

FROM:	Dovie L. Rockette-Gray, Attorney, Office of the General Counsel Drie A/L
RE:	Request for Permission from Department of Financial Services to Write-Off the Penalty Imposed on NEC Prepaid, Inc. Docket No. 041316-TI; Compliance investigation of NEC Prepaid, Inc. for apparent violation of Sections 364.02 and 364.04, Florida Statutes

On November 16, 2004, Docket 041316-TI was established to address NEC Prepaid, Inc.'s violations of Sections 364.02(13) and 364.041(1), Florida Statutes. NEC Prepaid, Inc. failed to remit the penalty levied by Order No. PSC-05-0127-PAA-TI, issued January 31, 2005. The Commission further ordered that NEC Prepaid, Inc. should cease and desist providing intrastate interexchange telecommunications service in Florida. The Commission further ordered that the outstanding penalty be sent to the Department of Financial Services for collection, and, that the Division of the Commission Clerk and Administrative Services should request permission to write-off the uncollectible amount.

Therefore, staff requests that Bureau of Administrative Services/Fiscal Services Section take the appropriate steps to seek permission from the Department of Financial Services to writeoff the uncollectible penalty for NEC Prepaid, Inc.

DRG CMP ____ Cc: Kiwanis Curry COM CTR ____ ECR GCL OPC _____ MMS _____ RCA SCR SEC | OTH _____

DOCUMENT NUMBER-DATE 02804 MAR 22 8

FPSC-COMMISSION CLERK

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

 GENCY_FLORIDA PUBLIC SERVICE COMMISSION_DATE_____PAGE___OF___

 ONTACT_KAREN BELCHER, DIRECTOR, FISCAL SERVICES

 HONE NUMBER_850-413-6273

 LAIR ACCOUNT CODE_SAMAS ACCOUNT CODES:
 61 50 2 573003 610100 00 000300

 61 74 1 000331 610100 00 001200

(305) 914-3360 - Representative Work Phone Principal Amount) and 364.04(1), F.S. ty/Interest Authority Date Description, e.g., D Additional Information, e.g., D	M Social Security # DFS use of Address (Include Zip) \$25,000 \$25 \$25,000 \$25 \$25 t Penalty/Interest Amount T bt Incurred Debt T privers License, Property Damage T te of Birth, Drivers License Number, etc T
Last Known (305) 914-3360 - Representative Work Phone Principal Amoun) and 364.04(1), F.S. ty/Interest Authority Date De Debt Description, e.g., D Additional Information, e.g., D	\$25,000 \$25 t Penalty/Interest Amount T bt Incurred Debt T privers License, Property Damage
Work Phone Principal Amount) and 364.04(1), F.S.	t Penalty/Interest Amount T bt Incurred Debt T privers License, Property Damage
Work Phone Principal Amount) and 364.04(1), F.S.	t Penalty/Interest Amount T bt Incurred Debt T privers License, Property Damage
ty/Interest Authority Date Debt Description, e.g., Debt Description, e.g., Debt Description, e.g., D	rivers License, Property Damage
Debt Description, e.g., 1 Additional Information, e.g., D	rivers License, Property Damage
Additional Information, e.g., D	
	te of Birth, Drivers License Number, etc
e # Last Name First	M Social Security # DFS use on
Last Known	Address (Include Zip)
Work Phone Principal Amoun	t Penalty/Interest Amount To
ty/Interest Authority Date I	ebt Incurred Debt Ty
Debt Description, e.g.,	rivers License, Property Damage
Additional Information, e.g., D	te of Birth, Drivers License Number, etc
e # Last Name First	M Social Security # DFS use onl
Last Known	Address (Include Zip)
Work Phone Principal Amoun	Penalty/Interest Amount Tota
ty/Interest Authority Date D	bt Incurred Debt Type
	rivers License, Property Damage
Work Phone Principal Amoun	e Penalty/Interest Amount T bt Incurred Debt T

****DEBIT TYPE CODE****

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

GENERAL INSTRUCTIONS

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 ·