

OFFICIAL FILE
ILLINOIS COMMERCE COMMISSION

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

For Commission Use Only:
Case: 150308

ORIGINAL

Regarding a complaint by (Person making the complaint): Khishigsaikhan Batsaikhan

Against (Utility name): Spark Energy Gas, LP

As to (Reason for complaint) 1) Unauthorized change/addition in customers selection of natural gas provider.

2) Unauthorized charges

in Chicago Illinois.

CHIEF CLERK'S OFFICE
2015 APR 27 P 18
ILLINOIS COMMERCE COMMISSION

TO THE ILLINOIS COMMERCE COMMISSION, SPRINGFIELD, ILLINOIS:

My complete mailing address is (include City) 8647 W. Catherine FL 2, Chicago, IL 60656

The service address that I am complaining about is 8647 W. Catherine FL 2, Chicago IL 60656

My home telephone is [312] 523-7789

Between 8:30 A.M. and 5:00 P.M. weekdays, I can be reached at [312] 523-7789

My e-mail address is asahi77@yahoo.com I will accept documents by electronic means (e-mail) Yes No

(Full name of utility company) Spark Energy Gas, LP (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.

815 ILCS 505/2 DDD(d)
220 ILCS 5/19-115(c) & No mutual assent to purported contract.

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 Attachment A.

Please clearly state what you want the Commission to do in this case: See attachment B.
Refund all payments that claimant made to Spark Gas.

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: _____ Complainant's Signature: _____
(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

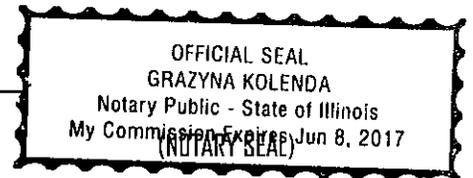
A notary public must witness the completion of this part of the form.

I, Khishigsaikhan Batsaikhan, 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.

B. Khishigsaikhan
Complainant's Signature

Subscribed and sworn/affirmed to before me on (month, day, year) 04/22/2015

Grazyna Kolenda
Signature, Notary Public, Illinois



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