

REQUEST TO ESTABLISH DOCKET

(PLEASE TYPE)

Date 4/2/01

Docket No. 010392-TC

1. Division Name/Staff Name Division of Regulatory Oversight/McCoy

2. OPR Division of Regulatory Oversight/McCoy

3. OCR Legal Services

4. Suggested Docket Title Request for Cancellation of Pay Telephone Certificate No. 3778

Florida Pay Phone Systems, Inc., effective 3/5/01.

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)

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

2. Interested Persons and their representatives (if any)

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

6. Check one:

- Documentation is attached.
- Documentation will be provided with recommendation.

I:\PSC\RAR\WP\ESTDKT.

PSC/RAR 10 (Revised 01/96)

DOCUMENT NUMBER-DATE

04110 APR-30

PSC-RECORDS/REPORTING

ALPHA TELCOM, INC.

COMMUNICATION SYSTEMS

Jackie Knight
Division of Administration
2540 Shumard Oak Boulevard
Tallahassee, Florida 32399

01 MAR -5 AM 11:27

FLORIDA
PUBLIC SERVICE COMMISSION
DIV. OF REGULATION
OUTER OFFICE

February 28, 2001

Dear Jackie,

Please cancel the following three certificates:

- TX212 - 2001 Telecommunications, Inc.
- TE573 - Florida Pay Phone Services, Inc.
- TF127 - Florida Pay Phone Systems, Inc.

If you have any questions, please don't hesitate to call or Email.

Thank you,



Matilda Fox
Alpha Telcom, Inc.
(541) 476-0332 Ext. 3110
mfox@alphatelcom.com

01 MAR -5 AM 10:25

ALPHA TELCOM, INC.

COMMUNICATION SYSTEMS

March 21, 2001

2001 MAR 26 AM 11:00

Paula J. Isler, Research Assistant
Bureau of Service Evaluation & Compliance
Capital Circle Office Center
2540 Shumard Oak Boulevard
Tallahassee, FL 32399-0850

DIVISION OF
COMPETITIVE SERVICES

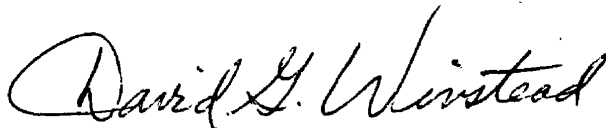
Re: TX212 – 2001 Telecommunications, Inc. (Certificate No. 5660)
TE573 – Florida Pay Phone Services, Inc. (Certificate No. 3010)
TF127 – Florida Pay Phone Systems, Inc. (Certificate No. 3778)

Dear Ms. Isler;

The above referenced companies are subsidiaries of Alpha Telcom, Inc. The purpose of this letter is to request a cancellation of the PUC certificates (numbers 5660, 3010, and 3778) and to ~~consolidate all three under our~~ ^{Key} TG693 - Alpha Telcom, Inc. certificate.

If you have any questions, please contact Matilda Fox at (541) 476-0332 Ext. 3110, or mfox@alphatelcom.com.

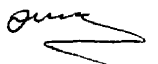
Thank you,



David G. Winstead, Vice President
Alpha Telcom, Inc

NOTE:

3/31 See w/ Ms. Fox - Cancel all certificates but TG 693.



COMPANY IDENTIFICATION

Printed on 04/02/2001 at 13:59:24 by TJM

Complete Name: Florida Pay Phone Systems, Inc.

Mailing Name: Florida Pay Phone Systems, Inc.

Company Code: TF127 FEID Number: 65-0494591

COMPANY INFORMATION

Address Line 1: 2751 Highland Avenue

Address Line 2:

City: Grants Pass State: OR Zip Code: 97526-8423

Reg. Date: 06/23/1994 Inactive Date:

Transferred To:

Trans. From:

Certificate 1: 3778 Certificate 2:

Corporate Type:

Service 1: PAT - Pay Telephone

Service 2:

Service 3:

Service 4:

Class (WAW):

Phone Count: 91

County 1: County 2:

County 3: County 4:

Bankruptcy: No

COMPANY IDENTIFICATION

Printed on 04/02/2001 at 13:59:20 by TJM

Complete Name: Florida Pay Phone Systems, Inc.

Mailing Name: Florida Pay Phone Systems, Inc.

Company Code: TF127 FEID Number: 65-0494591

MAILING INFORMATION

Attention: Mr. Chris Clapp

Address Line 1: % Alpha Telcom Inc.

Address Line 2: 2751 Highland Avenue

City: Grants Pass State: OR Zip Code: 97526-8423

E-mail Address:

Web Address:

Liaison 1: Paul Rubera

Title: President

Phone: (541) 476-0332

E-mail:

Fax 1: (541) 476-9469

County:

Liaison 2: Chris Clapp

Title:

Phone:

E-mail:

Fax 2:

Pay Telephone Service Provider 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)

TF127
Florida Pay Phone Systems, Inc.
% Alpha Telecom Inc.
2751 Highland Avenue
Grants Pass, OR 97526-8423

FOR PSC USE ONLY

Check# _____

\$ _____ 0603000
003001

\$ _____ P
0603002
004011

\$ _____ I

Postmark Date _____

Initials of Preparer _____

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) | \$ <u>38334.76</u> |
| 2. | Gross Intrastate Revenue | <u>81461.37</u> |
| 3. | LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back) | <u>(93973.05)</u> |
| 4. | TOTAL REVENUES for Regulatory Assessment Fee Calculation (Line 2 less Line 3) | \$ <u><12511.68></u> |
| 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 | \$ <u>50⁰⁰</u> |

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

9. Number of pay telephones in operation at close of period covered by this Return 872

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

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 official duty shall be guilty of a misdemeanor of the second degree.

Christy G. Winston
(Signature of Company Official)

Vice President 3.22.01
(Title) (Date)

matilda Fox
(Preparer of Form - Please Print Name)

Telephone Number (541) 476-0332 Fax Number (541) 476-7453

F.E.I. No. 93-0933024

39870

DATE INVOICE NO COMMENT
03/22/01 032601

AMOUNT DISCOUNT NET AMOUNT
50.00 .00 50.00

04-FLPSCOM REFERENCE: FL. PP. SERVICE
CHECK: 039870 03/22/01 FLORIDA PUBLIC SERV COMMISSION CHK TOTAL: 50.00

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

24-22
1230

39870

CHECK NO.

039870

*FIFTY DOLLARS AND NO CENTS

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

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

Kenie C. Sinclair

⑈039870⑈ ⑆⑆23000220⑆⑆5369⑆⑆50⑆03⑈