OFFICIAL FILE
ILLINOIS COMMERCE COMMISSION

ORIGINAL

For Commission Use Only:
Case 16-0484

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OCT 17 2016
ILLINOIS COMMERCE COMMISSION
CHIEF CLERK'S OFFICE

FORMAL COMPLAINT

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

Regarding a complaint by (Person making the complaint): RE: INFORMAL Complaint #: 2016-05399 Utility of Record: PEOPLE GAS, ETC.

Against (Utility name): PEOPLE GAS COMPANY

As to (Reason for complaint) It does appear Allegedly that "PEOPLE GAS COMPANY" HAVE OVERBILLED / OVER Charged ALPHONSO THREADGILL; ACCT-HOLDER OF ACCT#: 9-5000-6094-1957 SINCE 1972-2016. THEREFORE, ALPHONSO THREADGILL; WHO do RECEIVE PEOPLE GAS SERVICE at 8052 SOUTH HERMITAGE, CHICAGO, IL do SEEK "REIMBURSEMENT" in CHICAGO Illinois, For the Said; in Full / PAIN & SUFFERINGS / ALL Legal RIGHTS Violated by PEOPLE GAS upon ALPHONSO THREADGILL.

TO THE ILLINOIS COMMERCE COMMISSION, SPRINGFIELD, ILLINOIS:

My complete mailing address is (include City) 8052 South Hermitage, CHICAGO, IL 6066

The service address that I am complaining about is SAME AS Edited Above

My home telephone is [773] - 483 - 2499

Between 8:30 A.M. and 5:00 P.M. weekdays, I can be reached at [773] - 483 - 2499

My e-mail address is N/A

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

(Full name of utility company) PEOPLE GAS 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.
280.15, 280.30g, 280.30h, 280.35E, 280.35f, 280.50, 280.60, 280.80F, 280.80K 1-4, 280.110; Et. Seq., Etc.

Have you contacted the Consumer Services Division of the Illinois Commerce Commission about your complaint? ☒ Yes ☐ No → Initial complaint

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.

The Complainant; Alphonso THREADGill; do Feel the THE RESPONDENT; PEOPLE GAS Company have A HISTORICAL PATTERN IN PLAY UPON him OF over-Billing / over-Charging Since 1972-2016. THE Complainant; is A PERSON Z A DISABILITY / SENIOR (83 yrs o / LOW-INCOME Black Male who is COVERED under the ILLINOIS STATES U.S. FEDERAL DISABILITIES LAW & RESPONDENTS have violated the Sai

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

1.) Prompt PEOPLE GAS Co.; to Produce Initial Itemized payments by Complainar
2.) Produce the FOIA documents requested on the date of August 15th, 2016 & s

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 14th, 2016 (Month, day, year) Complainant's Signature: Alphonso Threadgill

If an attorney will represent you, please give the attorney's name, address, telephone number, and e-mail address.

Charles E. Smith; Legal Advisor / biological cousin of Acct. Holder
8052 South Hermitage, CHICAGO, IL 60620 / Tele. #(773)-483-2499

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, ALPHONSO THREADGILL, 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.

Alphonso Threadgill
Complainant's Signature

OFFICIAL SEAL
ANNE M. WALUSEK
Notary Public - State of Illinois
My Commission Expires 6/10/2020

Subscribed and sworn/affirmed to before me on (month, day, year) 10/14/16

Anne M Walusek
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.