ORIGINAL

9 DOCKET NUMBER: \$71245-TC

WITNESS: JAMES JOHNSON

DATE FILED FEBRUARY 5,1998

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FPSC-RECORDS/REPORTING

- 1. DIRECT TESTIMONY OF JAMES JOHNSON
- 2. PLEASE STATE YOUR NAME, POSITION AND BUSINESS ADDRESS.
- MY NAME IS JAMES JOHNSON. MY POSITION IS PRESIDENT. MY BUSINESS ADDRESS
 IS 100 CAMELOT DRIVE, FT. PIERCE, FL. 34946.
- 4. WHAT IS THE PURPOSE OF YOUR TESTIMONY?
- THE PURPOSE OF MY TESTIMONY IS TO EXPLAIN MY POSITION ON THE CANCELLING OF MY PAY TELEPHONE CERTIFICATE NO. 212.
- 6. WOULD YOU PLEASE EXPLAIN THE CIRCUMSTANCES THAT BRINGS THIS MATTER BEFORE THE COMMISSION?
- I AM PROTESTING THE PROPOSED CANCELLATION OF MY PAY PHONE CERTIFICATE
 OR THE IMPOSING OF A \$500.00 FINE FOR THE FOLLOWING REASONS.
- 8. I DID NOT PERSONALLY RECEIVE THE LETTER
- I HAVE PAID MY ASSESSMENTS SINCE '93 AND I WAS NOT NOTIFIED THAT I WAS
- 10. IN ARREARS.
- 11. I AM TOTALLY DISABLED AND UNABLE TO PAY THE FINE.
- I RECEIVE SOCIAL SECURITY DISABILITY. I NEED MY CERTIFICATE AS I INTEND TO INSTALL PAYPHONES TO SUPPLEMENT MY INCOME. I AM UNABLE TO RETURN TO MY PREVIOUS EMPLOYMENT.
- 13. I AM WILLING TO PAY THE ASSESSMENT IN THE AMOUNT OF \$178.00. I HAVE ALREADY PAID \$127.00 AND HAVE SENT IN THE LAST REMAINING PAYMENT OF \$51.00.
- 14. PLEASE ACCEPT MY APOLOGY FOR THIS SITUATION.
- 15. DOES THIS CONCLUDE YOUR TESTIMONY?
- 16. YES.