

ST. TAMMANY PARISH COMMUNICATIONS DISTRICT

**510 East Boston Street, Suite 200
Covington, Louisiana 70433**

Telephone 985-898-4911

FAX 985-898-4974

E 9-1-1 WIRELESS TELEPHONE SERVICE CHARGE RETURN

Reporting Period _____

Company Name and Address _____

Contact _____ **Telephone** _____ **Fax** _____

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	Month	Subscriber Count	Billed Amount
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

TOTAL _____

Fee @ **\$1.25 per line** = _____

Less Amount not collected _____

Less Adjustments _____

Less 1% Administrative Fee _____

Total Due \$ _____
REMIT THIS AMOUNT

I declare under penalties of perjury that the above return is true, correct and complete to the best of my knowledge and belief.

Preparer's Name (Print) Signature Telephone Date
May 1, 2004