ORIGINALINIAR

Raquel Tully

From:

Paula Isler

Sent:

Monday, July 31, 2006 11:27 AM

To:

Raquel Tully

Cc:

Melinda Watts; Ray Kennedy

Subject: RE:

DAT CK

200.00 T. F.

667 AUG 01 2006

300.00 Fine

Good morning.

1-26-00

- 1) Concerning TJ995 Vistalmar International, Inc. d/b/a Trademark Corp. \$65.25 is for RAF, penalty and interest for 2005. Please deposit that as you normally would. Please deposit \$200 in the PSC Trust Fund for collection costs and the balance of \$300 in the General Revenue Fund. Please provide Records proof of payment for Docket No. 060466-Tl.
- 2) Concerning TX691 T3 Communications All \$1,500 should be deposited in the General Revenue Fund as it was a settlement. Please provide Records proof of payment for Docket No. 060061-TX.
- 3) Concerning TX841 Matrix Telecom, Inc. Please deposit \$200 in the PSC Trust Fund for collection costs and the balance of \$300 in the General Revenue Fund. Please provide Records proof of payment for Docket No. 060462-TX.
- 4) Concerning TA076 Your Sip, Inc. \$65.50 is for RAF, penalty and interest for 2005. Please deposit that as you normally would. Please deposit \$200 in the PSC Trust Fund for collection costs and the balance of \$300 in the General Revenue Fund. Please provide Records proof of payment for Docket No. 060463-TA.

From: Raquel Tully

Sent: Monday, July 31, 2006 11:06 AM

To: Paula Isler

Subject:

I received these checks this morning, please let me know the breakdowns,

TJ995, Docket 060466 TradeMark Corp - \$565.25 T3 Communications(just received Check) \$1500.00 Matrix Telecom Docket NO 060462- \$500.00 TA076 Your Sip,Inc -\$565.50 COMMISSION

G-1 AM 8: 3

CMP ____

СОМ _____

CTR ____

ECR ____

GCL ____

OPC ____

RCA ____

SCR ____

SGA

SEC ___

ОТН ____

DOCUMENT NUMBER - DATE

06850 AUG-18

FPCC-COMMISSION AL CAL

FOR PSC USE ONLY

TO AVOID PENALTY AND INTEREST CHARGES, THE REGULATORY ASSESSMENT FEE RETURN MUST BE FILED ON OR BEFORE 01/30/2006

Alternative Access Vendor Regulatory Assessment Fee Return

Florida Public Service Commission

STATUS: Actual Return Estimated Return Amended Return		(See Filing Instructions on Back of Form) TA076-05-0-R Your Sip, Inc. 1101 Seminole Street		Check # 1005 \$ 50.00 06-03-001 003001 \$ 12.50 P	
PERIOD COVERED: 09/21/2005 TO 12/31/2005		Docket No. 060463-TAPODIT DATE		s 3.00 I	
35		667 AUG	G 0 1 200s	Postmark Date 7-	26-04
a		Please Complete Below If Official Mailing A		Initials of Preparer	<u> </u>
<u> </u>	(Name of Company)	(Address)		(City/State)	(Zip)
LINE NO.	WIDE	AREA TOLL SERVICES	FLORIDA (OPERATING F		TE REVENUE
1.	Special Access Services		\$	\$	
2.	Private Line Services				
3	Leased Facilities & Circu	its Services			
4.	Miscellaneous Services	· ·			N. T.
5,	TOTAL REVENUES			s	0
6.	LESS: Amounts Paid to C	Other Telecommunications Companies(1)		<u> </u>	
7.	NET INTRASTATE OF Fee Calculation (Line 5 le	PERATING REVENUE for Regulatory Assessment ass Line 6)		s (
8.	Regulatory Assessment F	ee Due (Multiply Line 7 by 0.0020)			50.00
9.	Penalty for Late Payment	(see "3. Failure to File by Due Date" on back)			12.50
10.	Interest for Late Payment	(see "3. Failure to File by Due Date" on back)			3.00
11.	Extension Payment Fee (s	see "4. Extension " on back)			
12.	TOTAL AMOUNT DU	E (\$50 MINIMUM)		s	5.50 (2)
	(1) These amounts must (2) Regardless of the gro 364.336, Florida State	be intrastate only and must be verifiable (see "2. Fees ss operating revenue of a company, a minimum annuautes.	i" on back). al regulatory assessment fee	of \$50 shall be imposed as pr	ovided in Section
<u> </u>		COMPANY INFORMA	ATION		
o vou lease	telecommunications' facil	. /	1110.1		
	do you lease these facilitie	*			
Address					
·					
iioiimatioi <i>y</i>	is a knue and correct statem	of the above-named company, have read the forego ent. I am aware that pursuant to Section 837.06, Flo	arida Statutor subcover line	uningly maless a false state	belief the above
ic intent to	pusicad a public servant in	the performance of his official duty shall be guilty of	a misdemeanor of the secon	nd degree.	
	(Signature of Company	Official)	(Title)		$\frac{26/09}{\text{(Date)}}$
Eile	EEN Sc	evola Telephone Number	127 173-63	D G Fax Number 127	446-700
(Pro	eparer of Form - Please	e Print Name)	* / / /	1 BA TAUTHOCI YOY	110 101
PSC/CMP 0	001 (Rev. 01/05)	F.E.I. No.			