

EVERCOM

Isler  
RJR

January 24, 2001

CK058290  
\$50.00-R  
12.50-IP  
6.00-I  
1/24/01  
MC

Ms. Paula Isler  
Florida Public Service Commission  
2540 Shumard Oak Blvd.  
Tallahassee, FL 32399-0850

TJ054

RE: Evercom Systems, Inc.  
Docket No. 00-1296

DEPOSIT DATE  
DOII JAN 26 2001

Dear Ms. Isler,

I am responding to your letter dated January 23, 2001. At this time, I would like to modify our settlement letter of January 9, 2001.

First, all terms and conditions of the January 9, 2001 settlement letter are reaffirmed. In addition, as prescribed by the Florida Public Service Commission's Division of Legal Services, Evercom Systems, Inc. waives its objection to the administrative cancellation of our certificate in the event that our company fails to comply with the settlement offer.

I have enclosed a check for \$68.50, which represents the minimum total RAF for the interexchange certificate. Additionally, I have enclosed a copy of the previously submitted form for your records.

It is my understanding that this communication will close the Evercom Systems, Inc. docket. Thank you for your assistance in this matter.

APP  
CAF  
CMP  
COM  
CTR  
ECR  
LEG  
OPC  
PAI  
RGO  
SEC  
SER  
STH

DOCUMENT NUMBER - DATE  
058290 1197 JAN 26 01  
RECORDS/REPORTING

 **EVERCOM**  
8201 TRISTAR DRIVE  
IRVING, TEXAS 75063  
(972) 988-3737

THE FIRST NATIONAL BANK  
PRYOR, OKLAHOMA 74362  
86-262-1031

Sixty Eight Dollars And 50 Cents

DATE AMOUNT

PAY TO THE ORDER OF FLORIDA PUBLIC SERVICE COMMISSION  
2540 SHUMARD OAK BLVD.  
TALLAHASSEE, FL 32399-0850

119.07(1)(z), Florida Statutes: Bank account numbers or debit, charge, or credit card numbers given to an agency for the purpose of payment of any fee or debt owing are confidential and exempt from subsection (1) and s.24(a), Art. 1 of the State Constitution

AUTHORIZED SIGNATURE  
*Sarah J. Proctor*  
AUTHORIZED SIGNATURE

Security features. Details on back.



EVERCOM

*P/Isler  
✓RJR*

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Sincerely,

Mike Smith  
Director of Regulatory Affairs

Enclosure

TO AVOID PENALTY AND INTEREST CHARGES, THE REGULATORY ASSESSMENT FEE RETURN MUST BE FILED ON OR BEFORE ~~FEBRUARY 15~~

# Interexchange Company Regulatory Assessment Fee Return

## Florida Public Service Commission

(See Filing Instructions on Back of Form)

STATUS:

- Actual Return
- Estimated Return
- Amended Return

**FIELD(1)**

TG225  
 Evercom Systems, Inc.  
 8201 Tristar Drive  
 Irving, TX 75063

PERIOD COVERED:

**FIELD(3)**

### FOR PSC USE ONLY

Check# \_\_\_\_\_  
 \$ \_\_\_\_\_ 0603001  
 \_\_\_\_\_ 003001  
 \$ \_\_\_\_\_ P  
 \_\_\_\_\_ 0603001  
 \_\_\_\_\_ 004011  
 \$ \_\_\_\_\_  
 Postmark Date \_\_\_\_\_  
 Initials of Preparer \_\_\_\_\_

Please Complete Below if Official Mailing Address Has Changed

\_\_\_\_\_  
 (Name of Company) (Address) (City/State) (Zip)

LINE NO.	ACCOUNT CLASSIFICATION	FLORIDA GROSS OPERATING REVENUE	INTRASTATE REVENUE
1.	Long Distance Services	\$ _____	\$ _____
2.	Access Services	_____	_____
3.	Private Line Services	_____	_____
4.	Leased Facilities & Circuits Services	_____	_____
5.	Miscellaneous Services	_____	_____
6.	TOTAL Telephone Services	\$ _____	\$ 0
7.	LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back)	_____	_____
8.	TOTAL REVENUES For Regulatory Assessment Fee Calculation	_____	_____
9.	Regulatory Assessment Fee Due (Multiply Line 8 by 0.0015)	_____	_____
10.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)	_____	_____
11.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)	_____	_____
12.	TOTAL AMOUNT DUE	\$ _____	\$ 0

\* These amounts must be intrastate only and must be verifiable.

AS PROVIDED IN SECTION 364.336, FLORIDA STATUTES, THE MINIMUM ANNUAL FEE IS \$50

### CURRENT COMPANY STATUS

- Facilities-Based Carrier
- Reseller
- Call Aggregator
- Alternate-Operator Service
- Rebiller
- Other: Revenue Reporting Covered by Pay Telephone Service Provider Return

### BILLING INFORMATION

Complete below if billing agent if other than yourself.

\_\_\_\_\_  
 (Name) (Address: City/State/Zip) (Telephone)  
 What is the total amount of customer deposits collected? Amount: \$ 0 for 19 99  
 What is the total amount of bond held (if applicable)? Amount: \$ \_\_\_\_\_ Expires: \_\_\_\_\_

### COMPANY INFORMATION

Do you lease telecommunications facilities?  YES  NO

If YES, who do you lease these facilities from? Name: \_\_\_\_\_

Address: \_\_\_\_\_

I, the undersigned owner/officer of the above-named company, have read the foregoing and declare that to the best of my knowledge and belief the above information is a true and correct statement. I am aware that pursuant to Section 837.06, Florida Statutes, whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his/her duty shall be guilty of a misdemeanor of the second degree.

Mike Smith  
 (Signature of Company Official)

Director - Regulatory Affairs  
 \_\_\_\_\_  
 (Title) 1/8/01  
 (Date)

Mike Smith

Telephone Number (972) 953-4123 Fax Number (972) 953-4289

(Preparer of Form - Please Print Name)

F.E.I. No. 75-2722144