

OFFICIAL FILE
ILLINOIS COMMERCE COMMISSION
FORMAL COMPLAINT

Illinois Commerce Commission
527 E. Capitol Avenue
Springfield, Illinois 62701

For Commission Use Only:
Case: 06-0734

ORIGINAL

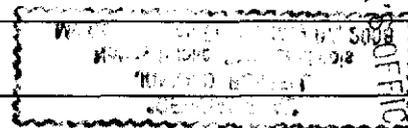
Regarding a complaint by (Person making the complaint): PROGRESSIVE STEEL TREATING (Rick FREEMAN)
Against (Utility name): TDS METROCOM
As to (Reason for complaint) TELEPHONE CABLE SUPPLIED TO TDS THROUGH
AT&T FAILS REPEATEDLY, CAUSING BUSINESS DISRUPTION.
NO MATTER WHICH PHONE SERVICE WE USE, THEY ALL USE THE
in LOVES PARK Illinois. SAME WIRES. WE HAVE
NO WHERE ELSE TO GO.

TO THE ILLINOIS COMMERCE COMMISSION, SPRINGFIELD, ILLINOIS:

My mailing address is 922 LAWN DRIVE, LOVES PARK, IL 61111
The service address that I am complaining about is 922 LAWN DRIVE, LOVES PARK, IL 61111
My home telephone is (815) 877-2571
Between 8:30 A.M. and 5:00 P.M. weekdays, I can be reached at (815) 877-2571
(Full name of utility company) TDS METROCOM / AT&T (respondent) is a public utility and is subject to the provisions of the Illinois Public Utilities Act.

In the space below, list the specific section of the law, Commission rule(s), or utility tariffs that you think is involved with your complaint.

I DON'T KNOW.



Have you contacted the Consumer Services Division of the Illinois Commerce Commission about your complaint? Yes No
Has your complaint filed with that office been closed? Yes No

Please state your complaint briefly. Number each of the paragraphs. Please include time period and dollar amounts involved with your complaint. Use an extra sheet of paper if needed.

TELEPHONE LINES (OUTSIDE "CABLE PAIRS") GO DOWN TOO OFTEN.
PHONES ARE SOMETIMES OUT FOR DAYS. CUSTOMERS CAN NOT REACH US,
CABLE REPAIRS DO NOT LAST. A PERMANENT SOLUTION IS NEEDED.

Please clearly state what you want the Commission to do in this case:

MAKE PHONE COMPANY REPLACE DEFECTIVE CABLE.

Date: November 16, 2006
(Month, day, year)

Complainant's Signature Richard J. Strawn

If an attorney will represent you, please give the attorney's name, address, and telephone number.

You need to file the original with the Commission. Also, provide one copy for each utility complained about (referred to as respondents).

VERIFICATION

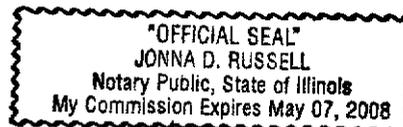
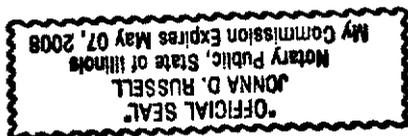
A notary public must witness the completion of this part of the form.

I, Jonna D. Russell, first being duly sworn, say that I have read the above petition and know what it says.
The contents of this petition are true to the best of my knowledge.

(Signature) Jonna D. Russell

Subscribed and sworn/affirmed to before me on (month, day, year) November 16, 2006

Notary Public, Illinois



NOTE: Failure to answer all of the questions on this form may result in this form being returned without processing. If you have questions, please call the counselor in the Consumer Services Division that handled your informal complaint.