

State of Florida



Public Service Commission  
CAPITAL CIRCLE OFFICE CENTER • 2540 SHUMARD OAK BOULEVARD  
TALLAHASSEE, FLORIDA 32399-0850

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**-M-E-M-O-R-A-N-D-U-M-**

COMMISSION  
CLERK

**DATE:** June 23, 2005

**TO:** Director, Division of the Commission Clerk & Administrative Services  
(Bayó)

**FROM:** Division of Competitive Markets & Enforcement (R. Kennedy)  
Office of the General Counsel (B. Keating) *JK*

**RE:** Application for Certificate to Provide Pay Telephone Service

**AGENDA:** 7/5/2005 - Consent Agenda - Proposed Agency Action - Interested  
Persons May Participate

**SPECIAL INSTRUCTIONS:** None

**FILE NAME AND LOCATION:** S:\PSC\CMP\WP\050372.RCM.DOC

*RK*  
*[Signature]*

Please place the following Application for Certificate to Provide Pay Telephone Service on the consent agenda for approval.

| DOCKET NO. | COMPANY NAME         | CERT. NO. |
|------------|----------------------|-----------|
| 050372-TC  | Christopher Vellanti | 8591      |

The Commission is vested with jurisdiction in this matter pursuant to Sections 364.335 and 364.3375, Florida Statutes. Pursuant to Section 364.336, Florida Statutes, certificate holders must pay a minimum annual Regulatory Assessment Fee of \$50 if the certificate is active during any portion of the calendar year. A Regulatory Assessment Fee Return Notice will be mailed each December to the entity listed above for payment by January 30.

DOCUMENT NUMBER DATE  
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