

OFFICIAL FILE
ILLINOIS COMMERCE COMMISSION

For Commission Use Only:
Case: 14-0444

ILLINOIS COMMERCE COMMISSION
2014 JUN 30 P 12:42

FORMAL COMPLAINT

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

ORIGINAL

CHIEF CLERK'S OFFICE

Regarding a complaint by (Person making the complaint):

April Hudson

Against (Utility name):

Northern Illinois Gas Company, d/b/a Nicor Gas

As to (Reason for complaint)

A deposit request of the moneys I payed to Nicor Gas by the Chapter 13 I did in 2013. I had been paying this bill, by that an ~~now~~!! Nicor Gas is trying to recharge for something that I don't owe them for.

in Homewood Illinois.

TO THE ILLINOIS COMMERCE COMMISSION, SPRINGFIELD, ILLINOIS:

My complete mailing address is (include City)

18739 Royal Road Homewood, IL 60430

The service address that I am complaining about is

18739 Royal Road Homewood, IL 60430

My home telephone is

(708) 355-1190

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

(708) 355-1190

My e-mail address is

N/A

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

No

(Full name of utility company) Northern Illinois 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.

§3 Ill. Adm. Code 200.

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 should not have to pay bill that I have already payed by my Chapter 13 Case.

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

That my service stays connected with out paying for them.

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: May 31, 2014
(Month, day, year)

Complainant's Signature: [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.

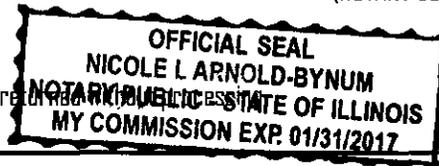
I, April Hudson, Complainant, first being duly sworn, say that I have read the above petition and know what it says. The contents of this petition are true to the best of my knowledge.

April Hudson
Complainant's Signature

Subscribed and sworn/affirmed to before me on (month, day, year) May 31, 2014

Nicole L. Arnold-Bynum 6/13/14
Signature, Notary Public, Illinois

(NOTARY SEAL)



NOTE: Failure to answer all of the questions on this form may result in this form being rejected.