

CHIEF FINANCIAL OFFICER JEFF ATWATER STATE OF FLORIDA

July 17, 2012

RECEIVED 12 JUL 20 AM 10: 13 ADMINISTRATIVE SERVICES COMMISSION CLERK OF CLERK 00 CLERK 00

Mr. Bobby Maddox, Director Division of Administrative & IT Services Public Service Commission Capital Circle Office Center 2540 Shumard Oak Boulevard Tallahassee, Florida 32399-0850

Dear Mr. Maddox:

In a letter dated July 3, 2012, you requested to adjust the Public Service Commission's records for two uncollectible accounts receivables totaling \$1,300.00. These accounts belong to a debtor who has filed for bankruptcy, and therefore, are no longer being pursued for collection.

Under the authority set forth in Section 17.04, Florida Statutes, your request is hereby approved based on documentation you submitted.

Sincerely,

imothy Voin

Timothy Hsieh

TH/me

Enclosure



FLORIDA DEPARTMENT OF FINANCIAL SERVICES Timothy Hsieh, CPA • Chief Division of Accounting and Auditing • Bureau of Accounting 200 East Gaines Street • Tallahassee, Florida 32399-0354 • Tel. 850-413-5746 • Fax. 850-413-5548 Email • tim.hsieh@myfloridacfo.com AFFIRMATIVE ACTION • EQUAL OPPORTUNITY EMPLOYER FPSC COMMISSIONERS: RONALD A. BRISÉ, CHAIRMAN LISA POLAK EDGAR ART GRAHAM EDUARDO E. BALBIS JULIE I. BROWN

STATE OF FLORIDA



DIVISION OF ADMINISTRATIVE & IT SERVICES BOBBY MADDOX DIRECTOR (850) 413-6330

Hublic Service Commission

July 3, 2012

Mr. Timothy Hsieh Bureau of Accounting **Financial Services** 101 East Gaines Street Tallahassee, Florida 32399-0354

Dear Mr. Hsieh:

The Public Service Commission (PSC) has exercised reasonable efforts to collect Regulatory Assessment Fees from the utility referenced below. However, due to bankruptcy, collection efforts by the PSC would not be cost effective.

DOCKET NUMBER	UTILITY NAME	TOTAL AMOUNT
110025-TP	CommPartners, LLC	\$1,300.00

The Delinquent Accounts Receivable Transmittal form, a memorandum from the Commission's Office of the General Counsel, and other supporting documentation are enclosed. At your discretion, please grant this agency permission to write off the debt.

Sincerely. Bobby Maddox

BM:db Enclosures

c: Office of the General Counsel (Robinson) Division of Regulatory Analysis (Earnhart) Office of Commission Clerk

R:\fis\Write Off Letters\FY 2012-2013\TK184 TX783 CommPartners, LLC.doc

PSC Website: http://www.floridapsc.com

Request for Accounts Receivable Write-Off Form

Agency Name:	Florida Public Service Commission			
Contact Name:	David Brown			
Contact Number:	(850) 413-6267			
Contact Email:	dbrown@psc.state.fl.us			
Request Date:	7/9/2012			

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			Original Due Date of	Original Receivable	Current	Write-off		Collections		
Reference No.	Name of Debtor	Agency Location ID	Receivable	Amount	Balance	Amount	Collections Status	Vendor	Other Details	Due Diligence
Agency Reference Number for	(Name of the Company or	(Optional field for	(Date when the	(Amount of	(Current	(Amount of	1 - Currently placed	MSB	Give any additional details to	Indicate how the Agency has
Debt)	Individual)	agencies with District	Debt orginally	the Original	Balance of	the request	2- Will be placed	NCO	support why the debt is	satisfied the Due Diligence
		or Regional Offices)	became Due).	Debt)	the Debt)	for Write-off)	3- Will not be placed	NES	uncollectible. Indicate if the Debtor	Requirement (e.g., number of
				Č.			4- Was placed, but	UCB	is in Bankruptcy or has passed	letters sent, etc.)
							closed or returned		away , Etc.	, , , ,
K184-Docket No. 110025-TP			01/30/11	\$700.00	\$700.00	\$700.00	3	N/A	Debtor is in Bankruptcy	(2) Certified Letters Mailed
TX783-Docket No. 110025-TP	CommPartners, LLC		01/30/11	\$600.00	\$600.00	\$600.00	3	N/A		(2) Certified Letters Mailed
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State of Florida



Hublic Serbice Commission

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

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

DATE: June 27, 2012
TO: Apryl C. Lynn, Director, Division of Administrative Services
FROM: Pauline Robinson, Attorney, Office of the General Counsel Rev AT
RE: Request for Permission from Department of Financial Services to Write

RE: Request for Permission from Department of Financial Services to Write-Off the Penalty Imposed on CommPartners, LLC, in docket number 110025-TP in the bankruptcy cancellation of its certificate to provide telecommunications services in Florida. Company codes: <u>TK184</u> for\$700 and <u>TX783</u> for \$600

On May 3, 2011, the Commission issued Order No. PSC-11-0210-PAA-TP, whereby the Commission approved CommPartners, LLC's request for cancellation of its certificate to provide telecommunications services, Certificate No. 8489 effective December 31, 2010. The company requested cancellation of its certificate because it had filed bankruptcy proceedings and was unable to pay the outstanding regulatory assessment fees.

Pursuant to 11 USCS § 362 of the U.S. Bankruptcy Code, CommPartners, LLC's bankruptcy filing acts as a stay to enforcing any judgment against CommPartners, LLC. Thus, in Order No. PSC-11-0210-PAA-TP, the Commission further ordered that the outstanding penalty and regulatory assessment fees be sent to the Department of Financial Services, and that the Division of Administrative Services request permission to write-off the uncollectible amount because of CommPartners, LLC's bankruptcy.

Staff requests that the Division of Administrative Services/Fiscal Services Section take the appropriate steps to seek permission from the Department of Financial Services to write-off the uncollectible penalty and RAF fees for CommPartners, LLC.

Attached is a completed DFS Delinquent Accounts Receivable Transmittal Form.

PER/DMW

cc: David Brown, Division of Administrative Services Office of Commission Clerk



STATE OF FLORIDA DEPARTMENT OF FINANCIAL SERVICES BUREAU OF ACCOUNTING DELINQUENT ACCOUNTS RECEIVABLE TRANSMITTAL (PLEASE PRINT OR TYPE)

AGENCY <u>FLORIDA PUBLIC SERVICE COMMISSION</u> DATE <u>06/27/2012</u> PAGE <u>1</u> OF <u>1</u> CONTACT <u>Karen Belcher</u>, <u>Professional Accountant Supervisor</u>, <u>Division of Administrative Services</u> PHONE NUMBER <u>850-413-6273</u> FLAIR ACCOUNT CODE FLAIR ACCOUNT CODES: 61 50 2 573003 61020300 00 000100

<u>ACCOUNT CODE <u>FLAIR ACCOUNT CODES: 61 50 2 573003 61020300 00 000100</u> <u>61 74 1 000331 61020300 00 001200</u></u>

1. 110025-TP	CommPartr	ners, LLC.	Company	Company Codes: TK 184 & TX 783			
Agency Reference #	Last Name	First M	Social Security #	DFS use only			
8350 South Durar	ngo Drive, Suite	200 Las Vegas,	NV 89113-4444				
		Last Known Ad	dress (Include Zip)				
702-367-8647 ex	.t. 7500 (TK	184-\$700 & T	X783-\$600)	\$1,300			
Home Telephone Wo	ork Phone	Principal Amo	ount Penalty/Inte	rest Amount Total			
§364.285, F.S.		May 3, 201	1	Fees			
Penalty/Interest Auth	ority	Date Debt Inc	urred	Debt Type			
REGULATORY ASSES	SMENT FEES						
		scription e.g. Driv	vers License, Property Da	mage			
	Debt De	semption, e.g., Diff	ters Electise, troperty Et	iniuge			
	Additional Info	motion a g Data	of Birth, Drivers License	Number etc.			
2.	Additional Intol	mation, e.g., Date	or Buth, Drivers License	number, etc			
Agency Reference #	Last Name	First M	Social Security #	DFS use only			
Agency Reference #	Last Mame	rlist IVI	Social Security #	Drs use only			
		Last Known Ad	dress (Include Zip)				
		Last Known Ad	dress (include Zip)				
Home Telephone Wo	rk Phone	Principal Amo	unt Penalty/Inte	rest Amount Total			
nome relephone we	ork Flione	rincipal Ano	unt renany/inc	Test Amount Total			
Penalty/Interest Auth	ority	Date Debt Inci	urred	Debt Type			
Fenany/Interest Auto	onty	Date Debt file	uncu	Deot Type			
	Dalia		Direct D				
	Debt De	scription, e.g., Driv	vers License, Property Da	Image			
	Additional Infor	mation, e.g., Date	of Birth, Drivers License	Number, etc			
3.							
Agency Reference #	Last Name	First M	Social Security #	DFS use only			
	-						
		Last Known Ad	dress (Include Zip)				
	1.51						
Home Telephone Wo	ork Phone	Principal Amo	unt Penalty/Inte	rest Amount Total			
Penalty/Interest Auth		Data Dalu I		Dalt Tage			
Penalty/Interact Alith	OFILY	Date Debt Incu	ined	Debt Type			
Tenany/Interest Auto							

Additional Information, e.g., Date of Birth, Drivers License Number, etc

****DEBIT TYPE CODE****

1. RETURNED CHECK 2. NONPAYMENT FOR STATE GOODS/SERVICES 3. DAMAGE TO STATE PROPERTY 7. COURT ORDER 8. FINES 9. OVERPAYMENT OF STATE FUNDS

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4/01/99