

Pay Telephone Service Provider Regulatory Assessment Fee Return

Florida Public Service Commission

(See Filing Instructions on Back of Form)

FOR PSC USE ONLY	
Check#	1202
\$	50.00 0603002
\$	2.50 P 003001
\$	.50 I 0603002
	004011
Postmark Date	5/23/03
Initials of Preparer	MC

STATUS:

- Actual Return
- Estimated Return
- Amended Return

P. Isler  
CCA

TG407-02-0-R	DEPOSIT	DATE
Citrus County Telephone, Inc.		
P. O. Box 929	D 352	MAY 29 2003
Lecanto, FL 34460-0929		
cc: P. Isler		

PERIOD COVERED:  
01/01/2002 TO 12/31/2002

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)	\$ _____
2.	Gross Intrastate Revenue	_____
3.	LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back)	( _____ )
4.	TOTAL REVENUES for Regulatory Assessment Fee Calculation (Line 2 less Line 3)	\$ _____
5.	Regulatory Assessment Fee Due -- (Multiply Line 4 by 0.0015)	950 -
6.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)	2.50
7.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)	.50
8.	TOTAL AMOUNT DUE	\$ 53.00

- AUS \_\_\_\_\_
- CAF \_\_\_\_\_
- CMP \_\_\_\_\_
- COM \_\_\_\_\_
- CTR \_\_\_\_\_
- ECR \_\_\_\_\_
- GCL \_\_\_\_\_
- OPC \_\_\_\_\_
- MMS \_\_\_\_\_
- SEC   I
- OTH \_\_\_\_\_

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   0  

\* 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.

Robert Stack (Signature of Company Official) Owner (Title) 5/23/03 (Date)

Robert Stack (Preparer of Form - Please Print Name) Telephone Number 352 249-9161 Fax Number ( )

F.E.I. No. \_\_\_\_\_

DOCUMENT NUMBER-DATE  
04777 MAY 28 03