

For Commission Use Only:  
Case: 11-0714

FORMAL COMPLAINT

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

ILLINOIS COMMERCE  
COMMISSION  
2011 NOV - 31 A 10: 24  
CHIEF CLERK'S OFFICE  
445

Regarding a complaint by (Person making the complaint):

CHERRY PAGE

Against (Utility name):

NICOR GAS COMPANY

As to (Reason for complaint)

TAMPERING FEES + DISCONNECTION OF GAS

NOT HONORING MEDICAL CERTIFICATE - NOT ALLOWING SOME  
ARRANGEMENT TO BE MADE. FOR SOLELY CHARGING ME AND  
NO EXPENDITURE TO MY EX-HUSBAND, WHO CALLED AND TOLD TO  
TRANSFER TO HIM, SO THAT MY GAS COULD BE RESTORED.

in CHICAGO Illinois.

TO THE ILLINOIS COMMERCE COMMISSION, SPRINGFIELD, ILLINOIS:

My complete mailing address is (include City)

3755 S. BANGAMON, STEGER, IL 60475

The service address that I am complaining about is

3045 MORGAN, STEGER, IL 60475

My home telephone is

(708) 833-1600

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

(708) 833-1600

My e-mail address is C.PAGE74@YAHOO.COM

I will accept documents by electronic means (e-mail)  Yes  No

(Full name of utility company) NICOR GAS 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.

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.

NIGOR GAS HAS CHARGED ME WITH TAMPERING FEES FOR SOMETIME BETWEEN 2006-2010, SAYS CHARGED ME CAUSE I WAS OWNER. THERE WAS NO TAMPERING, DID TRANSFER SERVICE SEVERAL TIMES BECAUSE 2008-2009 WENT THRU BAD DIVORCE. ALSO HAS MEDICAL CERTIFICATION ON FILE BUT THEY WON'T HONOR. APPLIED TO ILEETA WHO PAID \$300 ON BILL + I PAID GORD FAITH (75.00) + NIGOR STILL DISCONNECTED MY GAS.

I AM DISABLED WITH NUMEROUS MEDICAL CONDITIONS - THEY HAVE PLEASE CLEARLY STATE WHAT YOU WANT THE COMMISSION TO DO IN THIS CASE: JERAMIZED MY HEALTH.

REMOVE FEES + RECONNECT GAS. OFFER ME A PAYMENT AGREEMENT.

**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 (Social Security Number, Driver's License Number, Medical Records, etc.) 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: 10/31/11  
(Month, day, year)

Complainant's Signature: Cherry Page

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, Cherry Page, 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.

Cherry Page  
Complainant's Signature

Subscribed and sworn/affirmed to before me on (month, day, year) Oct 31 2011

[Signature]  
Signature, Notary Public, Illinois



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

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Cherry Page  
3755 SANGAMON  
STEVENS, IL 60475

INFORMAL COMPL. # 2011-20270

NICOR GAS ASKED ~~THE~~ THEM WITH PROOF OF RESIDENCY FOR 2009, I DID THAT.

MY DIVORCE DECREE STATES THAT ANGELO PAGE, SR. IS RESPONSIBLE FOR HALF OF ALL BILLS PERTAINING TO 3045 MORGAN, STEVEN.

I FEEL THAT NICOR GAS IS GIVING ME A GREAT INJUSTICE. TO LIVE ON A SSA MONTHLY CHECK OF \$9,000. THIS PROPERTY WE NO LONGER OWN - I HAVE LOST EVERYTHING.

IN THIS SOCIETY TO FREEZE A FAMILY IS JUST SO CRUEL. I FEEL LIKE IT'S TELLING ME TO JUST DIE BECAUSE I'M POOR. I NEED HELP!

THANK-YOU

Cherry Page