

**Pay Telephone Service Provider Regulatory Assessment Fee Return**

STATUS:

*R+R*

Florida Public Service Commission

(See Filing Instructions on Back of Form)

FOR PSC USE ONLY	
Check#	<u>17395</u>
\$	<u>.55</u>
\$	
\$	
Postmark Date	<u>6/8/01</u>
Initials of Preparer	<u>MC</u>

TG716	<u>010641-TC</u>
Coin-Tel of Pennsylvania, Inc.	
726 East Long Avenue	
New Castle, PA 16101-4848	
DEPOSIT	DATE
<u>D079</u>	<u>JUN 18 2001</u>

- Actual Return
- Estimated Return
- Amended Return

PERIOD COVERED:  
07/18/2000 TO  
12/31/2000

Please Complete Below If Official Mailing Address Has Changed

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

LINE NO.	ACCOUNT CLASSIFICATION	AMOUNT
1.	Gross Operating Revenue (Florida)	\$ <u>386.75</u>
2.	Gross Intrastate Revenue	<u>270.72</u>
3.	LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back)	<u>( 0 )</u>
4.	<b>TOTAL REVENUES for Regulatory Assessment Fee Calculation</b> (Line 2 less Line 3)	\$ <u>270.72</u>
5.	Regulatory Assessment Fee Due - (Multiply Line 4 by 0.0015)	<u>.40¢</u>
6.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)	<u>.10¢</u>
7.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)	<u>.05¢</u>
8.	<b>TOTAL AMOUNT DUE</b>	\$ <u>0.55¢</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 3

APP \_\_\_\_\_  
CAP \_\_\_\_\_ These amounts must be intrastate only and must be verifiable.  
CMP \_\_\_\_\_

COM \_\_\_\_\_  
CTR \_\_\_\_\_ 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.  
LEG \_\_\_\_\_  
CPC \_\_\_\_\_

PAI \_\_\_\_\_  
(Signature of Company Official)

President 6-7-01  
(Title) (Date)

RGO Brent C. Mayes  
SEC (Preparer of Form - Please Print Name)

Telephone Number (724) 657-1158 Fax Number (724) 657-1158  
F.E.I. No. 25-1761010 07271 JUN 12 5

FPSO-RECORDS-REPORTING