

080185

Pay Telephone Service Provider Regulatory Assessment Fee Return

Florida Public Service Commission

(See Filing Instructions on Back of Form)

STATUS:

- Actual Return
- Estimated Return
- Amended Return
- Final Return

TG860-07-0-R
 City of Tavares
 P. O. Box 1068
 Tavares, FL 32778-1068

DEPOSIT DATE
834 APR 01 2008

Please Complete Below If Official Mailing Address Has Changed

FOR PSC USE ONLY

Check # 048433

\$ 100.00 06-03-001
 003001

\$ _____ E

\$ _____ P 06-03-001
 004011

\$ _____ I

Postmark Date 3-26-08
 Initials of Preparer RT

PERIOD COVERED:
 01/01/2008 TO 12/31/2008

*Records +
 Paula*

(Name of Company)

(Address)

(City/State)

(Zip)

LINE NO.	ACCOUNT CLASSIFICATION	AMOUNT
1.	Gross Operating Revenue (Florida)	\$ 0.00
2.	Gross Intrastate Revenue	0.00
3.	LESS: Amounts Paid to Other Telecommunications Companies ⁽¹⁾ (see "2. Fees" on back)	(0.00)
4.	TOTAL REVENUES for Regulatory Assessment Fee Calculation (Line 2 less Line 3)	\$ 0.00
5.	Regulatory Assessment Fee Due - (Multiply Line 4 by 0.0020)	0.00
6.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)	0.00
7.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)	0.00
8.	Extension Payment Fee (see "4. Extension" on back)	0.00
9.	TOTAL AMOUNT DUE (MINIMUM \$100.00)	\$ 0.00
10.	Number of pay telephones in operation at close of period covered by this Return	

RECEIVED
 DATE: APR 1 2008
 TIME: 8:47 AM
 CLERK: COMMISSION

02462 APR -1 08

FPSC-COMMISSION CLERK

(1) These amounts must be intrastate only and must be verifiable (see "2. Fees" on back).
 (2) Regardless of the gross operating revenue of a company, a minimum annual regulatory assessment fee of \$100 shall be imposed as provided Section 364.336, Florida Statutes.

I, the undersigned owner/officer of the above-named company, have read the foregoing and declare that to the best of my knowledge and belief the above information is a true and correct statement. I am aware that pursuant to Section 837.06, Florida Statutes, whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his official duty shall be guilty of a misdemeanor of the second degree.

Lori Houghton
 (Signature of Company Official)

FINANCE DIRECTOR

(Title)

3-25-08
 (Date)

Joan Giesy
 (Preparer of Form - Please Print Name)

Telephone Number (352) 742-6415 Fax Number (352) 742-6351

F.E.I. No. 59-6000438



www.tavares.org

March 21, 2008

Florida Public Service Commission
Attn: Fiscal Services
2540 Shumard Oak Blvd
Tallahassee, FL 32399-0850

To Whom It May Concern:

Please find enclosed the final Pay Telephone Service Provider Regulatory Assessment Fee Return for the City of Tavares, TG860-07-0-R. Our fee for the year 01-01-2008 to 12-31-2008 is also enclosed.

The enclosed return and check will cancel the City of Tavares certificate and end the City's tenure as a telephone provider.

Sincerely,

Lori Houghton
Finance Director

enc

DOCUMENT NUMBER - DATE

02462 APR -18

FPSC-COMMISSION CLERK