



**Florida Telecommunications Relay, Inc.  
Monthly TASA Surcharge Collection Report**

Date: \_\_\_\_\_ For Period: \_\_\_\_\_

From: \_\_\_\_\_  
(Company Name)

Florida Company Code: \_\_\_\_\_

Date surcharge remitted to FTRI: \_\_\_\_\_

Remitted by: Check # \_\_\_\_\_ Wire Transfer \_\_\_\_\_

**Number of access lines billed @ \$.11 each:** \_\_\_\_\_  
(\$.11 beginning July 1, 2007)

**Number of VoIP lines billed @ \$.11 each:** \_\_\_\_\_  
(\$.11 beginning July 1, 2007)

Were any of the access lines prorated the surcharge? \_\_\_\_\_

- |  |          |
|--|----------|
| 1. Total surcharge billed                                | \$ _____ |
| 2. Less surcharge not collected                          | \$ _____ |
| 3. Plus surcharge collected (attributed to prior period) | \$ _____ |
| 4. Subtotal  | \$ _____ |
| 5. Less 1% of surcharge collected                        | \$ _____ |
| 6. Total amount remitted to FTRI (fund administrator)    | \$ _____ |

Prepared by: \_\_\_\_\_ Phone: \_\_\_\_\_

Signed by: \_\_\_\_\_ Email: \_\_\_\_\_

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

*Please remit payment with form to:*

|  |  |
|--|--|
| <p><b>Florida Telecommunications Relay, Inc.</b><br/> <b>Accounts Receivable Department</b><br/> <b>1820 E. Park Avenue, Suite 101</b><br/> <b>Tallahassee, FL 32301</b></p> | <p><b>Phone: 850-205-1470 ext. 224</b><br/> <b>Fax: 850-656-6099</b><br/> <b>Email: <a href="mailto:cbutler@ftri.org">cbutler@ftri.org</a></b></p> |
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