

OFFICIAL FILE
ILLINOIS COMMERCE COMMISSION **FORMAL COMPLAINT**

For Commission Use Only:
Case: 13-0453

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

ORIGINAL

Regarding a complaint by (Person making the complaint): John Kelly
Against (Utility name): COMMONWEALTH EDISON
As to (Reason for complaint) OPEN CHARGES

CHIEF CLERK'S OFFICE
2013 JUL 29 A 11:03
ILLINOIS COMMERCE COMMISSION
[Signature]

in CALUMET CITY Illinois.

TO THE ILLINOIS COMMERCE COMMISSION, SPRINGFIELD, ILLINOIS:

My complete mailing address is (include City) 13 RIVER OAKS DR, CALUMET CITY IL 60409
The service address that I am complaining about is 13 RIVER OAKS DR, CALUMET CITY IL 60409
My home telephone is (708) 906-8770
Between 8:30 A.M. and 5:00 P.M. weekdays, I can be reached at []
My e-mail address is JKELLY0312@AOL.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? 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.

SEE ATTACHED

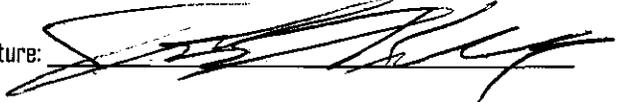
PART OF MY ORIGINAL COMPLAINT WAS SATISFIED, I WAS REFUNDED THE COUNCILOR FOR A PERIOD FROM NOV. 2011 - 3-2013, THIS WAS ESTABLISHED AFTER A MOTOR AUDIT. AFTER REVIEWING A MORE EXTENSIVE REVIEW OF MY BILLING HISTORY, IT APPEARS I HAVE BEEN OVERCHARGED FROM 11-2011 TO 1-2010 AND PROBABLY EARLIER

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

REFUND OVER PAYMENTS

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: 7-25-2013
(Month, day, year)

Complainant's Signature: 

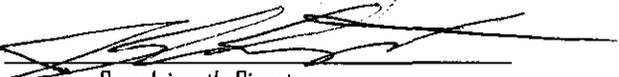
If an attorney will represent you, please give the attorney's name, address, telephone number, and e-mail address.

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).

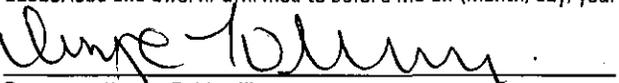
VERIFICATION

A notary public must witness the completion of this part of the form.

I, Jordan Kelley, 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.


Complainant's Signature

Subscribed and sworn/affirmed to before me on (month, day, year) July 25, 2013


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.