

REQUEST TO ESTABLISH DOCKET
(PLEASE TYPE)

Date 1/15/98

Docket No. 78008810

1. Division ~~Name~~/Staff ~~Name~~ COMMUNICATIONS/Hawkins

2. CPE _____

3. OCR _____

4. Suggested Docket Title Request for cancellation of
Pay Telephone Certificate No. 5366 by
FRANCESCA TIEPPO SCALA.

(TG064)

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)

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

2. Interested Persons and their representatives (if any)

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

6. Check one: Documentation is attached.
 Documentation will be provided with the recommendation.

Pay Telephone Service Provider Regulatory Assessment Fee Return

Florida Public Service Commission

(See Filing Instructions on Back of Form)

STATUS:

Actual Return
 Estimated Return

TG064	P173 997 398
Francesca Tieppo Scala	
870 N.W. 86th Avenue, #703	
Plantation, FL 33324-1248	
DEPOSIT	DATE
D68700	JAN 13 1998

FOR PSC USE ONLY	
Check#	480
\$	50.00
\$	
\$	
Postmark Date	4/3/98
Initials of Preparer	RF

PERIOD COVERED:
06/11/1997 TO 12/31/1997

Francesca Tieppo Scala (Name of Company) 870 NW 86 ave #703 (Address) PL / FL (City/State) 33324 (Zip)

LINE NO.	ACCOUNT CLASSIFICATION	AMOUNT
1.	Gross Operating Revenue	
2.	Gross Intrastate Revenue	
3.	LESS: Amounts Paid for Services to Local Telephone Companies (Attach Listing)*	
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	
7.	Interest for Late Payment	
8.	TOTAL AMOUNT DUE	\$ 50.00

98
JAN 13 AM 7:51
SMALL RECORDS

AS PROVIDED IN SECTION 364.336 FLORIDA STATUTES, THE MINIMUM ANNUAL FEE IS \$50

THIS FORM MUST BE COMPLETED AND RETURNED REGARDLESS OF THE AMOUNT OF REVENUES REPORTED

9. Number of pay telephones in operation at close of period covered by this Return 65

*Each amount paid by a pay telephone company to a telecommunications company providing local service for use of the local network shall be deducted from intrastate revenue for purposes of determining the amount of the regulatory fee assessed the pay telephone company.

I, the undersigned owner/officer of the above-named company, have read the foregoing and declare that to be 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.

Francesca Tieppo Scala (Signature of Company Official) TG064 (Title) 12.20.97 (Date)
Francesca Tieppo Scala (Please Print Name) Telephone Number 954, 424 6782
 P.E.I. No. _____

Plantation, January 06 1998

Dear Sirs.

I would like to
cancel my license for
the year 1998 because
I am moving to New
York. I already cancelled
all my telephone lines.
Thank you for your attention.

Thomas Lippicola

Phone # (954) 424 6782