

OFFICIAL FILE
ILLINOIS COMMERCE COMMISSION

ORIGINAL

For Commission Use Only:
Case: 16-0479

FORMAL COMPLAINT

Illinois Commerce Commission
527 E. Capitol Avenue
Springfield, Illinois 62701
OCT 11 P 1:34
CLERK'S OFFICE

Regarding a complaint by (Person making the complaint): Gateway Newstand
Against (Utility name): Commonwealth Edison Company
As to (Reason for complaint) Over Bill and Deposit.

in CHICAGO Illinois.

TO THE ILLINOIS COMMERCE COMMISSION, SPRINGFIELD, ILLINOIS:

My complete mailing address is (include City) 33 N. Dearborn St. Chicago, IL 60602

The service address that I am complaining about is 33 N. Dearborn St. Chicago, IL 60602

My home telephone is (773) 510-2726

Between 8:30 A.M. and 5:00 P.M. weekdays, I can be reached at (312) 345-4866

My e-mail address is shikha4982@yahoo.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.

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 Dec 2015 to Jan 2016 Monthly Comed Bill \$ 108.02 and was paid.
- ② On Jan 2016 to Feb 2016 Monthly Comed Bill \$ 114.81 and was paid.
- ③ And again Jan 2016 to Feb 2016 and Feb 2016 to March 2016 2 month Comed Bill was \$ 820.34 and was overcharged. I am disputing the overcharges approximately \$ 590.00 and the late charges \$ 45.41 and deposit \$ 105.00 July Bill started. Please clearly state what you want the Commission to do in this case: All my Comed monthly payment has been for approximately \$ 110.00 every month.

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: 08/17/16
(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, DILEP PARIKH, 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.

[Signature]
Complainant's Signature

Subscribed and sworn/affirmed to before me on (month, day, year) August 17, 2016

Melissa A Cross
Signature, Notary Public, Illinois



(NOTARY SEAL)

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