

OFFICIAL FILE
ILLINOIS COMMERCE COMMISSION
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For Commission Use Only:
Case: 15-0466

FORMAL COMPLAINT

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

ORIGINAL

2015 AUG 13 P 12:55

CHIEF CLERK'S OFFICE

Regarding a complaint by (Person making the complaint): Bonnie C. Parkhurst

Against (Utility name): AMEREN of Illinois

As to (Reason for complaint) over-billing by budget PLAN & DUE DATE

in NEW Berlin Illinois.

TO THE ILLINOIS COMMERCE COMMISSION, SPRINGFIELD, ILLINOIS:

My complete mailing address is (include City) 402 East Gibson St; New Berlin, IL 62670

The service address that I am complaining about is SAME AS ABOVE

My home telephone is (217) 488-3310

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

My e-mail address is No Computer or Cell Phone I will accept documents by electronic means (e-mail) Yes No

(Full name of utility company) AMEREN of Illinois (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.

I had a complaint filed with the Commission which one it is! But, I'm sure there is one + you know

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.

DUE TO RISING COSTS OF TAXES & INSURANCE; I'M NOT ABLE TO PAY EXTRA FOR SERVICES TO AMEREN. THEY HAVE ME DOWN EA MO FOR \$250⁰⁰ EXTRA EA. MO. WHICH IS NEEDED FOR MY OTHER EXPENSES, I ASKED THEM WHY - THEY CHANGED DUE DATE FROM THE 18th TO THE FIRST OF MO. REPLY WAS BECAUSE I WASN'T PAYING THE EXTRA 250 EA MO!! I TOLD THEM I COULDN'T DO IT & THEY CONTINUED TO BILL ME W/ THE "250" ON THE 1ST OF THE MO.!! AS I AM 75 YRS OLD, ON SS (WHICH COMES THE 3RD WED OF EA MO

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

Get rid of the Budget Billing, + ~~put~~ put the date back to 18th

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: August 10, 2015
(Month, day, year)

Complainant's Signature: Bonnie C. Parkhurst

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

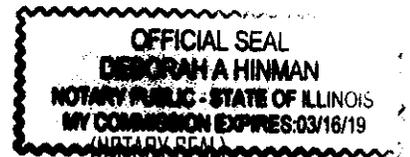
A notary public must witness the completion of this part of the form.

I, Bonnie C. Parkhurst, 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.

Bonnie C. Parkhurst
Complainant's Signature

Subscribed and sworn/affirmed to before me on (month, day, year) August 11, 2015

Deborah A. Hinman
Signature, Notary Public, Illinois



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