

Pay Telephone Service Provider Regulatory Assessment Fee Return

undocketed

STATUS:

*P. Isler
ROR*

- Actual Return
- Estimated Return
- Amended Return

Florida Public Service Commission

(See Filing Instructions on Back of Form)

TE573
 Florida Pay Phone Services, Inc.
 2751 Highland Avenue
 Grants Pass, OR 97526-8423
 DEPOSIT DATE
 D046 MAR 29 2001

FOR PSC USE ONLY
 Check# 39869
 \$ 50.00 0603002
 003001
 P
 0603002
 004011
 Postmark Date 3/27/01 No. postmark
 Initials of Preparer hmc

PERIOD COVERED:
01/01/2001 TO 12/31/2001

Please Complete Below If Official Mailing Address Has Changed

Alpha Telcom, Inc. DBA Florida Pay Phone Services, Inc.
 (Name of Company) (Address) (City/State) (Zip)

LINE NO.	ACCOUNT CLASSIFICATION	AMOUNT
1.	Gross Operating Revenue (Florida)	\$ <u>15656.36</u>
2.	Gross Intrastate Revenue	<u>33269.75</u>
3.	LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back)	<u>(25111.68)</u>
4.	TOTAL REVENUES for Regulatory Assessment Fee Calculation (Line 2 less Line 3)	\$ <u>8,158.07</u>
5.	Regulatory Assessment Fee Due — (Multiply Line 4 by 0.0015)	<u>12.24</u>
6.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)	_____
7.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)	_____
8.	TOTAL AMOUNT DUE	\$ <u>50.00</u>

APP
CAF
CMP
COM
CTR
ECR
TDR

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

THIS FORM MUST BE COMPLETED AND RETURNED REGARDLESS OF THE AMOUNT OF REVENUES REPORTED

THE FACE OF THIS DOCUMENT HAS A COLORED BACKGROUND • THIS PAPER CONTAINS FLUORESCENT FIBERS AND OTHER SECURITY FEATURES

FLORIDA PAYPHONE SYSTEMS, INC.
 2751 HIGHLAND AVENUE
 GRANTS PASS, OR 97526
 (541) 476-0332

US BANK
 PO BOX 410
 GRANTS PASS, OR 97526

39869
 CHECK NO.
 039869

*FIFTY DOLLARS AND NO CENTS

DATE: 03/22/01
 CHECK AMOUNT: *****50.00*

PAY TO THE ORDER OF
 FLORIDA PUB
 2540 SHUMAR
 Tallahassee

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 . . .

DOCUMENT NUMBER-DATE
 03873 MAR 28 01
 FPSC-RECORDS/REPORTING

Pay Telephone Service Provider Regulatory Assessment Fee Return

STATUS: *P. 15/1/01*
ROR

Actual Return
 Estimated Return
 Amended Return

Florida Public Service Commission
 (See Filing Instructions on Back of Form)

TF127
 Florida Pay Phone Systems, Inc.
 % Alpha Telecom Inc.
 2751 Highland Avenue
 Grants Pass, OR 97526-8423
 DEPOSIT DATE
 0046 MAR 29 2001

FOR PSC USE ONLY

Check# 39870

\$ 50.00 0603002
 003001
 \$ _____ P
 0603002
 004011
 \$ _____ I
 Postmark Date 3/27/01 Na
 Initials of Preparer MC

PERIOD COVERED:
 01/01/2001 TO 12/31/2001

Please Complete Below If Official Mailing Address Has Changed

Alpha Telecom, Inc. DBA Florida Payphone Systems, Inc.
 (Name of Company) (Address) (City/State) (Zip)

LINE NO.	ACCOUNT CLASSIFICATION	AMOUNT
1.	Gross Operating Revenue (Florida)	\$ 38334.76
2.	Gross Intrastate Revenue	81461.37
3.	LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back)	(93973.05)
4.	TOTAL REVENUES for Regulatory Assessment Fee Calculation (Line 2 less Line 3)	\$ <12511.68>
5.	Regulatory Assessment Fee Due — (Multiply Line 4 by 0.0015)	-
6.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)	-
7.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)	-
8.	TOTAL AMOUNT DUE	\$ 50.00

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

THIS FORM MUST BE COMPLETED AND RETURNED REGARDLESS OF THE AMOUNT OF REVENUES REPORTED

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FLORIDA PAYPHONE SYSTEMS, INC.
 2751 HIGHLAND AVENUE
 GRANTS PASS, OR 97526
 (541) 476-0332

US BANK
 PO BOX 410
 GRANTS PASS, OR 97526

24-22
 1230

39870
 CHECK NO.
 039870

*FIFTY DOLLARS AND NO CENTS

DATE
 03/22/01

CHECK AMOUNT
 *****50.00*

PAY TO THE ORDER OF
 FLORIDA PUBLIC SERV COMMISSION
 2540 SHUMARD OAK BLVD.
 Tallahassee FL 32399-0850

Rene C Sinclair

Alternative Local Exchange Company Regulatory Assessment Fee Return

STATUS:

- Actual Return
- Estimated Return
- Amended Return

PERIOD COVERED:
01/01/2001 TO 12/31/2001

Florida Public Service Commission

(See Filing Instructions on Back of Form)

TX212
2001 Telecommunications Inc.
5373 North Dixie Highway
Oakland Park, FL 33334-3403
DEPOSIT DATE
D046 MAR 29 2001

FOR PSC USE ONLY
Check# 39871
\$ 50.00 0603006
003001
P
0603006
004011
Postmark Date 3/27/01 Postmark
Initials of Preparer me

Please Complete Below If Official Mailing Address Has Changed

Alpha Telecom, Inc 2751 Highland Ave Grants Pass, OR 97526
DBA 2001 Telecommunications, Inc. (Name of Company) (Address) (City/State) (Zip)

LINE NO.	ACCOUNT CLASSIFICATION	FLORIDA GROSS OPERATING REVENUE	INTRASTATE REVENUE
1.	Basic Local Services	\$ <u>326,362.10</u>	\$ <u>221,926.23</u>
2.	Long Distance Services (IntraLATA only)**		
3.	Access Services		
4.	Private Line Services		
5.	Leased Facilities & Circuits Services		
6.	Miscellaneous Services		
7.	TOTAL REVENUES		\$ <u>221,926.23</u>
8.	LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back)		<u>218,424.33</u>
9.	Net Intrastate Operating Revenue for Regulatory Assessment Fee Calculation (Line 7 less Line 8)		<u>3,501.90</u>
10.	Regulatory Assessment Fee Due (Multiply Line 9 by 0.0015)		<u>5.25</u>
11.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)		
12.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)		
13.	TOTAL AMOUNT DUE		\$ <u>50.00</u>

* These amounts must be intrastate only and must be verifiable.
** Other long distance revenues must be listed on the Interexchange Regulatory Assessment Fee Return.

None

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

CURRENT COMPANY STATUS

- Facilities-Based Provider
- Reseller
- Other: Independent Telephone Provider

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FLORIDA PAYPHONE SYSTEMS, INC.
2751 HIGHLAND AVENUE
GRANTS PASS, OR 97526
(541) 476-0332

US BANK
PO BOX 410
GRANTS PASS, OR 97526

24-22
1230

39871

CHECK NO.

039871

*FIFTY DOLLARS AND NO CENTS

DATE

03/22/01

CHECK AMOUNT

*****50.00*

PAY TO THE ORDER OF
FLORIDA PUBLIC SERV COMMISSION
2540 SHUMARD OAK BLVD.
Tallahassee FL 32399-0850

Renee C Sinclair