REQUEST TO ESTABLISH DOCKET (PLEME TYPE)

						(PLEASE	TYPE)		901	157-
Date	·	09/16/90	3					Pock	et No. <u>18/</u>	157-TC
1.	Divi	ston New	m/Staff I		unications/	sler				
2.	OPR_	Connur	icetions/	/leter						
4.	Suga	ected Do	cket Titl	le <u>Can</u> c	ellation by I	lorida Pi	blic Servi	ce Comissio	n of Pay Tele	ohone Certificate
									. F.A.C., Res	
Asse	15 S.M.	nt fees:	Telecom	munication	Compenies			-		
5.	Stage	eeted Do	cket Ref	ling List	(attach sepai	ate sheet	t if necese	ery)		
					Lated compani	es or ACI	ROWYHS ONLY	regulated (ndustries,	
				25-22.104, reme and a		l others	(Metch re	presentative	s to clients.	>
	1.	. Partie	e and the	eir repres	entatives (ii	any)				
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	2	. Intere	sted Peri	sons and ti	hair represer	tatives ((if any)			
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6. C	heck	one:								
			X Docum	entation is	attached.					
		_	Docume	intation w	ili be provid	ied with I	recommenda t	tion.		
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PSC/RAR 10 (Revised 01/96)

DOCUMENT NUMBER-DATE
SEP 17 S
-- THE CONDSTREPORTING

State of Florida



Public Service Commission

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

DATE: May 20, 1998

TO: Paula Isler

FROM: Michael Lake

RE: RAF non payments - Fifth set of 10

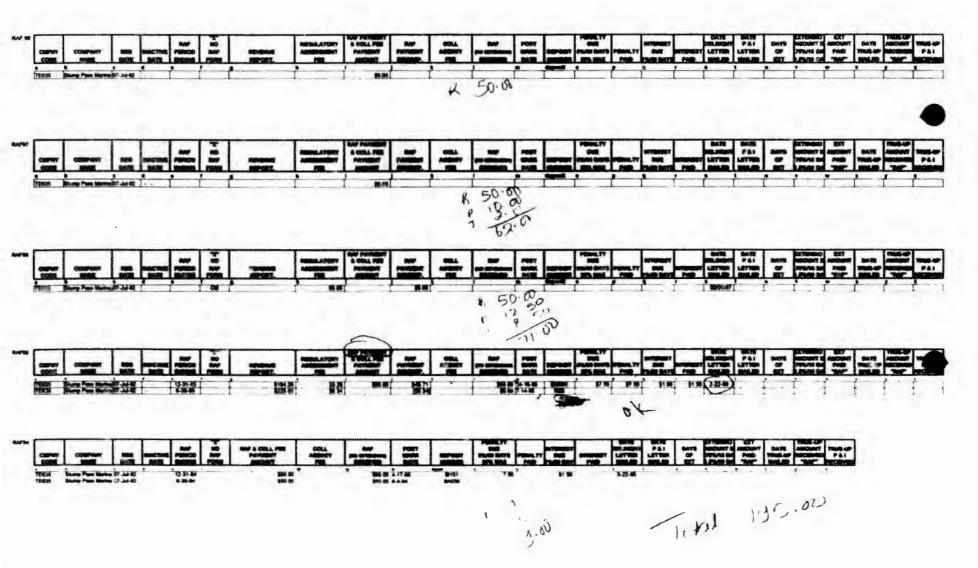
Paula, attached are ten communication companies (fifth set) that I am forwarding to your attention who have not paid their RAF for 1997 as of todays date. Interest through the end of May is \$2.0 and Penalty is \$10. I have a total on the bottom of each sheet as to what amount a utility owes the Commission. I have not made copies, therefore you will need to keep the data for your file.

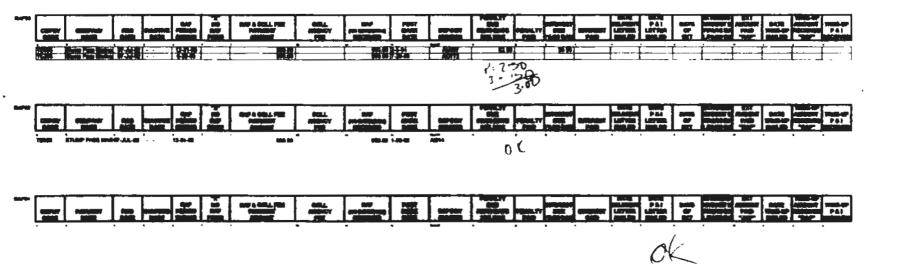
- 1 TE600 √ /25
- 2 TE602 ho
- 3 TE610 4
- TE614 🛵 4
- TE635 6 5
- 6 TE642 /40
- 7 TE660 v40
- 8 TE685 v/10
- 9
- TE688 /40

TE692 / 74 67. - 14 48 - DK 777 Should you have any questions, please let me know.

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On the reverse adds?	SENDER: Occupiede Nome 1 and/or published servess. Occupiede Nome 2, 4a, at a print your name and address on the reverse of this form so that we card to you. Albach this form to the trant of the realipiece, or on the back if speciparet. White "Naturn Receipt Requested" on the malpiace below the article "The Return Receipt all show to whom the article was delivered an delivered.	e does not	I also value or receive the following services (for an extra fee): 1. Addresses's Address 2. Restricted Delivery Consult postmester for fee.		
M ADDRESS completed	3. Article Addressed to: TE 635	4s. Article Number 4b. Service Type Registered Certified Express Mell Insured Return Receipt for Merchandes COD 7. Date of Delivery			
ts your RETUR	5. Received By: (Print Name) 6. Signature: (Adversary of Agent) X PS Porm 3811, December 199	8. Addresse and fee is	Domestic Return Receipt		