

**ORIGINAL**

**Pay Telephone Service Provider Regulatory Assessment Fee Return**

Florida Public Service Commission

STATUS:

- Actual Return
- Estimated Return
- Amended Return

(See Filing Instructions on Back of Form)

TG827-06-0-R  
 U S Inter/Com, LLC 070019-TC  
 751 Tarry Town Trail  
 Port Orange, FL 32127-4916  
 DEPOSIT  
 699 JAN 04 2007

**FOR PSC USE ONLY**

Check # 2329

\$ 50.00 06-03-001 003001  
 \$ \_\_\_\_\_ E  
 \$ \_\_\_\_\_ P 06-03-001 004011  
 \$ \_\_\_\_\_ I

Postmark Date 12-29-06  
 Initials of Preparer ET

PERIOD COVERED:  
 01/01/2006 TO 12/31/2006

Records  
 PAULA

Please Complete Below If Official Mailing Address Has Changed

U S Inter/Com LLC (Name of Company) 751 Tarry Town Tr. (Address) Port Orange, FL 32127 (City/State)  (Zip)

LINE NO.	ACCOUNT CLASSIFICATION	AMOUNT
1.	Gross Operating Revenue (Florida)	\$ <u>2846.00</u>
2.	Gross Intrastate Revenue	<u>782.00</u>
CMP 3.	LESS: Amounts Paid to Other Telecommunications Companies (1) (see "2. Fees" on back)	<u>(642.00)</u>
COM 4.	TOTAL REVENUES for Regulatory Assessment Fee Calculation (Line 2 less Line 3)	\$ <u>1460.00</u>
CTR 5.	Regulatory Assessment Fee Due - (Multiply Line 4 by 0.0020)	\$ <u>.028</u>
GCL 6.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)	<u>—</u>
OPC 7.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)	<u>—</u>
RCA 8.	Extension Payment Fee (see "4. Extension" on back)	<u>—</u>
SCR 9.	TOTAL AMOUNT DUE (MINIMUM \$50.00)	\$ <u>50.00</u> (2)
SGA 10.	Number of pay telephones in operation at close of period covered by Kim P. this Return <u>Nonnye</u>	<u>12</u>

(1) These amounts must be intrastate only and must be verifiable (see "2. Fees" on back).  
 (2) Regardless of the gross operating revenue of a company, a minimum annual regulatory assessment fee of \$50 shall be imposed as provided in Section 364.336, Florida Statutes.

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.

[Signature] (Signature of Company Official) OWNER (Title) 12/28/06 (Date)

DAVID E. SINGLETON (Preparer of Form - Please Print Name) Telephone Number (386) 763-0002 (386) 763-0003

F.E.I. No. 383693277 00057 JAN-38

# US INTER/COM



December 28, 2006

Public Service Commission  
State of Florida  
2540 Shumard Oak Boulevard  
Tallahassee, FL 32399-0876

RE: Cancellation of Certificate

Dear Sirs,

Please cancel my certificate for operating pay telephones. I no longer operate any pay telephones in the state of Florida and do not have any intentions of doing so in the future. My certification number is 7888 and my Company ID is %G827-06-0-R. Please make sure it is retroactive to the date on my envelope prior to the end of the year so I don't have to pay the minimum tax again next year.  
Thank you in advance for your attention to this matter.

Sincerely,

A handwritten signature in black ink, appearing to read 'David E. Singleton'.

David E. Singleton, Owner  
U S Inter/Com LLC

751 Tarry Town Trail • Port Orange, FL 32127  
Phone: (386) 763-0002 • Fax: (386) 763-0003  
dsingleton2@cfl.rr.com