# REQUEST TO ESTABLISH DOCKET

. مسیر بیدریه

27, .	(PLEASE TYPE)
Date September 25, 2000	Docket No. 00/477-TX
1. Division Name/Staff Name <u>Competitive Serv</u>	rices/Isler
2. OPR <u>Competitive Services, sler</u>	
3. OCR Legal Services	
4. Suggested Docket Title <u>Cancellation by Fi</u>	lorida <u>Public Service Commission of Alternative Local Exchange</u>
	p YourTel Telecom Corporation for Violation of Rule 25-4.0161,
F.A.C., Regulatory Assessment Fees; Telecommuni	cations Companies
5.Suggested Docket Mailing List (attach separat	te sheet if necessary)
A. Provide NAMES ONLY for regulated compani as shown in Rule 25-22.104, F.A.C. B. Provide COMPLETE name and address for al	ies or ACRONYMS ONLY regulated industries, Il others. ( <u>Match representatives to clients.</u> )
1. Parties and their representatives (if	f any)
Kevin McGilly	
	· · · · · · · · · · · · · · · · · · ·
2. Interested Persons and their represer	ntatives (if any)
	· · · · · · · · · · · · · · · · · · ·
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6. Check one: Documentation is attached.	
Documentation will be provid	ded with recommendation.
I:\PSC\RAR\\P\ESTDKT.	
PSC/RAR 10 (Revised 01/96)	

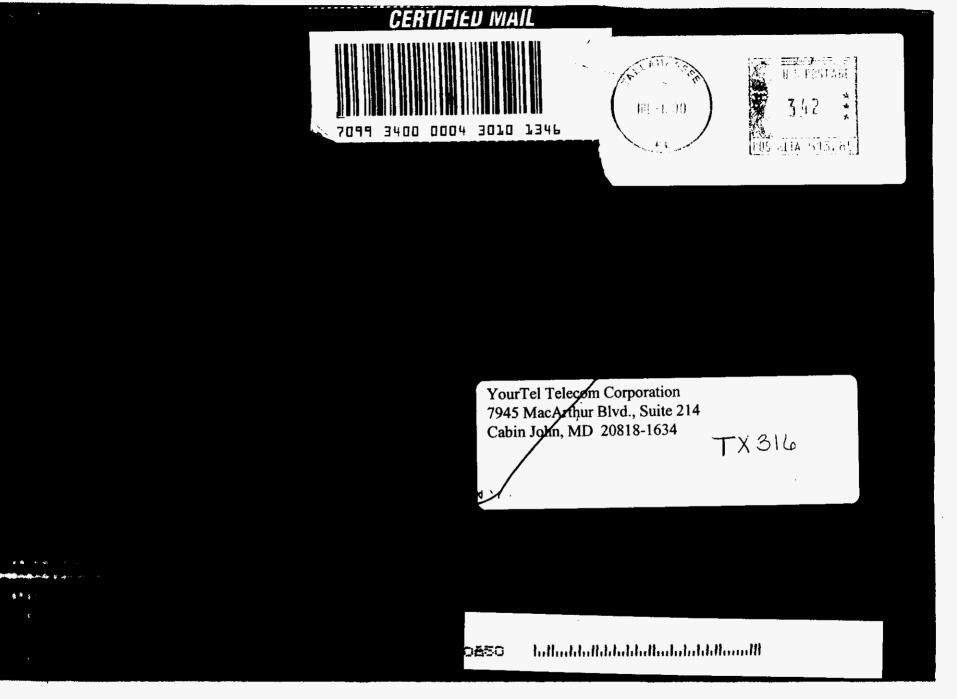
DOCUMENT NUMPER-DATE 12234 SEP 278 EPSC-RECORDS/REPORTING

## Report of Delinquent Regulatory Assessment Fees

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#### As of 09/12/2000

TX316:	YourTel Telecom Corporation 7945 MacArthur Blvd., Suite 214 Cabin John, MD 20818-1634			
Liaison:	Kevin McGilly, VP - Regulatory & External Relations, (301) 229-6925			
Certificates:	5762, Status is active,			
Dates:	Effective Date 08/30/1999 Inactive Date / /			
RAF Owed:	\$ Unknown 01/01/1999 through 12/31/1999			



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A. Received by (Please Print Clearly) B.	
C. Signature X D. Is delivery address different from item 1 If YES, enter delivery address below: 3. Service Type Certified Mail Express Mail Registered Return Receipt Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee)	□ No ÷
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## RAF ACCOUNT

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#### YourTel Telecom Corporation (TX316)

Period Covered: 01/01/1999-12/31/199 Service: ALX Due Date: 01/31/2000 Postmark Date: / / Satisfied: No	9 Actual Return: Received RAF Form: Payment Plan: Extension: RAF Rate:	Yes No No No	Operating Revenue: Interstate Revenue: Net RAF Due: Refund Issued: Fine Paid:	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00
DESCRIPTION	AMOUNT DUE		AMOUNT PAID	AMOUNT OWED
RAF	\$0.00		\$0.00	\$0.00
Penalty	\$0.00		\$0.00	\$0.00
Interest	\$0.00		\$0.00	\$0.00
Extension Fee	\$0.00		\$0.00	\$0.00
Additional Payment	\$0.00		\$0.00	\$0.00
Total	\$0.00		\$0.00	\$0.00