



106 E. College Avenue, Suite 710
Tallahassee, FL 32301
Phone 850-222-6304

April 23, 2013

Ann Cole, Commission Clerk
Florida Public Service Commission
2540 Shumard Oak Boulevard
Tallahassee, FL 32399-0850

RECEIVED-FPSC
13 APR 26 AM 8:45
COMMISSION
CLERK

Re: TF859 Verizon Florida LLC 130090-TC

Dear Ms. Cole:

Please accept this letter as notice of termination of Payphone Certificate 4962 for TF859 Verizon Florida LLC. I am enclosing a copy of the Regulatory Assessment Fee Report which was submitted on April 10, 2013.

If you need any additional information, please feel free to contact me at (850) 222-6300.

Sincerely,

Woodrow Simmons
Vice President
Government Affairs
South Area

COM _____
AFD _____
APA _____
ECO _____
ENG _____
GCL _____
IDM _____
TEL _____
CLK NG

DOCUMENT NUMBER-DATE

02188 APR 26 2013

FPSC-COMMISSION CLERK

Pay Telephone Service Provider Regulatory Assessment Fee Return

Florida Public Service Commission
(See Filing Instructions on Back of Form)

STATUS :
 Actual Return
 Estimated Return
 Amended Return

TF859-12-0-R
 Verizon Florida LLC
 106 East College Avenue, Suite 710
 Tallahassee, FL 32301-7721

PERIOD COVERED:
 01/01/2013 to 12/31/2013
FINAL RETURN

Please Complete Below if Official Mailing Address Has Changed

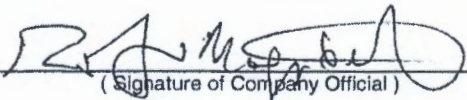
FOR PSC USE ONLY	
Check # _____	
\$ _____	06-03-001 003001
\$ _____ E	
\$ _____ P	06-03-001 004011
\$ _____ I	
Postmark Date _____	
Initials of Preparer _____	

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

Line No.	ACCOUNT CLASSIFICATION	AMOUNT
1.	Gross Operating Revenue (Florida)	\$ 0
2.	Gross Intrastate Revenue	0
3.	Less: Amounts Paid to Other Telecommunications Companies ⁽¹⁾ (see "2 Fees" on back)	0
4.	TOTAL REVENUES for Regulatory Assessment Fee Calculation (Line 2 less Line 3)	\$ 0
5.	Regulatory Assessment Fee Due - (Multiply Line 4 by 0.0016 If more than \$100, enter amount. If less, enter \$100.) ⁽²⁾	100.00
6.	Penalty for Late payment (see "3 Failure to File by Due Date" on back)	0.00
7.	Interest for Late payment (see "3 Failure to File by Due Date" on back)	0.00
8.	Extension Payment Fee (see "4 Extension" on back)	0.00
9.	TOTAL AMOUNT DUE (Add lines 5 through 8)	\$ \$100.00
10.	Number of pay telephones in operation at close of period covered by this Return	0

(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 \$100 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 of Company Official)
Timothy Meehan

 (Preparer of Form - Please Print Name)

Assistant Controller

 (Title)
212-385-0170

 (Telephone Number)

4-10-13

 (Date)
212-285-7140

 (Fax Number)

PSC/RAD 028 (12/11)
 Rule 25-4.0161, F.A.C.

F.E.I. No. 59-0397520

DOCUMENT NUMBER - DATE
02188 APR 26 2013
 FPSC-COMMISSION CLERK