

Case Assignment and Scheduling Record

Section 1 - Bureau of Records and Hearing Services Completes

Docket No. 011236-TI Date Docketed: 09/25/2001 Title: Application for certificate to provide interexchange telecommunications service by Calpoint (Florida), LLC.  
 Company: Calpoint (Florida), LLC

Official Filing Date: \_\_\_\_\_  
 Last Day to Suspend: \_\_\_\_\_ Expiration: \_\_\_\_\_

Referred to: APP CAF CCA CMP ECR GCL LEG PAI (RGO) SER  
 ("()" indicates OPR) \_\_\_\_\_ X \_\_\_\_\_ X \_\_\_\_\_

Section 2 - OPR Completes and returns to CCA in 10 workdays. Time Schedule

Program/Module Bl(a)

Staff Assignments

OPR Staff \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
Staff Counsel \_\_\_\_\_  
OCRs ( ) \_\_\_\_\_  
 ( ) \_\_\_\_\_  
 ( ) \_\_\_\_\_  
 ( ) \_\_\_\_\_  
 ( ) \_\_\_\_\_  
 ( ) \_\_\_\_\_

**WARNING: THIS SCHEDULE IS AN INTERNAL PLANNING DOCUMENT.  
 IT IS TENTATIVE AND SUBJECT TO REVISION.  
 FOR UPDATES CONTACT THE RECORDS SECTION: (850) 413-6770  
 Current CASR revision level**

0

Due Dates

Previous Current

1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____
7.	_____	_____	_____
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11.	_____	_____	_____
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14.	_____	_____	_____
15.	_____	_____	_____
16.	_____	_____	_____
17.	_____	_____	_____
18.	_____	_____	_____
19.	_____	_____	_____
20.	_____	_____	_____
21.	_____	_____	_____
22.	_____	_____	_____
23.	_____	_____	_____
24.	_____	_____	_____
25.	_____	_____	_____
26.	_____	_____	_____
27.	_____	_____	_____
28.	_____	_____	_____
29.	_____	_____	_____
30.	_____	_____	_____
31.	_____	_____	_____
32.	_____	_____	_____
33.	_____	_____	_____
34.	_____	_____	_____
35.	_____	_____	_____
36.	_____	_____	_____
37.	_____	_____	_____
38.	_____	_____	_____
39.	_____	_____	_____
40.	_____	_____	_____

Recommended assignments for hearing and/or deciding this case:

Full Commission \_\_\_\_\_ Commission Panel \_\_\_\_\_  
 Hearing Examiner \_\_\_\_\_ Staff \_\_\_\_\_

Date filed with CCA: \_\_\_\_\_

Initials: OPR \_\_\_\_\_  
 Staff Counsel \_\_\_\_\_

Section 3 - Chairman Completes

Assignments are as follows:

- Hearing Officer(s)

Commissioners						Hrg. Exam.	Staff
ALL	JC	DS	JB	BZ	PL		

- Prehearing Officer

Commissioners					ADM
JC	DS	JB	BZ	PL	

DOCUMENT NO.  
17630-01

Where panels are assigned the senior Commissioner is Panel Chairman; the identical panel decides the case.

Where one Commissioner, a Hearing Examiner or a Staff Member is assigned the full Commission decides the case.

Approved: \_\_\_\_\_

Date: \_\_\_ / \_\_\_ / \_\_\_

Case Assignment and Scheduling Record

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Section 2 - OPR Completes and returns to CCA in 10 workdays. Time Schedule

Program/Module BI(a)

Staff Assignments

Table with columns for Staff Assignments and Staff Course/OCRs, listing names like T Williams and K Pena, B Keating.

WARNING: THIS SCHEDULE IS AN INTERNAL PLANNING DOCUMENT. IT IS TENTATIVE AND SUBJECT TO REVISION. FOR UPDATES CONTACT THE RECORDS SECTION: (850) 413-6770 Current CASR revision level

0

Due Dates

Previous Current

Main task schedule table with 40 rows and 3 columns: Task, Due Date, Previous, Current.

Recommended assignments for hearing and/or deciding this case:

Full Commission X Commission Panel Hearing Examiner Staff

Date filed with CCA: 10/02/2001

Initials: OPR Staff Counsel

Section 3 - Chairman Completes

Assignments are as follows:

- Hearing Officer(s)

Table for Hearing Officer(s) assignments with columns for Commissioners (ALL, JC, DS, JB, BZ, PL), Hrg. Exam., and Staff.

- Prehearing Officer

Table for Prehearing Officer assignments with columns for Commissioners (JC, DS, JB, BZ, PL), ADM, and Staff.

Where panels are assigned the senior Commissioner is Panel Chairman; the identical panel decides the case. Where one Commissioner, a Hearing Examiner or a Staff Member is assigned the full Commission decides the case.

Approved: [Signature] Date: 10/02/2001

STATE OF FLORIDA

COMMISSIONERS:  
E. LEON JACOBS, JR., CHAIRMAN  
J. TERRY DEASON  
LILA A. JABER  
BRAULIO L. BAEZ  
MICHAEL A. PALECKI



DIVISION OF THE COMMISSION CLERK &  
ADMINISTRATIVE SERVICES  
BLANCA S. BAYÓ  
DIRECTOR  
(850) 413-6770 (CLERK)  
(850) 413-6330 (ADMIN)

# Public Service Commission

September 25, 2001

Sara R. Leibman, Esquire  
Mintz, Levin, Cohn, Ferris, Glovsky and Popeo, P.C.  
701 Pennsylvania Avenue, NW  
Washington, DC 20004

Re: Docket No. 011236-TI

Dear Ms. Leibman:

This will acknowledge receipt of an application for certificate to provide interexchange telecommunications service by Calpoint (Florida), LLC, which was filed in this office on September 25, 2001, and assigned the above-referenced docket number. Appropriate staff members will be advised.

Mediation may be available to resolve any dispute in this docket. If mediation is conducted, it does not affect a substantially interested person's right to an administrative hearing. For more information, contact the Office of General Counsel at (850) 413-6248 or FAX (850) 413-7180.

Please note as well that Commission Rule 25-22.005(7), F.A.C., requires certificate companies to notify the Commission of any changes in name, telephone, address, or contact person. Should your application be granted by the Commission, you will be expected to comply with this rule by advising us of any changes as they occur.

Division of the Commission Clerk and Administrative Services  
Florida Public Service Commission



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Internet E-mail: [contact@psc.state.fl.us](mailto:contact@psc.state.fl.us)

STATE OF FLORIDA

COMMISSIONERS:  
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## Public Service Commission

September 27, 2001

(CERTIFIED NO. 7000-0600-0026-4144-3607)

Sara F. Leibman, Esquire  
Mintz, Levin, Cohn, Ferris, Glovsky  
and Popeo, P.C.  
701 Pennsylvania Avenue, Northwest  
Washington, D.C. 20004

**Re: Financial information in Docket Nos. 011236-TI and 011237-TX**

Dear Ms. Leibman:

Enclosed are copies of financial information for Calpoint (Florida), LLC. that was received at the Public Service Commission on September 25, 2001. This information is being returned to you per my phone conversation with your office. Please note that when filing confidential information only one copy is required.

Please do not hesitate to contact me if you have any questions concerning this matter.

Sincerely,

A handwritten signature in cursive script that reads "Marguerite H. Lockard".

Marguerite H. Lockard  
Commission Deputy Clerk

MHL:mhl  
Enclosure

cc: Docket file

STATE OF FLORIDA

COMMISSIONERS:

LILA A. JABER, CHAIRMAN  
J. TERRY DEASON  
BRAULIO L. BAEZ  
MICHAEL A. PALECKI  
RUDOLPH "RUDY" BRADLEY



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ADMINISTRATIVE SERVICES  
BLANCA S. BAYÓ  
DIRECTOR  
(850) 413-6770 (CLERK)  
(850) 413-6330 (ADMIN)

## Public Service Commission

January 16, 2002

(CERTIFIED MAIL NO. 7000-0600-0026-4144-6158)

Sara F. Leibman, Esquire  
Mintz, Levin, Cohn, Ferris, Glovsky and Popeo, P.C.  
701 Pennsylvania Avenue, Northwest  
Washington, D.C. 20004

**Re: Return of Confidential Documents to the Source, Docket Nos. 011236-TI  
and 011237-TX**

Dear Ms. Leibman:

Commission staff had advised that Confidential Document Nos. 12028-01 and 12031-01 filed on behalf of Calpoint (Florida), LLC can be returned to the source. The documents are enclosed.

Please do not hesitate to contact me if you have any questions concerning return of this material.

Sincerely,

A handwritten signature in cursive script that reads "Kay Flynn".

Kay Flynn, Chief  
Bureau of Records and Hearing Services

KF/mhl  
Enclosure

cc: Tommy Williams, Division of Regulatory Oversight

STATE OF FLORIDA

COMMISSIONERS:  
E. LEON JACOBS, JR., CHAIRMAN  
J. TERRY DEASON  
LILA A. JABER  
BRAULIO L. BAEZ  
MICHAEL A. PALECKI



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Public Service Commission

FPSC, CLK - CORRESPONDENCE  
✓ Administrative Parties Consumer

September 27, 2001

DOCUMENT NO. \_\_\_\_\_

DISTRIBUTION: \_\_\_\_\_

(CERTIFIED NO. 7000-0600-0026-4144-3607)

Sara F. Leibman, Esquire  
Mintz, Levin, Cohn, Ferris, Glovsky  
and Popeo, P.C.  
701 Pennsylvania Avenue, Northwest  
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12028-01      12031-01  
/                    /

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Sincerely,

Marguerite H. Lockard  
Commission Deputy Clerk

MHL:mhl  
Enclosure

cc: Docket file

DOCUMENT NO  
17630-01



ADMINISTRATIVE PARTIES CONSUMER DOCUMENT NO. DISTRIBUTION

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

SARA F LEIBMAN ESQUIRE  
 MINTZ LEVIN COHN FERRIS GLOVSKY  
 & POPEO PC  
 701 PENNSYLVANIA AVE NW  
 WASHINGTON DC 20004

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery  
*Maha...* **OCT 02 2001**

C. Signature  Agent  Addressee  
 X *[Signature]*

D. Is delivery address different from item 1?  Yes  No  
 If YES, enter delivery address below:

3. Service Type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

2. Article Number (Copy from service label)  
**7000-0600-0026-4144-3607**

STATE OF FLORIDA

COMMISSIONERS:  
LILA A. JABER, CHAIRMAN  
J. TERRY DEASON  
BRAULIO L. BAEZ  
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Public Service Commission

January 16, 2002

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Kay Flynn, Chief  
Bureau of Records and Hearing Services

KF/mhl  
Enclosure

cc: Tommy Williams, Division of Regulatory Oversight





POSTAGE WILL BE PAID BY ADDRESSEE  
FIRST CLASS PERMIT NO. 1000  
WASHINGTON DC 20004

POSTAGE WILL BE PAID BY ADDRESSEE  
FIRST CLASS PERMIT NO. 1000  
WASHINGTON DC 20004

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FIRST CLASS PERMIT NO. 1000  
WASHINGTON DC 20004

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FIRST CLASS PERMIT NO. 1000  
WASHINGTON DC 20004

POSTAGE WILL BE PAID BY ADDRESSEE  
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WASHINGTON DC 20004

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1.  Addressee's Address
2.  Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

SARA F LEIBMAN ESQUIRE  
MINTZ LEVIN COHN FERRIS  
GLOVSKY & POPEO PC  
701 PENNSYLVANIA AVE NW  
WASHINGTON DC 20004

4a. Article Number  
**7000-0600-0026-4144-6158**

4b. Service Type

Registered  Certified

Express Mail  Insured

Return Receipt for Merchandise  COD

5. Received By: (Print Name)

*S. F. Leibman*

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

*S. F. Leibman*

**X**

Thank you for using Return Receipt Service.

POSTAGE WILL BE PAID BY ADDRESSEE  
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WASHINGTON DC 20004