

OFFICIAL FILE
ILLINOIS COMMERCE COMMISSION
ILLINOIS COMMERCE COMMISSION

For Commission Use Only:
Case: 15-0454

FORMAL COMPLAINT

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

ORIGINAL

2015 AUG - 7 P 12: 36
CHIEF CLERK'S OFFICE

GUM
MINISTRY
GUM

Regarding a complaint by (Person making the complaint):

MOUNTAIN OF FIRE & MIRACLES
GLORIA MOJIKÉ-ENERELI

Against (Utility name):

COMMONWEALTH EDISON COMPANY

As to (Reason for complaint)

BILL RECEIVED WAS NOT CONSUMED

The church has been paying its bills through their stay at the said location. There are receipts to prove. Also the church does not receive her bills at the address it was sent because it's always sent in care of a church member.
in CHICAGO Illinois.

TO THE ILLINOIS COMMERCE COMMISSION, SPRINGFIELD, ILLINOIS:

My complete mailing address is (include City)

8545 SOUTH COTTAGE GROVE AVE CHICAGO

The service address that I am complaining about is

1622 W. 79th ST CHICAGO IL 60620

My home telephone is

(773) 392-0545

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

(773) 392-0545

My e-mail address is

Mojik@hotmai-Com

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

(Full name of utility company) COMMONWEALTH EDISON 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.

83-11. Adm. Part 280.50 (a), 280.70 (a)

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. On March 2014, the church received a bill amount of \$ 3,070.78. They never consumed.
2. The Church has been making their payments every month without owing before they moved. We have all receipts to prove.
3. The address on the bill was not the address we usually receive bills while we were at the address.

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

That this amount of \$3,000 be removed (void) and that the church is not held responsible for a bill they did not consume.

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: 7/3/2015
(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

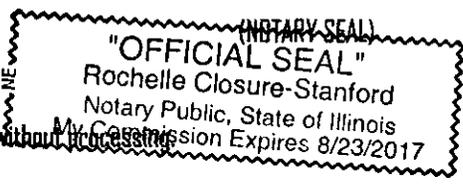
A notary public must witness the completion of this part of the form.

I, GLORIA MOJIKE, 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.

X [Signature]
Complainant's Signature

Subscribed and sworn/affirmed to before me on (month, day, year) 07-03-2015

[Signature]
Signature, Notary Public, Illinois



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