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CK 13233
#250.00
MC

December 31, 2002

Via Overnight Delivery

Florida Public Service Commission
Division of Administration
2540 Shumard Oak Blvd.
Tallahassee, FL 32399-0850

030009-TX

RE: Alticomm, Inc.

DEPOSIT DATE
D285 JAN 03 2003

Dear Sirs:

Enclosed please find an original and six (6) copies of Application Form for authority to provide alternative local exchange telecommunications service within the State of Florida, submitted on behalf of Alticomm, Inc. Also enclosed is the requisite \$250.00 filing fee.

Please acknowledge receipt of this filing by returning a date stamped copy of this letter in the self-addressed envelope provided.

Thank you for your assistance. Please call with any questions.

Sincerely,

Monica Borne Haab
Monica Borne Haab *ms*

Enclosure

cc: James Cornblatt, Alticomm
(cover only)

Check received with filing and forwarded to Fiscal for deposit. Fiscal to forward deposit information to Records.

Initials of person who forwarded check

[Handwritten initials]

- AUS _____
- CAF _____
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03 JAN - 2 AM 9:36
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