## ORIGINAL Budget Phone MC.

01 NOV 26 AN 9: 36

November 20, 2001

Blanca S. Bayo, Director Division of the Commission Clerk & Administrative Services Florida Public Service Commission 2540 Shumard Oak Boulevard Capital Circle Office Center Tallahassee, Florida 32399-0850

> Re: Docket 011424 Budget Phone, Inc., Cert. #7031

Dear Ms Bayo:

We are in receipt of the Case Assignment and Scheduling Record for the above referenced Docket Number. This docket was assigned due to failing to file a response to the ALEC 2001 Data Request sent to our office this past July. Our investigation revealed that our former mail clerk, Misty Hart, received the delivery but we have been unable to trace the document beyond our Mail Room. I do not believe the original letter got beyond our mail clerk, as I have been unable to locate any response from any source.

We sincerely regret any inconvenience caused by our non-response. Please be assured that we take compliance issues very seriously at Budget Phone and have taken measures to avoid any such reoccurrences. Specifically:

- ALL certified mail is directed to my office and the accounting staff will distribute the mail to the appropriate destination.
- All responses to regulatory bodies are to be coordinated through my office.
- Budget Phone, Inc. no longer employs Ms. Hart.

We completely understand the serious nature of this issue and the authority of the Commission to levy a penalty in this matter. A penalty of \$3,500 seems punitive but could be acceptable to resolve this matter. Any consideration would be appreciated.

APP CAF CMP COM CTR ECR LEG OPC PA! RGO SEC SER OTH Non

Thank you very much for your assistance in this matter.

Respectfully

Comptroller

S

8

DOCUMENT NUMBER-RAT

Budget Phone SHPFNEDA PO Box 19260 Shreveport, LA 71149 UNITED STATES 7000 9264 20,499 1530 Blanca S. Bayo, Onector Florida Public Service Commission NON 20201 2000 Commussion Clerk + admissionati Division of the ( 2540 Shumard MARON сn 2 12 llahappel, FL 32399-0850 2420 32333+0850 01 side? SENDER: I also wish to receive the following services (for an extra fee): Complete items 1 and/or 2 for additional services Complete items 3, 4a, and 4b. e Pant your name and address on the reverse of this form so that we can return this Receipt Service rever 1. 🗌 Addressee's Address card to you Attach this form to the front of the mailpiece, or on the back if space does not 2. 
Restricted Delivery permit. the Write "Return Receipt Requested" on the mailpiece below the article number. The Return Receipt will show to whom the article was delivered and the date 5 delivered 4a. Article Number 3. Article Addressed to: npleted Blanca S, BarD irector Return sion of the Commission 4b. Service Type Kt administrative Services Certified Registered Cler Florida Public Service Carvitis Linegistered Florida Public Service Carvitis Linespiess Mail 2540 Shumard Oa. Blvd Breturn Receipt Tallahassee, FL 32399-0850 7. Date of Delive sing RETURN ADDRESS □ Insured G Return Receipt for Merchandise COD ğ 7. Date of Delivery lahassee. Vou 쑫 8. Addressee's Address (Only if requested and 5. Received By: (Print Name) fee is paid) £ your 6. Signature (Addressee or Agent) ŝ **Domestic Return Receipt** 

PS Form 3811. December 1994

102595-99-B-0223