

REQUEST TO ESTABLISH DOCKET  
(PLEASE TYPE)

Date 09/17/98

Docket No. 981152-TC

1. Division Name/Staff Name Communications/Isler
2. OPR Communications/Isler
3. OCR Legal Services
4. Suggested Docket Title Cancellation by Florida Public Service Commission of Pay Telephone Certificate Number 3646 Issued to Kelly A. Cavanaugh for Violation of Rules 25-4.0161, F.A.C., Regulatory Assessment Fees: Telecommunications Companies

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)

<u>Thomas Cavanaugh</u>	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

2. Interested Persons and their representatives (if any)

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

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

I:\PSC\RAR\WP\ESTDKT.  
PSC/RAR 10 (Revised 01/96)

DOCUMENT NUMBER-DATE  
**10223**-SEP 17 98  
PSC RAR DADS/REPORTING



# Public Service Commission

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

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DATE: ~~July 8th, 1998~~  
TO: Paula Isler  
FROM: Jackie Knight *JK*  
RE: RAF non payments - *Ninth set of 10*

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Paula, attached are ten communication companies (eighth set) that I am forwarding to your attention who have not paid their RAF for 1997 as of today's date. Interest through the end of July is \$3.50 and Penalty is \$12.50. I have a total on the bottom of each sheet as to what amount a utility owes the Commission. I have not made copies, therefore you will need to keep the data for your files.

- 1 TF107 ✓ no
  - 2 TF110 ✓ no
  - 3 TF111 ✓ no
  - 4 TF120 ✓ no
  - 5 TF121 ✓ no
  - 6 TF124 ✓ no
  - 7 TF174 ✓ no
  - 8 TF186 ✓ no
  - 9 TF194 ✓ no
  - 10 TF215 ✓ no
- PLC 7.58 - EAP09*

Should you have any questions, please let me know.  
G:\pi3.mpl

COMPY CODE	COMPANY NAME	ISS DATE	EXPIRES DATE	RAF PERIOD BEGINS	"T" NO RAF FORM	REVENUE REPORT	REGULATORY ASSESSMENT FEE	RAF PAYMENT & COLL FEE PAYMENT AMOUNT	RAF PAYMENT RECEIVED	COLL AGENCY FEE	RAF PAYMENTS RECEIVED	POST MARK DATE	REPORT NUMBER	PENALTY DUE (RAF DUE) 7/15 BAL	PENALTY PAID	INTEREST DUE (RAF DUE) DATE	INTEREST PAID	DATE DELINQNT LETTER MAILED	DATE P & I LETTER MAILED	DAYS OF EXT	EXTENDED AMOUNT (RAF DUE) 7/15 DA	EXT AMOUNT PAID "RAF"	DATE TRUS-UP MAILED	TRUS-UP RECEIVED "RAF"	TRUS-UP P & I RECEIVED
TF 194	Billy A. Coover	21-Sep-84						50.00																	

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TF 194	Billy A. Coover	21-Sep-84						50.00																	

RAF: 50.00  
P: 12.00  
11.00  
66.00

COMPY CODE	COMPANY NAME	ISS DATE	EXPIRES DATE	RAF PERIOD BEGINS	"T" NO RAF FORM	REVENUE REPORT	REGULATORY ASSESSMENT FEE	RAF PAYMENT & COLL FEE PAYMENT AMOUNT	RAF PAYMENT RECEIVED	COLL AGENCY FEE	RAF PAYMENTS RECEIVED	POST MARK DATE	REPORT NUMBER	PENALTY DUE (RAF DUE) 7/15 BAL	PENALTY PAID	INTEREST DUE (RAF DUE) DATE	INTEREST PAID	DATE DELINQNT LETTER MAILED	DATE P & I LETTER MAILED	DAYS OF EXT	EXTENDED AMOUNT (RAF DUE) 7/15 DA	EXT AMOUNT PAID "RAF"	DATE TRUS-UP MAILED	TRUS-UP RECEIVED "RAF"	TRUS-UP P & I RECEIVED
TF 194	Billy A. Coover	21-Sep-84		12-31-84			50.00	50.00	50.00	50.00				50.00	15.00	04/17									

COMPY CODE	COMPANY NAME	ISS DATE	EXPIRES DATE	RAF PERIOD BEGINS	"T" NO RAF FORM	REVENUE REPORT	REGULATORY ASSESSMENT FEE	RAF PAYMENT & COLL FEE PAYMENT AMOUNT	RAF PAYMENT RECEIVED	COLL AGENCY FEE	RAF PAYMENTS RECEIVED	POST MARK DATE	REPORT NUMBER	PENALTY DUE (RAF DUE) 7/15 BAL	PENALTY PAID	INTEREST DUE (RAF DUE) DATE	INTEREST PAID	DATE DELINQNT LETTER MAILED	DATE P & I LETTER MAILED	DAYS OF EXT	EXTENDED AMOUNT (RAF DUE) 7/15 DA	EXT AMOUNT PAID "RAF"	DATE TRUS-UP MAILED	TRUS-UP RECEIVED "RAF"	TRUS-UP P & I RECEIVED
TF 194	Billy A. Coover	21-Sep-84		12-31-84		1138 43	50.00	50.00	57.00					50.00	5.00	04/17									

P = 5.00  
J = 1.00  
6.00

COMPY CODE	COMPANY NAME	ISS DATE	EXPIRES DATE	RAF PERIOD BEGINS	"T" NO RAF FORM	RAF & COLL FEE PAYMENT AMOUNT	COLL AGENCY FEE	RAF PAYMENTS RECEIVED	POST MARK DATE	REPORT NUMBER	PENALTY DUE (RAF DUE) 7/15 BAL	PENALTY PAID	INTEREST DUE (RAF DUE) DATE	INTEREST PAID	DATE DELINQNT LETTER MAILED	DATE P & I LETTER MAILED	DAYS OF EXT	EXTENDED AMOUNT (RAF DUE) 7/15 DA	EXT AMOUNT PAID "RAF"	DATE TRUS-UP MAILED	TRUS-UP RECEIVED "RAF"	TRUS-UP P & I RECEIVED		
TF 194	BILLY A CAUANA	21-SEP-84		12-31-84		50.00		50.00	50.00	50.00														

P = 2.00  
I = .50  
2.50

11/11/84



Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and 2 for address of service.
- Complete items 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100.
- Print your name and address on this reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- 1.  Addressee's Address
- 2.  Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

TF194

4a. Article Number

4b. Service Type

- Registered  Certified
- Express Mail  Insured
- Return Receipt for Merchandise  COD

7. Date of Delivery

12/13/97

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: Addressee or Agent

*[Handwritten Signature]*

Thank you for using Return Receipt Service.