REQUEST TO ESTABLISH DOCKET (PLEASE TYPE)

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Num	ber 5	381 Issu	ed to Beste	l, Inc. fo	r Violati	on o	f Rules	25-4.0°	161,	F.A.C.,	Regula	ory Asse	ssment Fees;
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٥.		Suggested Docket Mailing List (attach separate sheet if necessary) A. Provide NAMES ONLY for regulated companies or ACRONYMS ONLY regulated industries,											
	а	s shown	in Rule 25-2	22.104. F.A	.C.								
	B. P	rovide C	OMPLETE name	and addre	ss for al	i ot	hers. (Match re	epres	<u>entativ</u>	es to cu	ients.)	
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6.	Check	c one:											
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12058 OCT 28 #

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	41	TG010	61	TG086
2	√TF906	22	TF957 TF958pt N €	42	TG013	62	TG087
3	√TF910 -	23	TF964′	43	TG016	63	TG089
4	√TF912	24	TF967′	44	TG017	64	TG096 1
5	TF913/	25	TF968/	45	TG026 ′	65	TG100 FOR
6	∕TF914	26	TF969	46	TG027	66	TG104
7	√TF918	27	TF970	47	TG029	67	TG107
8	TF920 4000	28	TF972	48	TG031	68	TG107 TG109
9	TF92146NE	29	TF974	49	TG040	69	TG112 /
10	∕TF923	30	TF980	50	TG046	70	TG114
11	∕TF924′	31	TF982	51	TG048	71	TG117
12	ላዥ927	32	TF985'	52	TG049	72	TG119 /
13	√TF928	33	TF986	53	TG050	73	TG123
14	√TF932′	34	TF987	54	TG054	74	TG127
15	√fF933/	35	TF990 🖊	55	TG065	75	TG132
16	√TF937	36	TF991	56	TG073	76	TG139/
17	TF938 PONE	37	TF995	57	TG079	77	TG140 /
18	`TF939	38	TF999	58	TG083	78	TG142
19	1F951	39	TG002/	59	TG084 [*]	79	TG146'
20	√TF953	40	TG005 HOWE	60	TG085	80	TG150 (⁴⁰)

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on the reverse side?	SENDER: scomplete 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 card to you. Attach this form to the front of the mailpiece, or on the back if space permit. Write "Return Receipt Requested" on the mailpiece below the article The Return Receipt will show to whom the article was delivered and delivered.	I also wish to receive the following services (for an extra fee): 1. Addressee's Address 2. Restricted Delivery Consult postmaster for fee.				
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-	DC Form 1911 December 1994	2595-97-B-0179	Domestic Ret	urn Receipt		