel Certificate due to merger with _____, which has Certificate No. _____

☐ Cancel CTS/TP Certificate No. _____ due to being issued a CLEC certificate

☐ Reflect Change of Ownership to:

☐ Cancel Certificate No. _____ and remove from the list of _____ carriers

☐ Keep Case File Open for:

This is to certify that the images appearing are an accurate and complete reproduction of a case file document delivered in the regular course of business.

Technician 2 Date Processed **JUN 10 2012**