

OFFICIAL FILE
ILLINOIS COMMERCE COMMISSION **FORMAL COMPLAINT**

For Commission Use Only:

Case: 12-0030

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

ORIGINAL

Regarding a complaint by (Person making the complaint):

SERETHEA MATTHEWS

Against (Utility name):

As to (Reason for complaint):

METER READING AND BILLING ERRORS

in CHICAGO Illinois.

CHIEF CLERK'S OFFICE
2012 JAN 12 1 P 1:00
ILLINOIS COMMERCE COMMISSION

TO THE ILLINOIS COMMERCE COMMISSION, SPRINGFIELD, ILLINOIS:

My complete mailing address is (include City)

5927 W. WASHINGTON BLVD, CHICAGO, IL 60644

The service address that I am complaining about is

5927 W. WASHINGTON BLVD, CHICAGO, IL 60644

My home telephone is

[773] 417-7181

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

[708] 308-8985

My e-mail address is _____

I will accept documents by electronic means (e-mail) Yes

No

(Full name of utility company) COMED
to the provisions of the Illinois Public Utilities Act.

(respondent) is a public utility and is subject

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.

83 ILL ADM CODE

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.

1. I PAID EVERY BILL PRESENTED IN 2009, 2010 AND 2011 IN FULL UNTIL JUNE 2011 WHEN I RECEIVED A \$3,000.00 BILL DUE TO ESTIMATES FOR 2 YEARS.
2. COM ED CUSTOMER SERVICE INFORMED ME THAT THERE WERE WHOLE MODIFICATIONS TO THE BILL AVAILABLE BUT THE REP WOULD NOT (SHE STATED THAT) WOULD NOT MAKE THEM IN THIS CASE FOR REASONS NOT MADE CLEAR TO US.
3. GIVEN ESTIMATED BILLS, DUE TO THEIR FAILURE TO FOLLOW THE INSTRUCTIONS, WE WERE NOT AWARE FOR 2 1/2 YEARS OF OUR USAGE, COM ED FAILED TO ALLOW US TO KNOW AND MANAGE OUR USAGE. WE HAVE CONTINUED TO MAKE PAYMENTS TO LIMIT CHARGES TO US TO WHICH CAN ACCURATELY DOCUMENT FOR EACH MONTH AFTER METER REPAIRS/TESTED, TO ELIMINATE ESTIMATED GROSS CHARGES

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: _____ Complainant's Signature: _____
 (Month, day, year)

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, SERETHEA MATTHEWS, 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.

[Signature]
 Complainant's Signature



Subscribed and sworn/affirmed to before me on (month, day, year) January 9, 2012

[Signature]
 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.