REQUEST TO ESTABLISH DOCKET

(PLEASE TYPE)

12 10/25/98 Date

And 10 981325.TC

- 1. Division Name/Staff Name Communications/Islar
- 2. OPR Communications/Isler
- 3. OCR Legal Services

4. Suggested Docket Title Cancellation by Florida Public Service Commission of Pay Telephone Certificate Number 4925 Issued to Dominican Communications Corporation for Violation of Rules 25-4.0161, F.A.C., Regulatory Assessment Fees: Telecommunications Companies

5. Suggested Docket Mailing List (attach separate sheet if necessary)

- A. Provide NAMES ONLY for regulated companies or ACROMYMS ONLY regulated industries, as shown in Rule 25-22.104, F.A.C.
 B. Provide COMPLETE name and address for all others. (<u>Match representatives to clients.</u>)
 - 1. Parties and their representatives (if any)

John A. Ligon

2. Interested Persons and their representatives (if any)

6. Check one:

XX Documentation is attached.

Documentation will be provided with recommendation.

I:\PSC\RAR\WP\ESTDKT.

PSC/RAR 10 (Revised 01/96)

DOCUMENT NUMBER - DATE 11383 OCT 138

FPSC-RECORDS/REPORTING





Public Service Commission

-M-E-M-O-R-A-N-D-U-M-

DATE: October 8th, 1998 TO: Paula Isler FROM: Jackie Knight K RE: RAF non payments - First set of 50

Paula, attached are fifty communication companies (first set) that I am forwarding to your attention who have not paid their RAF for 1997 as of todays date. Interest through the end of October is \$5.00 and Penalty is \$12.50. I have a total on the bottom of each sheet as to what amount a utility owes the Commission. I have not made copies, therefore you will need to keep the data for your files.

1	TF676	21	TF755 -Kelly	41	TF842 -Keller
2	TF679	22	TF757	42	TF846
3	TF680	23	TF763	43	TF848
4	TF682	24	TF768	44	TF850
5	TF688	25	TF769	45	TF856
6	TF692	26	TF774	46	TF862
7	TF698	27	TF775	47	TF870
8	TF699	28	TF777	48	TF882
9	TF700	29	TF799	49	TF888
10	TF701	30	TF802	50	TF891
11	TF718	31	TF807		
12	TF719	32	TF813		
13	TF726	33	TF814-Kelly		
14	TF729	34	TF817		
15	TF736	35	TF820		
16	TF737	36	TF822		
17	TF738	37	TF828		
18	TF742	38	TF836		
19	TF748	39	TF837		
20	TETEE	10	772044		

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Should you have any questions, please let me know. G:\pi3.mpl

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SENDER: • Complete Items 1 and/or 2 for additional services. • Complete Items 3, 4a, and 4b. • Print your name and address on the reverse of this term so that card to you. • Attach this form to the front of the malpiace, or on the back if a parmit. • Write 'Heturn Receipt reliance' on the malpiace below the a • The Return Receipt will show to whom the acticle was delivered delivered.	I also wish to receive the following services (for an extra fee): 1. Addresses's Address 2. Fastricted Delivery Consult postmaster for fee.	
3. Article Addressed to: Tf 820	4e. Article N 4b. Service Register Express Return Re 7. Date of D	Type ed Certified Mail Insured ceipt for Merchandise COD
5. Received By: (Print Name) 6. Signature (Addressee or (confi)	8. Addresses's Address (Only If requested and fee is paid)	