

991052-TC

ORIGINAL

4721 Indian Gap Drive
Orlando, FL 32812

RECEIVED
FLORIDA PUBLIC
SERVICE COMMISSION

99 SEP -7 AM 9:26

MAIL ROOM

August 31, 1999

Florida Public Service Commission
ATTN: Ms. Paula Isler
2540 Shumard Oak Boulevard
Gunter Building
Tallahassee, FL 32399-0850

RECEIVED

SEP 07 1999

CMU

Dear Ms. Isler:

With regard to our phone conversation on this date, I am enclosing copies of my Regulatory Assessment Fee Return and check for payment of same.

Because I most certainly do wish to maintain my license, I am requesting that you negotiate a settlement with the Commission on my behalf, and that we settle for \$100.00 in fines.

Thank you very much for your help and consideration in this matter. I will await your reply.

Sincerely,



Elizabeth J. Gaynor
TF449

- AFA _____
- APP _____
- CAF _____
- CMU _____
- CTR _____
- EAG _____
- LEG _____
- MAS _____
- OPC _____
- PAI _____
- SEC 1
- WAW _____
- OTH _____

DOCUMENT NUMBER-DATE

10823 SEP-8 99

FPSC-RECORDS/REPORTING

Pay Telephone Service Provider Regulatory Assessment Fee Return

Florida Public Service Commission

(See Filing Instructions on Back of Form)

STATUS:

_____ Actual Return
 _____ Estimated Return

TF449
 Elizabeth J. Gaynor
 4721 Indian Gap Drive
 Orlando, FL 32812-8210

PERIOD COVERED:

01/01/1998 TO
 12/31/1998

FOR PSC USE ONLY	
Check#	_____
\$	0603002
	003001
\$	P
	0603002
	004011
\$	I
Postmark Date	_____
Initials of Preparer	_____

Please Complete Below If Official Mailing Address Has Changed

 (Name of Company) (Address) (City/State) (Zip)

LINE NO.	ACCOUNT CLASSIFICATION	AMOUNT
1.	Gross Operating Revenue	\$ <u>970.37</u>
2.	Gross Intrastate Revenue	_____
3.	LESS: Amounts Paid for Services to Local Telephone Companies (Attach Listing)*	<u>(983.14)</u>
4.	TOTAL REVENUES for Regulatory Assessment Fee Calculation (Line 2 less Line 3)	\$ <u>- 0 -</u>
5.	Regulatory Assessment Fee Due - (Multiply Line 4 by 0.0015)	<u>50.00</u>
6.	Penalty for Late Payment	<u>12.50</u>
7.	Interest for Late Payment	<u>3.50</u>
8.	TOTAL AMOUNT DUE	\$ <u>66.00</u>

AS PROVIDED IN SECTION 364.336 FLORIDA STATUTES, THE MINIMUM ANNUAL FEE IS \$50

THIS FORM MUST BE COMPLETED AND RETURNED REGARDLESS OF THE AMOUNT OF REVENUES REPORTED

9. Number of pay telephones in operation at close of period covered by this Return Two

*Each amount paid by a pay telephone company to a telecommunications company providing local service for use of the local network shall be deducted from intrastate revenue for purposes of determining the amount of the regulatory fee assessed the pay telephone company.

I, the undersigned owner/officer of the above-named company, have read the foregoing and declare that to the best of my knowledge and belief the above information is a true and correct statement. I am aware that pursuant to Section 837.06, Florida Statutes, whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his official duty shall be guilty of a misdemeanor of the second degree.

Elizabeth J. Gaynor
 (Signature of Company Official)
ELIZABETH J. GAYNOR
 (Please Print Name)

Owner
 (Title)
8-31-99
 (Date)
 Telephone Number (407) 381-2306 Fax Number _____

F.E.I. No. _____

GREGORY F GAYNOR
ELIZABETH BESA J GAYNOR
4721 Indian Gap Dr
Orlando, Fl 32812

0544

DATE 8-31-99

63-751/631
BRANCH 03014

PAY TO THE
ORDER OF

L. Public Service Comm \$66.00

Sixty six and 00/100

DOLLARS Security features are included on back

FIRST UNION

First Union National Bank

R/T 063107513

FOR TF449

Gregory F Gaynor

0544

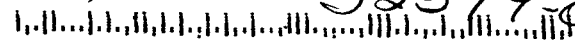
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Leonor
4731 Indian Gap Dr.
Orlando, FL.
32812



Florida Public Service Comm.
Attn: Ms. Paula Isler
2540 Sheppard Oak Blvd.
Center Bldg.
Lalobasse, FL.

32399-7013



32399-0850