



FLORIDA TELECOMMUNICATIONS RELAY, INC. (FTRI)
MONTHLY SURCHARGE COLLECTION REPORT

FROM: _____ For Period: _____
(Company)

Florida Company Code _____

Date surcharge remitted to fund administrator: _____

_____ Check _____ Wire Transfer

Number of access lines billed @ \$.15 each: _____
(\$0.15 beginning July 1, 2004)

Were any of the access lines prorated the surcharge? _____

- | | |
|--|----------|
| 1. Total surcharge billed | \$ _____ |
| 2. Less surcharge not collected | \$ _____ |
| 3. Plus surcharge collected (attributed to prior period) | \$ _____ |
| 4. Subtotal | \$ _____ |
| 5. Less 1% of surcharge collected | \$ _____ |
| 6. Total amount remitted to fund administrator | \$ _____ |

Prepared by: _____ Phone: _____

Signed by: _____ Email: _____

Approved by: _____ Date: _____

Please remit payment with form to:

Florida Telecommunications Relay, Inc.	Phone: 850-205-1470
Accounts Receivable Department	Fax: 850-656-6099
1820 E Park Avenue Suite 101	Email: cbutler@ftri.org
Tallahassee, FL 32301	