

FORMAL COMPLAINT

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

RECEIVED  
SEP 29 2014  
AMM

Regarding a complaint by (Person making the complaint): TONY RANDLE / VIRIDIAN ENERGY PA, LLC ILLINOIS COMMERCE COMMISSION  
CASE CLERK'S OFFICE WNER

Against (Utility name): VIRIDIAN ENERGY PA, LLC

As to (Reason for complaint) RATE CHARGES THAT DUE TO VIRIDIAN NOTICES

SENT BY MAIL TO KEEP FIXED RATE 5.59 CONVERSION REASON FOR  
CONVERTING MIND BOGBLING NOTICES FOR RENEWAL AT TIME WAS  
4.99 I WAS INFORM NO WAY BESIDES NOTICES BY MAIL THERE NO WAY A PHONE OR  
TEXT WOULD KEEP THIS INCREASE RATE AND MY MONTHLY BECAME TWICE THE (FIXED)  
AND MORE CERTAIN MONTH SOLUTION USED IS NOW THEY HAVE CORRECTED THE PLAN IN  
in Illinois. THEIR SYSTEM COMPENSATION RECOVERY OF HIGHER RATE  
CHARGES AVOIDED AND WHAT I WOULD HAVE PAID MONTHLY IN LESS UTILITY PAYOUTS FOR  
VIRIDIAN'S THERE ARE DIGNITIVE CONVERSATIONS + NOTES I'ANTOLD ARE THERE TO  
TO THE ILLINOIS COMMERCE COMMISSION, SPRINGFIELD, ILLINOIS: REFERENCE MY SERIOUS CONCERNS. TWO SASTE  
IN PLACE NOW IS WHAT PROPOSE BEFORE MADE AWARE

My complete mailing address is (include City) 2515 NOTALMAN AVE. CHGO IL 60647

The service address that I am complaining about is SAME

My home telephone is (773) 489-2754

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

My e-mail address is BETTER PHONE CALL I will accept documents by electronic means (e-mail)  Yes  No

(Full name of utility company) COM-ED ~~XXXXXXXXXX~~ (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.

RENEWAL NOTICES NOT SUFFICIENT FOR PROBLEM THAT EXISTED

TIME OF MY RENEWAL AS OF APRIL 2014 RENEWAL WOULD NOT INCREASE A  
FIXED IT WOULD REMAIN UNLESS YOU PERSONALLY APPROVE DIRECTLY

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? NO SURE, MAYBE  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.) RECOVER THE LOSS MONTHLY COST PAID TO VIRIDIAN IN THE REVOLVING WHICH WOULD NOT OCCURRED IF THEY HAD WHAT IS THE CORRECT PRICES THEY HAVE INSTALLED NOW TO KEEP THE CUSTOMER IN A FIXED RATE UNLESS OFFICIAL FROM CUSTOMER WANT TO CHANGE THE RATE 10/13 AT MY RENEWAL WAS INFORMED TO BE 4.99 2.) RECOVER THE HIGHER PAID FOR THOSE MONTHS FORWARD WITH NO FURTHER NOTICE FROM

Please clearly state what you want the Commission to do in this case: VIRIDIANS COMPLIANCE TEAM. THANKS IN ADVANCE

**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: 9/25/14  
(Month, day, year)

Complainant's Signature: Tony Randle

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

(NOT AT PRESENT)

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, Tony Randle, 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.

Tony Randle  
Complainant's Signature

Subscribed and sworn/affirmed to before me on (month, day, year) 9/25/2014

Signature, Notary Public, Illinois



**NOTE:** Failure to answer all of the questions on this form may result in this form being returned without processing.