

OFFICIAL FILE
ILLINOIS COMMERCE COMMISSION

FORMAL COMPLAINT

ORIGINAL

ILLINOIS COMMERCE COMMISSION

Illinois Commerce Commission
527 E. Capitol Avenue
Post Office Box 4905
Springfield, Illinois 62708

MAY 10 10 29 AM '02

CHIEF CLERK'S OFFICE

Regarding a complaint

For Commission use only.

by JAMES BAKER
(Person making the complaint)

Case 02-0308

against Peoples Gas Light and Coke Com.
(Utility name)

File _____

as to 7206 S. CRANDON AVE. # 05000 0373 8017

LACK OF CONSIDERATION
(Reason for complaint)

in CHICAGO Illinois.

TO THE ILLINOIS COMMERCE COMMISSION, SPRINGFIELD, ILLINOIS:

My mailing address is 7206 South Crandon Chicago, IL 60649

The service address that I am complaining about is 7206 South Crandon

My home telephone number is 773-667-7632

Between 8:30 A.M. and 5:00 P.M. weekdays I can be reached 773-667-7632

Peoples Gas Light and Coke Co. (respondent) is a public utility and is subject to the provisions of the Illinois Public Utilities Act.
(Full name of utility company)

In the space below, list the specific section of the law, Commission rule(s), or utility tariffs which you think are involved with your complaint.

I AM A CANCER PATIENT WHO NEEDS
HEAT IN MY TREATMENT AND COMPANY REFUSED
ANNUAL DOWN PAYMENT TO CONTINUE SERVICE SO I CAN PAY
CURRENT BILL AND INSTALLMENT CAUSED BY MY ILLNESS UNABLE TO WORK

Have you contacted the Consumer Affairs Division of the Illinois Commerce Commission about this 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 any specific time period and dollar amounts involved with your complaint. Use an extra sheet of paper, if needed.

1. My Bill is in excess of \$ 5,000
- 2 I CAN pay current Bill Plus owed amount divided into 12 payments.
- 3 Company refuses to accept the offer

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

negotiate a payment plan that does not require such a large down payment. my monthly \$5 to \$267.00

Date: May 2, 2002
(month, day, and year)

Complainant's signature James Baker

If you will be represented by an attorney, please give the attorney's name, address, and telephone number.

You need to file the original and three copies of this form with the Commission and also provide the Commission with one copy for each utility complained about (referred to as respondents).

VERIFICATION

A notary public must watch you fill out this part of the form.

I, JAMES BAKER, 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.

James Baker
(Signature)

Subscribed and sworn/affirmed to before me this 3rd day of May 2002

[Signature]
Notary Public, Illinois

NOTE:

Failure to answer all of the questions on this form may result in this form being returned to you without processing. If you have questions, please call the counselor in the Consumer Affairs Division that handled your informal complaint.