

**OFFICIAL FILE**  
**ILLINOIS COMMERCE COMMISSION**  
**NORMAL COMPLAINT**

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

For Commission Use Only:  
Case: 09-0269

**ORIGINAL**

Regarding a complaint by (Person making the complaint): Jessica M Guidi

Against (Utility name): Illinois Consolidated Telephone Company

As to (Reason for complaint) The phone company put two other bills on my bill that I was not responsible for. These bills was from family members that live at the same address that I do.

in Raymond Illinois.

CHIEF CLERK'S OFFICE  
2009 JUN - 31 P 2: 33  
ILLINOIS COMMERCE COMMISSION

**TO THE ILLINOIS COMMERCE COMMISSION, SPRINGFIELD, ILLINOIS:**

My mailing address is P.O. Box 621 Raymond IL 62560

The service address that I am complaining about is 205 N north st lot 20 Raymond IL 62560

My home telephone is (909) 477-1073

Between 8:30 A.M. and 5:00 P.M. weekdays, I can be reached at (909) 477-1073

My e-mail address is \_\_\_\_\_ I will accept documents by electronic means (e-mail)  Yes  No

(Full name of utility company) Illinois Consolidated Telephone Company (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.  
They are charging me with a bill that is not mine.

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.

Charges ~~paid~~ under Tiffany Guidi and under Stacie Guidi should be separate from my bill. I am not responsible for those charges. I'm only responsible for charges (new) that occurred after March, 2009

Please clearly state what you want the Commission to do in this case: Take the other two bills off mine and Reimburse me.

**NOTICE:** If personal information (such as a social security number or a bank account number) is contained in this complaint form or provided later in this proceeding, you should submit both a public copy and a confidential copy of the document. Any personal information contained in the public copy should be obscured or removed from the document prior to its submission to the Chief Clerk's office. Any personal information contained in the confidential copy should remain legible. If personal information is provided in your public copy, be advised that it will be available on the internet through the Commission's e-Docket website. The confidential copy of any filing you make, however, will only be available to Commission employees. If you file both a public and confidential version of a document, clearly mark them as such.

Today's Date: 5/28/09  
(Month, day, year)

Complainant's Signature: Jessica M Guidi

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

When you finish filling out this complaint form, you need to file the original with the Commission's Chief Clerk. When filing the original complaint, be sure to include one copy of the original complaint for each utility company complained about (referred to as respondents).

**VERIFICATION**

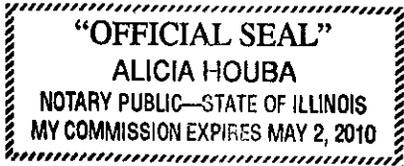
A notary public must witness the completion of this part of the form.

I, Jessica M Guidi, Complainant, 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.

Jessica M Guidi  
Complainant's Signature

Subscribed and sworn/affirmed to before me on (month, day, year) May 28, 2009

Alicia Houba  
Signature, Notary Public, Illinois



(NOTARY SEAL)

**NOTE:** Failure to answer all of the questions on this form may result in this form being returned without processing.