REQUEST TO ESTABLISH DOCKET (PLEASE TYPE)

Dat	e <u> 1/12/01</u>	Docket No. 010051-TC					
1. Division Name/Staff Name <u>Division of Regulatory Oversight/McCoy</u>							
2.	OPR Division of Regulatory Oversight/McCoy						
3.	OCR Legal Services						
4.	4. Suggested Docket Title Request for Cancellation of Pay Telephone Certificate No. 5926 by						
Scott M. Kuthan, effective 12/31/00.							
5.	Suggested Docket Mailing 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)					
_							
_		and the second s					
	2. Interested Persons and their represent	atives (if any)					
		· · · · · · · · · · · · · · · · · · ·					
6.	Check one: Documentation is attached. Documentation will be provide	ed with recommendation.					
1:\	PSC\RAR\WP\ESTDKT.						

PSC/RAR 10 (Revised 01/96)

DOCUMENT NUMBER-DATE 00532 JAN 125

TO A'/Cid I			e return must be filed on or before Regulatory Assessme	/1/ (//) (
STATUS	s: $\sqrt{Q.15}$	_	lic Service Commission	FOR PSC USE ONLY Check# 047	
	Actual Return Estimated Return Amended Return D COVERED: 2000 TO	TG395 Scott M. Kuthan 12844 Winthrop Cove Jacksonville Ft. 3222		\$ 50.00 0603002 003001 \$ P 0603002 004011 \$ I Postmark Date //4/0/ Initials of Preparer! MC	
Kuth	IAN COMMUNICATIONS	Please Complete Below If O	Official Mailing Address Has Changed ADU CHOSSING DA (Address)	Charles with Section (Zip)	
LINE NO.	ACC	COUNT CLASSIFICAT	ION	TOOTHE FAR TONICADE CONTINUE AND CONTINUE CONTINUES OF THE CONTINUES OF TH	
1.	Gross Operating Revenue (Florida)			\$ 52/252	
2.	Gross Intrastate Revenue			कि स्रोग्नेशक्ता स्थापित स्वर्ध कार्रा	
3.	LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back)			The state of the s	
4.	TOTAL REVENUES for Regulatory Assessment Fee Calculation (Line 2 less Line 3)				
5.	Regulatory Assessment Fee Due - (Multiply Line 4 by 0.0015)				
6.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)				
7.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)				
8.	TOTAL AMOUNT	T DUE	Dougle	\$ 47.81 200 100 100 100 100 100 100 100 100 100	
	AS PROVIDED I	N SECTION 364.336 FLORE	DA STATUTES, THE MINIMUM		
TH	HIS FORM MUST BE CO	MPLETED AND RETURNED	D REGARDLESS OF THE AMOU	UNT OF REVENUES REPORTED	
9.	Number of pay tele by this Return	ephones in operation at	close of period covered	2/00. listed above Siles are fixed 2/00	
* These	amounts must be intrastate only a	nd must be verifiable.	Bufine sold M	Sill are take at	
information	n is a true and correct statement.	the above-named company, have r. I am aware that pursuant to Sect the performance of his official duty	read the foregoing and declare that to to so the same of the same	the best of my knowledge and belief the above nowingly makes a false statement in writing with the second degree. (Date)	
(P)	reparer of Form - Pleas	se Print Name)	F.E.I. No.	3.48 Fax Number ()	

6103667#

Jackie Shis Co. is
Paid in full
Thru 2000.

Alease spen a
docket to cancel
Certificate eff.
12/31/00.

Thanks, Daula

COMPANY IDENTIFICATION

Printed on 01/11/2001 at 15:36:20 by TJM

Complete Name: Scott M. Kuthan

Mailing Name: Scott M. Kuthan

Company Code: TG395 FEID Number:

MAILING INFORMATION

Attention:

Address Line 1: 3088 Igou Crossing Drive

Address Line 2:

City: Chattanooga State: TN Zip Code: 37421-7142

E-mail Address: SKUTHANO@AOL.COM

Web Address:

Liaison 1: Scott M. Kuthan Liaison 2:

Title: President Title: Phone: (423) 553-9899 Phone: E-mail: SKUTHANO@AOL.COM E-mail: Fax 1:

County:

COMPANY IDENTIFICATION

Printed on 01/11/2001 at 15:36:31 by TJM

Complete Name: Scott M. Kuthan

Mailing Name: Scott M. Kuthan

Company Code: TG395 FEID Number:

COMPANY INFORMATION

Address Line 1: 3088 Igou Crossing Drive

Address Line 2:

City: Chattanooga State: TN Zip Code: 37421-7142

Reg. Date: 10/13/1998 Inactive Date:

Transfered To: Trans. From:

Certificate 1: 5926 Certificate 2:

Corporate Type:

Service 1: PAT - Pay Telephone

Service 2: Service 3: Service 4: Class (WAW):

Phone Count: 27

County 1: County 2: County 3: County 4:

Bankruptcy: No