

REQUEST TO ESTABLISH DOCKET

(PLEASE TYPE)

Date 10/15/96

Docket No. 981316-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 4990 issued to Countywide Payphone Co. for Violation of Rules 25-4.0161, F.A.C., Regulatory Assessment Fees; Telecommunications Companies and 25-24.520, F.A.C., Reporting Requirements

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>Michael Guttiere</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

11326 OCT 12 96

FPSC-RECORDS/REPORTING



Public Service Commission

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

DATE: October 8th, 1998
 TO: Paula Isler
 FROM: Jackie Knight JK
 RE: RAF non payments - *First set of 50*

Paula, attached are fifty communication companies (first 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 October is \$5.00 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	TF676	21	TF755 - Kelly	41	TF842 - Kelly
2	TF679	22	TF757	42	TF846
3	TF680	23	TF763	43	TF848
4	TF682	24	TF768	44	TF850
5	TF688	25	TF769	45	TF856
6	TF692	26	TF774	46	TF862
7	TF698	27	TF775	47	TF870
8	TF699	28	TF777	48	TF882
9	TF700	29	TF799	49	TF888
10	TF701	30	TF802	50	TF891
11	TF718	31	TF807		
12	TF719	32	TF813		
13	TF726	33	TF814 - Kelly		
14	TF729	34	TF817		
15	TF736	35	TF820		
16	TF737	36	TF822		
17	TF738	37	TF828		
18	TF742	38	TF836		
19	TF748	39	TF837		
20	TF755	40	TF841		

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

MEMORANDUM

May 21, 1998

TO: Rick Moses, Division of Communications
FROM: Nonnye Grant, Division of Records and Reporting *ND*
RE: Returned Mail

We have received returned mail from the United States Post Office on the following Company:

COUNTYWIDE PAYPHONE CO. (TF888)

The Post Office returned the mail on the above Company stating the following reason(s):

Addressee Unknown
 Attempted - Not Known
 Box Closed - No Order
 Forwarding Order Expired
 Insufficient Address
 Moved, Left No Forwarding Address
 No Forward Order on File
 No Mail Receptacle/Vacant
 No Such Person or Number
 No Such Office in State
 No Such Street
 Not at this Address
 Refused
 Return to Sender
 Return for Better Address
 Unable to Forward
 Unable to Locate
 Unclaimed
 Undeliverable as Addressed
 Vacant
 Verification of Address furnished by Post Office

Please furnish us with a current address, both for mail and location. Also, we need to have new phone and fax numbers since they have moved. Should you not be able to get a current address, can staff initiate proceedings to have the Company's certificate canceled?

Copy of returned envelope attached for your information.

/nbg
Attachment(s)

RECEIVED

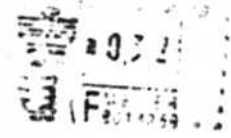
MAY 21 1998

CMU

RECEIVED

MAY 21 1998

FPSC - Records/Reporting



TF888

Countywide Payphone Co.
2217 Hayes Street
Hollywood FL 33020-3437

ATTEMPTED NOT KNOWN
NO SUCH NUMBER
ROUTE No. _____ CARR/INITIALS _____ DATE 5-7
WGA/A

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the 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:

Tf 888

4a. Article Number

4b. Service Type

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

7. Date of Delivery

12/17/79

5. Received By: (Print Name)

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

6. Signature: (Addressee or Agent)

X *[Signature]*

Thank you for using Return Receipt Service.