

Commissioners:
JOE GARCIA, CHAIRMAN
J. TERRY DEASON
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E. LEON JACOBS, JR.
LILA A. JABER



DIVISION OF
TELECOMMUNICATIONS
WALTER D'HAESELEER
DIRECTOR
(850) 413-6600

Public Service Commission

April 6, 2000

Mr. Douglas B. Grosse, President
Proline Communications Corporation
14165 North Main Street
Jacksonville, FL 32218-1708

RE: Docket No. 992011-TC

Dear Mr. Grosse:

On January 20, I talked with Chris Austell. He advised me that he believed the company had paid the 1997 and 1998 past due balances. He asked me to fax information on how to resolve this docket. I faxed the information on the same date. On February 21, the Commission received a check for the past due amount, along with the company's settlement proposal.

The 1999 regulatory assessment fee was due January 31, 2000. On March 13, 2000, I faxed Mr. Austell a note and explained that the 1999 fee, plus accrued penalty and interest charges, must be paid before proceeding with this docket. As of this date, Commission records do not show that the 1999 past due amount has been paid. Before I can recommend that the Commissioners accept your settlement proposal, all past due charges must be paid in full. A 1999 regulatory assessment fee form is enclosed. Please complete and return the form, along with your check.

Unless you respond in writing by April 20, 2000 by paying the past due amount in full, we will consider that you have withdrawn your proposal and are no longer interested in pursuing a settlement to keep your certificate active.

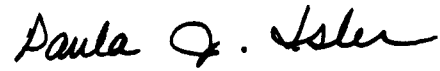
If you have any questions, just let me know. I can be reached at (850) 413-6502-voice, (850) 413-6503-fax, and by internet e-mail at pisler@psc.state.fl.us.

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

DOCUMENT NUMBER - DATE
04339 APR -78
FPSC-RECORDS/REPORTING

Mr. Douglas B. Grosse
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Sincerely,

A handwritten signature in black ink that reads "Paula J. Isler". The signature is written in a cursive style with a large initial "P" and a distinct "J" and "I".

Paula J. Isler, Research Assistant
Bureau of Service Evaluation & Compliance

Enclosure

cc: Docket No. 992011-TC
Division of Legal Services (K. Peña)

Pay Telephone Service Provider Regulatory Assessment Fee Return

STATUS:

- _____ Actual Return
- _____ Estimated Return
- _____ Amended Return

PERIOD COVERED:
01/01/1999 TO
12/31/1999

Florida Public Service Commission

(See Filing Instructions on Back of Form)

TF895
Proline Communications Corporation
14165 North Main Street
Jacksonville, FL 32218-1708

Please Complete Below if Official Mailing Address Has Changed

FOR PSC USE ONLY

Check# _____

\$ _____ 0603002
003001

\$ _____ P
0603002
004011

\$ _____ I

Postmark Date _____

Initials of Preparer _____

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

LINE NO.	ACCOUNT CLASSIFICATION	AMOUNT
1.	Gross Operating Revenue (Florida)	\$ _____
2.	Gross Intrastate Revenue	_____
3.	LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back)	(_____)
4.	TOTAL REVENUES for Regulatory Assessment Fee Calculation (Line 2 less Line 3)	\$ _____
5.	Regulatory Assessment Fee Due - (Multiply Line 4 by 0.0015)	_____
6.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)	_____
7.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)	_____
8.	TOTAL AMOUNT DUE	\$ _____

**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 _____

* These amounts must be intrastate only and must be verifiable.

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.

(Signature of Company Official) (Title) (Date)

(Preparer of Form - Please Print Name)

Telephone Number (_____) Fax Number (_____)

F.E.I. No. _____

FLORIDA PUBLIC SERVICE COMMISSION
Instructions For Filing Regulatory Assessment Fee Return
(Pay Telephone Service Provider)

1. **WHEN TO FILE:** For companies which owed a total of \$10,000 or more of assessment fee for the preceding calendar year, this Regulatory Assessment Fee Return and payment must be filed or postmarked:

*On or before July 30 for the six-month period January 1 through June 30, AND
On or before January 30 for the six-month period July 1 through December 31.*

For companies which owed a total of less than \$10,000 of assessment fee for the preceding calendar year, this Regulatory Assessment Fee Return and payment must be filed or postmarked:

On or before January 30 for the prior twelve-month period January 1 through December 31.

However, if July 30 or January 30 falls on a Saturday, Sunday, or holiday, the Regulatory Assessment Fee may be filed or postmarked on the next business day, without penalty.

2. **FEES:** Each company shall pay 0.0015 of its gross operating revenues derived from intrastate business, as referenced in Rule 25-4.0161(1), F.A.C. Gross Operating Revenues are defined as the total revenues before expenses. Gross Intrastate Operating Revenues are defined as revenues from calls originating and terminating within Florida. Do not deduct any expenses, taxes, or uncollectibles from these amounts other than the amount on Line 3.

On Line 3, deduct any amount paid to another telecommunications company for the use of any telecommunications network (including installation charges) to provide service to its customers. ***Do not deduct any taxes, federal subscriber line charges, interstate long distance access charges, or amounts paid for nonregulated services such as voice mail, inside wire maintenance, or equipment purchases/rentals.*** **DEDUCTIONS MUST BE INTRASTATE ONLY AND MUST BE VERIFIABLE.**

3. **FAILURE TO FILE BY DUE DATE:** Failure to file a return by the established due date will result in a penalty being added to the amount of fee due, 5% for each 30 days or fraction thereof, not to exceed a total penalty of 25% (Line 6). In addition, interest shall be added in the amount of 1% for each 30 days or fraction thereof, not to exceed a total of 12% per year (Line 7). A Regulatory Assessment Fee Return must be completed, signed, and filed even if there are no revenues to report or if the minimum amount is due.

When a company fails to timely file a Regulatory Assessment Fee Return, the Commission has the authority to order the company to pay a penalty and/or cancel the company's certificate. The company will have an opportunity to respond to any proposed Commission action.

4. **EXTENSION:** A request for an extension of time up to 30 days may be made by filing the enclosed *Request for Extension to File Regulatory Assessment Fee Return* form (PSC/ADM-124), two weeks prior to the filing date. When an extension is granted, a charge shall be added to the amount due:

0.75% of the fee to be remitted for an extension of 15 days or less, or
1.5% of the fee for an extension of 16 to 30 days.

In lieu of paying the charges outlined above, a company may file a return and remit payment based upon estimated gross operating revenues. If such return is filed by the normal due date, the company shall be granted a 30-day extension period in which to file and remit the actual fee due without paying the above charges, provided the estimated fee payment remitted is at least 90% of the actual fee due for the period. An automatic 30-day extension to file an actual return may be obtained by checking the "Estimated Return" space in the top left-hand corner on the reverse side.

5. **FEE ADJUSTMENTS:** You will be notified as to the amount and reason for any adjustment. Penalty and interest charges may be applicable to additional amounts owed the Commission by reason of the adjustment. The company may file a written request for a refund of any overpayments. The request should be directed to Fiscal Services at the below-referenced address.
6. **MAILING INSTRUCTIONS:** Please complete this form, make a copy for your records, and return the original in the enclosed preaddressed envelope. Use of this envelope should assure a more accurate and expeditious recording of your payment. **Make your check payable to the Florida Public Service Commission.** If you are unable to use the envelope, please address your remittance as follows:

Florida Public Service Commission 2540 Shumard Oak Boulevard Tallahassee, FL 32399-0850 ATTENTION: Fiscal Services
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7. **ADDITIONAL ASSISTANCE:** If you need additional information or assistance in preparing your Regulatory Assessment Fee Return, please contact the Division of Auditing and Financial Analysis at (850) 413-6480.

For assistance with Item 9, please contact the Division of Communications at (850) 413-6502.

Both divisions may be contacted at the above-referenced address, directing correspondence to the attention of the division.

Minimum Regulatory Assessment Fee (RAF) Payment

If the company owes the minimum amount due for the 1999 RAF, please pay the following:

Postmark Date	RAF Fee	Penalty	Interest	Total Due
03/02/00 to 03/31/00	\$50.00	\$5.00	\$1.00	\$56.00
04/01/00 to 04/30/00	\$50.00	\$7.50	\$1.50	\$59.00
05/01/00 to 05/30/00	\$50.00	\$10.00	\$2.00	\$62.00