REQUEST TO ESTABLISH DOCKET

Dat	e_ 12/18/98
1.	Division Name/Staff Name Communications/Isler
2.	OPR Communications/Isler
	OCR Legal Services
	Suggested Docket TitleCancellation by Florida Public Service Commission of Interexchange
Tel	ecommunications Certificate Number 5280 Issued to ST Long Distance. Inc. for Violation of Rule 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)
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	Interested Persons and their representatives (if any)
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6.	Check one:XX Documentation is attached.
	Documentation will be provided with recommendation.
1:	\PSC\RAR\MP\ESTDKT.
	C/PAR 10 (Paylead 01/95)

DOCUMENT ALMBER-DATE 1446 DEC 22 8

State of Florida



Public Service Commission

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

DATE: December 2, 1998

TO:

Paula Isler

FROM: Jackie Knight

RE:

RAF non payments - Final set

Paula, attached are seventy-three communication companies (final set) that I am forwarding to your attention who have not paid their RAF for 1997 as of todays date. Interest through December 25th is \$5.50 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	T8576	21	TI631	41	T1965	61	TX090
2	T1579	22	T1638	42	T1970	62	TX104
3	T1580	23	T1643	43	T1993	63	TX107
4	TT583	24	TI645	44	TJ005	64	TX108
5	TI594	25	TI646	45	TJ017	65	TX109
6	TI596	26	TI647	46	TJ020	66	TX114
7	TI597	27	TI651	47	TJ024	67	TX123
8	TI598	28	T1654	48	TJ027	68	TX142
9	TI602	29	TI660	49	TJ029	69	TX144
10	T1608	30	T1670	50	TS167	70	TX145
11	TI610	31	TI672	51	TS168	71	TX148
12	TI611	32	T1673	52	TX023	72	TX149
13	TI613	33	T1678	53	TX043	4.3	TX156
14	TI615	34	TI685	54	TX052	73	11150
15	TI616	35	TI687	55	TX055		
16	TI617	36	TI688	56	TX064		
17	TI622	37	T1700	57	TX068		
18	TI623	38	TI861	58	TX075		
19	TI627	39	TI895	59	TX083		
20	TI629	40	T1950	60	TX084		

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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 to card to you. Attach this form to the front of the mailpiece, or on the permit. Write "Return Receipt Requested" on the mailpiece be to Return Receipt will show to whom the article was delivered.	below the article number. Is delivered and the date 1. Addresses a Restricted Delivery Consult postmaster for fee.		
3. Article Addressed to:	4a. Article Number		
TJ024	4b. Service Type Registered Certified Express Mail Insured Return Receipt for Merchandise COD		
	7. Date of Delivery 98		
5. Received By: (Print Name)	Addressee's Address (Only if requested and fee is paid)		
6. Signature: (Addressee or Agent)	Davida Betura Beceint		
PS Form 3811, December 1994	102595-97-8-0179 Domestic Return Receipt		