REQUEST TO ESTABLISH DOCKET

	(PLEASE TYPE) Docket No. 981416-TC
Dat	e10/27/98
1.	Division Name/Staff Name Communications/Isler
2.	OPR Communications/Isler
3.	OCR Legal Services
4.	Suggested Bocket Title Cancellation by Florida Public Service Commission of Pay Telephone Certific
Num	ber 5111 Issued to Corey Lavale Myers d/b/a CorTel's Payphones for Violation of Rules 25-4,0161, F.A.
Reg	ulatory Assessment Fees: Telecommunications Companies
5.	Suggested Docket Meiling List (attach separate sheet if necessary)
	A. Provide NAMES ONLY for regulated companies or ACRONYRS ONLY regulated industries, as shown in Rule 25-22.104, F.A.C. B. Provide COMPLETE name and address for all others. (<u>Match representatives to clients.</u>)
	1. Parties and their representatives (if any)
Co	rey Lavele Hyers
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	2. Interested Persons and their representatives (if any)
	2. Interested Persons and their representatives the may
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6.	Check one: Doc mentation is attached Documentation will be provided with recommendation.
1:1	PSC\RAR\WP\ESTDKT.

PSC/RAR 10 (Revised 01/96)

DOCUMENT NUMBER - DATE

State of Florida



Public Service Commission

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

DATE: October 20th, 1998

TO: Paula Isler

FROM: Jackie Knight

RE: RAF non payments - First set of 80

Paula, attached are eighty communication companies (first 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 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	TF899	21	TF957 16	41	TG010	61	TG086
2	TF906	22	TF957	42	TG013	62	TG087
3	TF910 -	23	TF964	43	TG016	63	TG089
4	TF912	24	TF967	44	TG017	64	TG096
5	TF913~	25	TF968/	45	TG026 '	65	TG100 FOR
6	√TF914	26	TF969	46	TG027rene	66	TG104
7	TF918	27	TF970	47	TG029	67	TG107
8	1F920 MONE	28	TF972	48	TG031	68	TG109
9	VIF921€0NE	29	TF974	49	TG040	69	TG112'
10	-TF923	30	TF980	50	TG046	70	TG114
11	TF924	31	TF982	51	TG048#00	71	TG117
12	TF927	32	TF985'	52	TG049	72	TG119 '
13	√1F928	33	TF986	53	TG050	73	TG123
14	VTF932/	34	TF987	54	TG054	74	TG127
15	TF933~	35	TF990'	55	TG065	75	TG132
16	VIF937	36	TF991	56	TG073	76	TG139/
17	TF938 NONE	37	TF991 NE	57	TG079	77	TG140 '
18	TF939	38	TF999	58	TG083	78	TG142
19	1F951	39	TG002/ 4	59	TG084	79	TC146/
20	TF953	40	TG005rlone	60	TG085	80	TG150 400

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SENDER: s Complete items 1 and/or 2 for additional services. s Complete items 3, 4e, and 4b. s Print your name and address on the reverse of this form so that card to you. s Attach this form to the front of the malipiece, or on the back if a permit. s Write "Return Receipt Requested" on the malipiece below the at a The Return Receipt will show to whom the article was delivered.	Addresses's Address Restricted Delivery Consult postmaster for fee.		
3. Article Addressed to:	4a. Article Number		
TG 010	4b. Service Registe Express Return F	red Certified s Mail Insured Receipt for Merchandse COD	
5. Received By: (Print Name)	8. Address and fee	see's Address (Only if requested is paid)	
6: Signature: (Addiffesses or Agent) PS Form 3811, December 1994	102596-97-8-0179 Domestic Return Re		