

**DATE:** March 9, 2009

**TO:** Apryl C. Lynn, Director, Division of Administrative Services

FROM: Timisha J. Brooks, Attorney, Office of the General Counsel

**RE:** Docket No. 080430-TP - Bankruptcy cancellation by Florida Public Service Commission of CLEC Certificate No. 7160 and IXC Registration No. TJ276, issued to CAT Communications International, Inc., effective June 30, 2008.

Request for Permission from Department of Financial Services to Write-Off the Uncollectible RAFs

On June 30, 2008, Docket No. 080430-TP was established to address the cancellation of CAT Communications International, Inc.'s intrastate interexchange telecommunications (IXC) Registration No. TJ276 and competitive local exchange carrier (CLEC) Certificate No. 7160 (TX336) due to bankruptcy of the company.

By Order No. PSC-08-0794-PAA-TP, the Commission granted cancellation of CAT Communications International, Inc.'s IXC registration and CLEC certificate, effective June 30, 2008. The Commission further ordered that the Division of Administrative Services shall be notified that the unpaid Regulatory Assessment Fees, including statutory late payment charges, shall not be sent to the Department of Financial Services for collection, instead permission for the Commission to write-off the uncollectible amount will be requested.

Therefore, staff requests that the Bureau of Administrative Services and Fiscal Services Section take the appropriate steps to seek permission from the Department of Financial Services to write-off the uncollectible amount.

TJB

cc: Paula Isler Karen Belcher

Attachment

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DOCUMENT NUMBER-DATE

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## SIATE OF FLORIDA DEPARTMENT OF FINANCIAL SERVICES BUREAU OF ACCOUNTING DELINQUENT ACCOUNTS RECEIVABLE TRANSMITTAL (PLEASE PRINT OR TYPE) •

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	<u>61 74 1 000331 610100 00 001200</u>									
1.	TJ276	CAT Communicati	ons International,	, Inc.	FEIN # 54-186993	5				
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		Additional Infor	mation, e.g., Date of	Birth, Dr	ivers License Number, etc		······································			
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Additional Information, e.g., Date of Birth, Drivers License Number, etc										
<b>**DEBIT TYPE CODE**</b>										
1. RETURNED CHECK 2. NONPAYMENT FOR STATE GOODS/SERVICES 3. DAMAGE TO STATE PROPERTY										

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# STATE OF FLOKIDA DEPARTMENT OF FINANCIAL SERVICES BUREAU OF ACCOUNTING DELINQUENT ACCOUNTS RECEIVABLE TRANSMITTAL (PLEASE PRINT OR TYPE)

# AGENCY <u>FLORIDA PUBLIC SERVICE COMMISSION</u> DATE <u>March 5, 2009</u> PAGE <u>2</u> OF <u>3</u> CONTACT <u>KAREN BELCHER, DIRECTOR, FISCAL SERVICES</u> PHONE NUMBER <u>850-413-6273</u>

FLAIR ACCOUNT CODE <u>SAMAS ACCOUNT CODES: 61 50 2 573003 610100 00 000300</u> 61 74 1 000331 610100 00 001200

1.	TX336	CAT Communicat	ions Interr	national	l, Inc.	]	FEIN # 54-1869935			
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ana	Home Telephon		-	al Amou	nt	Penalty/I	nterest Amount	0	Total	
SECTION 364.336, FLORIDA STATUTES     2007       Penalty/Interest Authority     Date Debt Incurred							8			
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KEG	ULATORY AS	SESSMENT FEE							<u></u>	
D 1			scription, e.	g., Drive	rs Licens	e, Property	Damage			
Dock	tet No. 080430-					···				
		Additional Infor	mation, e.g.	., Date of	f Birth, D	rivers Lice	nse Number, etc			

### **\*\*DEBIT TYPE CODE\*\***

2. RETURNED CHECK 2. NONPAYMENT FOR STATE GOODS/SERVICES 3. DAMAGE TO STATE PROPERTY 7. COURT ORDER 8. FINES 9. OVERPAYMENT OF STATE FUNDS

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4/01/99

# STATE OF FLOKIDA DEPARTMENT OF FINANCIAL SERVICES BUREAU OF ACCOUNTING DELINQUENT ACCOUNTS RECEIVABLE TRANSMITTAL (PLEASE PRINT OR TYPE)

#### AGENCY FLORIDA PUBLIC SERVICE COMMISSION DATE March 5, 2009 PAGE 3 OF 3 CONTACT KAREN BELCHER, DIRECTOR, FISCAL SERVICES PHONE NUMBER 850-413-6273 FLAIR ACCOUNT CODE SAMAS ACCOUNT CODES: 61 50 2 573003 610100 00 000300 61 74 1 000331 610100 00 001200 CAT Communications International, Inc. FEIN # 54-1869935 1. TX336 Agency Reference # Last Name First M Social Security # DFS use only 3435 Chip Drive, Roanoke, VA 24012-8619 Last Known Address (Include Zip) UNKNOWN (540) 265-2555 \$600 \$60/\$12 \$672 Home Telephone Work Phone Principal Amount Penalty/Interest Amount Total SECTION 364.336, FLORIDA STATUTES 2008 8 Penalty/Interest Authority Date Debt Incurred Debt Type **REGULATORY ASSESSMENT FEE** Debt Description, e.g., Drivers License, Property Damage Docket No. 080430-TP Additional Information, e.g., Date of Birth, Drivers License Number, etc 2. Agency Reference # Last Name First Μ Social Security # DFS use only Last Known Address (Include Zip) Home Telephone Work Phone Principal Amount Penalty/Interest Amount Total Penalty/Interest Authority Date Debt Incurred Debt Type Debt Description, e.g., Drivers License, Property Damage Additional Information, e.g., Date of Birth, Drivers License Number, etc 3. Last Name First Social Security # DFS use only Agency Reference # Μ Last Known Address (Include Zip) Home Telephone Work Phone Principal Amount Penalty/Interest Amount Total Penalty/Interest Authority Date Debt Incurred Debt Type Debt Description, e.g., Drivers License, Property Damage

Additional Information, e.g., Date of Birth, Drivers License Number, etc

### **\*\*DEBIT TYPE CODE\*\***

3. RETURNED CHECK 2. NONPAYMENT FOR STATE GOODS/SERVICES 3. DAMAGE TO STATE PROPERTY 7. COURT ORDER 8. FINES 9. OVERPAYMENT OF STATE FUNDS

4/01/99

Provide as much information as possible for each account or returned check listed. Names should include legal entities as well as individuals. Principal Amount is the original amount of the debt excluding any service charge, penalty, and/or interest. Penalty/Interest Amount is the amount of the service charge, penalty, and/or interest due to date on the delinquent account or returned check. For those accounts subject to interest charges, please indicate the interest rate, method of calculation, and whether the rate is subject to change. Penalty/Interest Authority is the Florida Statutory and/or Florida Administrative Code citation authorizing the service charge, penalty, and/or interest on delinquent accounts and returned checks. Date Incurred is the date the account became delinquent; e.g., the date a check was returned marked NSF, the date an invoice was due to be paid, etc. Debt Type must be indicated using the codes listed at the bottom of the form.

In order to properly pursue a delinquent account the Bureau of Accounting and the collection agency, if used, require pertinent information about the debt and debtor. Such information regarding the debt should be provided in the area titled Debt Description and include the purpose of the original payment by check; type of goods/services provided; what, when, and where State property was damaged; when, why and what court ordered a payment; when and why a fine was issued; for what and when were State funds overpaid; etc. Additional Information about the debtor should include, if available, date of birth, driver license number, credit card type and number, names and addresses of relatives, and any other information that may be used to locate the debtor. The more the Bureau and the collection agency know about the debt and debtor the more likely the recovery of the debt.

To facilitate the transfer of moneys collected, each agency shall designate one FLAIR revenue account code to which all moneys will be transferred by the journal transfer. Agencies will be provided a detailed listing of amounts collected and collection fees charged for each amount. The Department will also provide instructions in accordance with Generally Accepted Accounting Principles on the appropriate method of recording the difference between any moneys collected and the amount of the delinquent account; i.e., treat the difference as cost of collection or provide approval for adjusting the balance of the account pursuant to Section 17.04, Florida Statutes.

Forms and Questions should be addressed to:

Department of Financial Services Bureau of Accounting Room 414 Fletcher Building 200 East Gaines Street Tallahassee, Florida 32399-0354 (850) 410-9365 / SC 210-9365

Revised 4/01/99