

OFFICIAL FILE
ILLINOIS COMMERCE COMMISSION
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For Commission Use Only:
Case: 12-0218

FORMAL COMPLAINT

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

ORIGINAL

2012 MAR 22 P 12:30

CHIEF CLERK'S OFFICE

Regarding a complaint by (Person making the complaint):

Against (Utility name):

As to (Reason for complaint)

in Chicago Illinois.

Daryl Chapman and Deborah Chapman
Richard Smith Paul W. R. Owens of West

COM-ED

Wise Tampering, increase billing,
harassment, refused to give accurate amount on all bills,
different departments within Com-ed not communicating,
Constantly having meter taken, different billing cycles,
poor customer service

CASE # 179285

TO THE ILLINOIS COMMERCE COMMISSION, SPRINGFIELD, ILLINOIS:

My complete mailing address is (include City)

The service address that I am complaining about is

My home telephone is

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

My e-mail address is

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

(Full name of utility 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.

Please explain what this means.
SEC 200-170 / REG 10607 Selling my information to other
companies

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.

Billings to dispose of current billing amount, readjust 60% including punitive damages, estimated dates - 9/2010 to present date.

Please clearly state what you want the Commission to do in this case:

To subtract months of inaccurate billing

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: Feb 1, 2013 (Month, day, year)

Complainant's Signature: Nehal Chugan

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, Deborah L Chapman, 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.

Nehal Chugan Complainant's Signature

Subscribed and sworn/affirmed to before me on (month, day, year) 3-13-12

[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.