

## The Commonwealth of Alassachusetts DEPARTMENT OF PUBLIC UTILITIES TRANSPORTATION NETWORK COMPANY DIVISION

One South Station, 3<sup>rd</sup> Floor Boston, MA 02110 (617) 305 3569

## NOTICE OF REPRESENTATION

Please enter my appearance on behalf of _	in the above
matter before the Massachusetts Departme	ent of Public Utilities, Transportation Network
Company Division.	
By:	C:
	Signature
	Printed Name
	·
	Address
	BBO # (if applicable)

DATE: