

OFFICIAL FILE
ILLINOIS COMMERCE COMMISSION FORMAL COMPLAINT

For Commission Use Only:
Case: 10-0598

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

ORIGINAL

Regarding a complaint by (Person making the complaint): HAROLD D. SAVITZ

Against (Utility name): COMMONWEALTH EDISON

As to (Reason for complaint): DOUBLE BILLING OF PUBLIC LIGHTS, BILLING FOR THE 4 ADDITIONAL METERS WHICH SERVED NO PURPOSE, STATE & MUNICIPAL TAXES THAT ARE NOW 12%. ADDITIONAL FACTS ON THE BACK.

in HIGHLAND PARK Illinois.

TO THE ILLINOIS COMMERCE COMMISSION, SPRINGFIELD, ILLINOIS:

My mailing address is 1019 DEERFIELD PLACE PARK, IL 60035 HIGHLAND

The service address that I am complaining about is 1003-1199 DEERFIELD PLACE - 60035

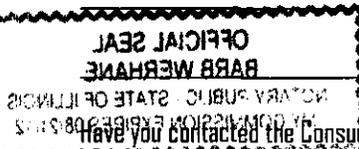
My home telephone is (847) 432-0124

Between 8:30 A.M. and 5:00 P.M. weekdays, I can be reached at [] [] []

My e-mail address is hsavitz@juno.com I will accept documents by electronic means (e-mail) Yes No

(Full name of utility company) COMMONWEALTH EDISON (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.



Have you contacted the Consumer Services Division of the Illinois Commerce Commission about your complaint?

Has your complaint filed with that office been closed?

2010 OCT 18 10 58 AM
ILLINOIS COMMERCE COMMISSION
Yes No
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.

AS THIS SPACE IS NOT LARGE ENOUGH, I WILL ATTACH A TYPED COMPLETE HISTORY OF THE EVENTS & WHEN THEY TOOK PLACE. I CANNOT STATE A FIGURE AS THE RATES AND TAXES PROBABLY FLUCTUATE.

Please clearly state what you want the Commission to do in this case: REIMBURSE THE MANORS OF HIGHLAND PARK FOR ALL OF THE DOUBLE BILLING, TAXES & MISC. EXPENSES AT ONCE.

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: 10/14/2010
(Month, day, year)
10/15/2010

Complainant's Signature: Harold D. Savitz

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, HAROLD D. SAVITZ, 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.

Harold D. Savitz
Complainant's Signature

Subscribed and sworn/affirmed to before me on (month, day, year) Oct 15, 2010

Barb Werhane
Signature, Notary Public, Illinois



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