

TO AVOID PENALTY AND INTEREST CHARGES, THE REGULATORY ASSESSMENT FEE RETURN MUST BE FILED ON OR BEFORE 01/30/2003

Pay Telephone Service Provider Regulatory Assessment Fee Return

STATUS:

Florida Public Service Commission

(See Filing Instructions on Back of Form)

- Actual Return
- Estimated Return
- Amended Return

TG803-02-0-R
 Federal Correctional Institution Miami
 15801 S.W. 137th Avenue
 Miami, FL 33177-1297

DEPOSIT DATE 393

cc: Docket No. 030727-TC (Tskel)

FOR PSC USE ONLY

Check# money order
06029030245

\$ 50.00 0603002
 003001

\$ 12.50 P 0603002
 004011

\$ 5.00 I

Postmark Date 10/28/03
 Initials of Preparer RT

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

Please Complete Below if Official Mailing Address Has Changed

397
 (Name of Company) (Address) (City/State) (Zip)

LINE NO.	ACCOUNT CLASSIFICATION	AMOUNT
1.	Gross Operating Revenue (Florida)	\$ 0
2.	Gross Intrastate Revenue	147.35
3.	LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back)	(0)
4.	TOTAL REVENUES for Regulatory Assessment Fee Calculation (Line 2 less Line 3)	\$ 147.35
5.	Regulatory Assessment Fee Due - (Multiply Line 4 by 0.0015)	.23 = \$50.00
6.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)	12.50
7.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)	5.00
8.	TOTAL AMOUNT DUE	\$ 67.50

- AUS _____
- CAF _____
- CMP _____
- COM _____
- CTR _____
- ECR _____
- GGL _____
- OPC _____
- MMS _____
- SEC 1
- 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 1

* 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.

Michael Holland
 (Signature of Company Official)
Michael Holland
 (Preparer of Form - Please Print Name)

Controller
 (Title)
 Telephone Number 305 259-2104 Fax Number 305 259-2392
 F.E.I. No. _____

9/28/03
 (Date)
 10/28/03
 F.P.S.C.-COMMISSION CLERK



U.S. Department of Justice

Federal Bureau of Prisons

Federal Correctional Institution

15801 S.W. 137 th Avenue
Miami, FL 33177-1297

October 28, 2003

Ms. Bianca Bayo', Director
Division of the Commission Clerk & Administrative Services
Florida Public Service Commission
2540 Shumard Oak Blvd.
Tallahassee, Florida 32399-0850

Dear Ms. Bayo':

This is in response to order No. PSC-03-1123-PAA-TC issued on October 8, 2003, in Docket No. 030727-TC. Please consider this a protest and/or offer of settlement to resolve this docket.

As stated on the phone with Paula Isler on Monday, October 27, 2003, the Federal Correctional Institution wishes to resolve this debt informally and thus keeping our certificate active. In doing so, this year an invoice was not received by the designated billing office until October 27, 2003 and therefore payment was not made timely for the period of January 1, 2002 thru December 31, 2002. To prevent this from occurring in the future, I am requesting that all future invoices be sent to my attention so that prompt payment can be made.

The Federal Correctional Institution is now aware that the Regulatory Assessment Fee is due by January 30th of every year and with invoices being sent to my attention, should avoid this problem in the future.

At this time, the Federal Correctional Institution respectfully requests that the Commission accept its proposal to pay the \$67.50 settlement instead of the \$500 penalty imposed. Enclosed with this letter is a payment of \$67.50 which includes a \$50 Regulatory Assessment Fee, a penalty of \$12.50, and interest of \$5 which should satisfy the debt.

If you have any further questions, please do not hesitate to contact me.

Sincerely,

A handwritten signature in cursive script, appearing to read "Mike Holland", is written below the word "Sincerely,".

Mike Holland
Controller
FCI Miami

FedEx Envelope

STANDARD OVERNIGHT
 TRK# 8390 3221 1802 FORM 0215
 2
 32399 -FL-US XH TLF



50
52

FedEx Express USA Airbill
 FedEx Tracking Number 8390 3221 1802

1 From This portion can be removed for Recipient's records.
 Date 10/28/03 FedEx Tracking Number 839032211802
 Sender's Name Mike Holland Phone 305 259-2100
 Company FEDERAL CORRECTIONAL INST
 Address 15801 SW 137TH AVE Dept./Floor/Suite/Room
 City MIAMI State FL ZIP 33177-1299

2 Your Internal Billing Reference Pay Phone Docket # 030727-TC

3 To
 Recipient's Name ATLANTIC: Fiscal Services Phone 850 413-6502
 Company Florida Public Service Commission
 Address 2540 Shumard Oak Blvd.
 To "HOLD" at FedEx location, print FedEx address. We cannot deliver to P.O. boxes or P.O. ZIP codes.
 Address
 City Tallahassee State FL ZIP 32399-0850

NO POUCH NEEDED. See back for peel and stick application instructions.

RECIPIENT: PEEL HERE



4a Express Package Service Packages up to 150 lbs. Delivery commitment may be later in some areas.

FedEx Priority Overnight Next business morning
 FedEx Standard Overnight; Next business afternoon
 FedEx First Overnight Earliest next business morning delivery to specific locations

FedEx 2Day Second business day
 FedEx Express Saver Third business day
 FedEx Envelope rate not available. Minimum charge. One-piece rate.

4b Express Freight Service. Packages over 150 lbs. Delivery commitment may be later in some areas.

FedEx 1Day Freight* Next business day
 FedEx 2Day Freight Second business day
 FedEx 3Day Freight Third business day

* Call for Confirmation

5 Packaging Declared value limit \$500

FedEx Envelope*
 FedEx Pak* Includes FedEx Small Pak, FedEx Large Pak, and FedEx Sturdy Pak
 Other

6 Special Handling

SATURDAY Delivery Available only for FedEx Priority Overnight and FedEx 2Day to select ZIP codes.
 HOLD Weekday at FedEx Location Not available for FedEx First Overnight.
 HOLD Saturday at FedEx Location Available only for FedEx Priority Overnight and FedEx 2Day to select locations.

Does this shipment contain dangerous goods?
 One box must be checked
 No Yes As per attached Shipper's Declaration Yes Shipper's Declaration not required

Dangerous Goods (including Dry Ice) cannot be shipped in FedEx packaging.
 Dry Ice Dry Ice, 5, UN 1845
 Cargo Aircraft Only

7 Payment Bill to: Enter FedEx Acct. No. or Credit Card No. below. Obtain Recip. Acct. No.

Sender Acct. No. in Section 1 will be billed.
 Recipient
 Third Party
 Credit Card
 Cash/Check

Total Packages	Total Weight	Total Charges
		Credit Card Auth.

8 Release Signature Sign to authorize delivery without obtaining signature

By signing you authorize us to deliver this shipment without obtaining a signature and agree to indemnify and hold us harmless from any resulting claims.
 Questions? Visit our Web site at fedex.com or call 1 800 Go FedEx® 800 463 3339
 SRS® Rev. Date 4/02 Part 41578105 © 1994-2002 FedEx® PRINTED IN U.S.A.

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