

OFFICIAL FILE
ILLINOIS COMMERCE COMMISSION
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For Commission Use Only:
Case: 12-0163

FORMAL COMPLAINT

2012 MAR - 11 P 2: 54

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

ORIGINAL

CHIEF CLERK'S OFFICE

Regarding a complaint by (Person making the complaint): Teresa Montesdeoca

Against (Utility name): Com ED

As to (Reason for complaint) Charging over \$7000.00 on my bill &

I don't owe that much. I have look at my bills

over & over & don't see how it went up to that

amount. This needs to be reviewed again. I'm certain

that there is an error based on all the paid bills

I have saved.

in Chicago Illinois.

TO THE ILLINOIS COMMERCE COMMISSION, SPRINGFIELD, ILLINOIS:

My complete mailing address is (include City) 1041 N. Karlov, Chgo IL 60651

The service address that I am complaining about is 1041 N. Karlov, Chgo IL 60651

My home telephone is (773) 817-7815 - 773-406-3935

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

My e-mail address is NONE I will accept documents by electronic means (e-mail) Yes No

(Full name of utility company) Com ED (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.

(1) - In Nov 7-11 Statement shows Payment plan balance of \$511.31. Nov 8-11 statement shows amount due of \$7390.82.
(2) I understand that I owed about 800.00 but from 800.00 to 8,000 is ridiculous no matter if its estimated or actual. Reading. There is a flaw here and it needs to be fix. I'm willing to \$1500 which is my estimate that I owe.

Please clearly state what you want the Commission to do in this case: To review this case carefully bill by bill. Even the actual reading only gives me a bill of \$250.00.

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: 2-27-2012 Complainant's Signature: Teresa Montes de Oca
(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, Teresa Montes de Oca, 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.

Teresa Montes de Oca
Complainant's Signature



Subscribed and sworn/affirmed to before me on (month, day, year) 2-27-12

Gladys Ruiz
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.