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ILLINOIS COMMERCE COMMISSION

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2015 OCT 19 P 12:55

CHIEF CLERK'S OFFICE

FORMAL COMPLAINT

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

For Commission Use Only:
Case: 15-0575

ORIGINAL

Regarding a complaint by (Person making the complaint): BRIAN P. WELLEN

Against (Utility name): COMED

As to (Reason for complaint) MY USAGE FROM NOV. 2014 THROUGH ~~A~~APRIL 2015 WAS SIGNIFICANTLY HIGHER THAN THE PREVIOUS YEAR. A NEW METER WAS INSTALLED IN MAY OF 2015 AND USAGE RETURNED TO NORMAL. NO ADDITIONAL APPLIANCES OR ANY OTHER ITEMS WERE USED THAT WOULD EXPLAIN THE ADDITIONAL USAGE

in MANHATTAN Illinois.

TO THE ILLINOIS COMMERCE COMMISSION, SPRINGFIELD, ILLINOIS:

My complete mailing address is (include City) 25059 CASHEL BAY RD. MANHATTAN, IL 60442

The service address that I am complaining about is 25059 CASHEL BAY RD. MANHATTAN, IL 60442

My home telephone is [815] 478-7323

Between 8:30 A.M. and 5:00 P.M. weekdays, I can be reached at [815] 478-7323

My e-mail address is bpwellen@aol.com I will accept documents by electronic means (e-mail) ☐ Yes ☑ No

(Full name of utility company) COMED AN EXELON 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.

N/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.

USAGE FROM 10-14 THROUGH 4-15 ARE SIGNIFICANTLY HIGHER THAN THIS PREVIOUS YEAR. BECAUSE OF AN ERROR IN JAN OF 2014 THAT COMED CORRECTED, AND ACCEPTED RESPONSIBILITY FOR, AND DUE TO USAGE RATE CHANGES I AM UNABLE TO PUT A DOLLAR AMOUNT ON THIS DISPUTE. I WOULD REQUIRE A SEARCH OF MY BILLING HISTORY AND A SCHEDULE OF RATE CHANGES TO DETERMINE THIS AMOUNT.

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

MEDIATE THE AMOUNT OWED ON THIS ACCOUNT.

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: OCTOBER 15, 2015 (Month, day, year) Complainant's Signature: BPW

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, BRIAN P. WELLEN, 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.

BPW

Complainant's Signature

Subscribed and sworn/affirmed to before me on (month, day, year) October 15, 2015.

Karleen Kendall

Signature, Notary Public, Illinois

KARLEEN J. KENDALL
OFFICIAL SEAL
Notary Public - State of Illinois
My Commission Expires
May 26, 2018

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

Icc207/07