

ORIGINAL

November 20, 2001

Florida Public Service Commission
Attention: Paula J. Isler, Research Assistant
2540 Shumard Oak Boulevard
Tallahassee, FL 32399-850



CK02110856
84.29-P
18.65 - I
11/26/01 No postmark

Re: Docket Nos. 011131-TX and 011149-TX

P. Isler
✓CEA

Dear Ms. Isler:

TI890

In reply to your letter dated October 30, 2001, I have enclosed an offer of settlement to Blanca Bayo regarding the above-referenced dockets. We hope that it meets with the Commission's approval. With regard to the other points raised in your letter, I report the following:

MC

DEPOSIT DATE
D 14 8 00 DEC 04 2001

TI215, Qwest Communications Corp. (QCC) IXC This return (Jan-June 2001) was filed on October 2, 2001. Please find attached a check in the amount of \$802.87 as payment for the late fees and penalties.

TX273, QCC, ALEC, Please apply the \$94.00 overpayment to any late fees on this account and issue a refund check for the remainder. As noted in the enclosed settlement offer, the 2000 RAF fee was paid on October 2, 2001.

TI890, LCI International Telecom Corp. d/b/a Qwest Communications Services (LCIT), IXC. This return (Jan.-June 2001) was filed on October 2, 2001. Please find attached a check in the amount of \$102.94 as payment for the late fees and penalties.

TX026, LCIT, ALEC. For the return (CY 1997), I have enclosed a check in the amount of \$14.44 for the Late Payment and Penalties.

Finally, in preparation to deliver the requested information for LCIT IXC, TI890, refund, it was discovered that the January through June 2000 return for LCI and Qwest, TI215, were incorrect. I have enclosed revised submissions for both the January through June 2000 returns and the July through December returns. Qwest hereby requests a refund in the amount of \$46,307.85 for Qwest and \$12,442.95 for LCI.

- APP _____
- CAF _____
- CMP _____
- COM _____
- CTR _____
- ECR _____
- LEG _____
- OPC _____
- PAI _____
- RGO _____
- SEC _____
- SER _____
- OTH _____

If you have any questions regarding this matter please feel free to contact me at 303-942-6617 or via email at david.lenard@qwest.com.

Sincerely,

David LeNard
Sr. Financial Analyst
Facilities Cost
Regulatory Reporting

2001 NOV 21 PM 4:00
DIVISION OF
COMPETITIVE SERVICES

DOCUMENT NUMBER-DATE

15117 DEC-4 01

FPSC-COMMISSION CLERK



Interexchange Company Regulatory Assessment Fee Return

Florida Public Service Commission

(See Filing Instructions on Back of Form)

STATUS:

- Actual Return
- Estimated Return
- Amended Return

TI-890
 LCI International Telcom Corp.
 1670 Broadway, 26th Floor
 Denver, CO 80202
 Attn. David LeNard

FOR PSC USE ONLY

Check# _____

\$ _____ 0603001
 _____ 003001
 \$ _____ P
 _____ 0603001
 _____ 004011
 \$ _____ I

Postmark Date _____

Initials of Preparer _____

PERIOD COVERED:
 /1/2000-6/30/2000

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	\$ 10,252,008	\$ 4,012,825
2.	Access Services	1,328,643	511,053
3.	Private Line Services	125,645	48,328
4.	Leased Facilities & Circuits Services		
5.	Miscellaneous Services	189,425	72,861
6.	TOTAL Telephone Services	\$ 11,895,721	\$ 4,645,068
7.	LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back)	()	(2,238,616)
8.	TOTAL REVENUES For Regulatory Assessment Fee Calculation		2,406,451
9.	Regulatory Assessment Fee Due (Multiply Line 8 by 0.0015)		3,610
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		3,610

* 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: _____

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: \$ _____ for 19__

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 337.06, 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.

Vice President, QCC
 (Signature of Company Official) (Tide) (Date) 11/20/01

David LeNard
 (Preparer of Form - Please Print Name) Telephone Number 303-992-6617 Fax Number ()

F.E.I. No. 39-1455803

Interexchange Company Regulatory Assessment Fee Return

Florida Public Service Commission

(See Filing Instructions on Back of Form)

STATUS:

- Actual Return
- Estimated Return
- Amended Return

TI-890
 LCI International Telecom Corp.
 1670 Broadway, 26th Floor
 Denver, CO 80202
 Attn. David LeNard

PERIOD COVERED:

7/1/2000-12/31/2000

FOR PSC USE ONLY

Check# _____

\$ _____ 0603001
 _____ 003001
 \$ _____ P
 _____ 0603001
 _____ 004011
 \$ _____ I

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	\$ 5,742,945	\$ 2,421,750
2.	Access Services	1,444,535	553,290
3.	Private Line Services	98,652	37,756
4.	Leased Facilities & Circuits Services	226,939	86,939
5.	Miscellaneous Services	7,513,071	3,099,734
6.	TOTAL Telephone Services	\$ 7,513,071	\$ 3,099,734
7.	LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back)	()	(714,689)
8.	TOTAL REVENUES For Regulatory Assessment Fee Calculation		2,385,045
9.	Regulatory Assessment Fee Due (Multiply Line 8 by 0.0015)		3,577.57
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		3,577.57

* 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: _____

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: \$ _____ for 19 ____

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.

Vice President, QCC _____ 11/29/01
 (Signature of Company Official) (Title) (Date)

David LeNard _____
 (Preparer of Form - Please Print Name) Telephone Number (303) 992-6617 Fax Number () -

F.E.I. No. 39 1455803

Interexchange Company Regulatory Assessment Fee Return

Florida Public Service Commission

(See Filing Instructions on Back of Form)

STATUS:

- Actual Return
 Estimated Return
 Amended Return

01890
 Qwest Communications Services
 1801 California Street, #4900
 Denver, CO 80202-2613

PERIOD COVERED:

07/01/2000 TO
12/31/2000

FOR PSC USE ONLY

Check# _____

\$ _____ 0603001
003001

\$ _____ P
0603001
004011

\$ _____ I

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	\$ 5,161,342	\$ 2,405,999
2.	Access Services	2,773,178	1,064,342
3.	Private Line Services	224,296	86,085
4.	Leased Facilities & Circuits Services		
5.	Miscellaneous Services	416,364	159,800
6.	TOTAL Telephone Services	\$ 8,575,181	\$ 3,716,226
7.	LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back)	(2,953,305)	(2,953,305)
8.	TOTAL REVENUES For Regulatory Assessment Fee Calculation		762,921
9.	Regulatory Assessment Fee Due (Multiply Line 8 by 0.0015)		1,144.38
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		\$ 1,144.38

* 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: _____

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? What is the total amount of bond held (if applicable)?
 Amount: \$ _____ for 19 _____ 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.

_____ (Signature of Company Official) Vice President 1/30/01
 _____ (Preparer of Form - Please Print Name) (Title) (Date)
 Telephone Number (303) 992-6617 Fax Number ()
 F.E.I. No. _____