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2004 MAR 31 AM 12:54

SECRETARY'S BUREAU

R-00049157 CO105

Formal Complaint Form  
Pennsylvania Public Utility Commission

ORIGINAL

Please Print: (you may also type your answers directly onto the form as it appears on your screen)

1. Your name, mailing address and telephone number:

Name MATTHEW SAPOWSKI

Street/P.O.Box 4524 TUDOR ST. Apt # \_\_\_\_\_

City PHILA. State PA. Zip 19136

County PHILA. Area Code/Home Phone 215-624-0449  
Area Code/Work Phone \_\_\_\_\_

2. Name of company your complaint concerns: PGW

3. What is your complaint? (Use additional paper if need more space).

CONTINUED RISING COSTS AND NOW TO PAY OTHER  
PEOPLES BILLS, PLEASE DON'T ALLOW THIS TO HAPPEN.  
I AM 82 YRS. OLD AND ON FIXED INCOME.

4. What do you want the Public Utility Commission to do about your complaint?  
(Use additional paper if need more space).

PLEASE DON'T ALLOW RATE INCREASES FOR THOSE  
WHO DON'T PAY THEIR BILLS...  
PGW ALSO HAS A PLANT TO PRODUCE GAS BUT DON'T  
USE IT. THIS WOULD OFFSET OTHER COSTS (PURCHASING COSTS)

5. You must sign and date your complaint below.

The information I have placed on this form is true and correct to the best of my knowledge. I understand that I could be punished under Pennsylvania State Law if I purposely give false information.

Matthew Sapowski  
Signature

3/27/04  
Date

Continued on next page

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APR 08 2004

7

6. If you are represented by a lawyer you must provide your lawyer's name, address and telephone number.

Lawyer's Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Area Code/Phone Number \_\_\_\_\_

**Mail to:**  
Secretary  
Pennsylvania Public Utility Commission  
P. O. Box 3265  
Harrisburg, PA 17105-3265

**For more information, please contact the Secretary's Bureau at 717-772-7777.**

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 7, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0105

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Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by MATTHEW SADOWSKI

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

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R-0004915700106

2004 MAR 31 AM 10:52

Formal Complaint Form  
Pennsylvania Public Utility Commission

ORIGINAL

SECRETARY'S BUREAU

Please Print: (you may also type your answers directly onto the form as it appears on your screen)

1. Your name, mailing address and telephone number:

Name Patti Swann Coyle

Street/P.O.Box 3440 Chalfont Dr Apt #

City Phila State PA Zip 19154

County Phila Area Code/Home Phone 215 824-3761  
Area Code/Work Phone 215 737-4002

2. Name of company your complaint concerns: PGW

3. What is your complaint? (Use additional paper if need more space).

gas price increase. I am a single parent  
& am constantly battling for child support.  
I cannot afford to pay for other people's bills.  
I struggle to make ends meet now.

4. What do you want the Public Utility Commission to do about your complaint?  
(Use additional paper if need more space).

Do not increase current prices.

5. You must sign and date your complaint below.

The information I have placed on this form is true and correct to the best of my knowledge. I understand that I could be punished under Pennsylvania State Law if I purposely give false information.

Patti Coyle  
Signature

3/25/04  
Date

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APR 08 2004

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82

6. If you are represented by a lawyer you must provide your lawyer's name, address and telephone number.

Lawyer's Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Area Code/Phone Number \_\_\_\_\_

**Mail to:**

Secretary  
Pennsylvania Public Utility Commission  
P. O. Box 3265  
Harrisburg, PA 17105-3265

**For more information, please contact the Secretary's Bureau at 717-772-7777.**

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 7, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0106

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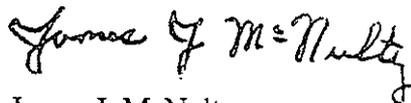
Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by PATTI SWANN COYLE.

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

db's

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APR 08 2004

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FOLDER**

ORIGINAL

R-00049157C0107

RECEIVED

2004 MAR 31 AM 10:53

Formal Complaint Form  
Pennsylvania Public Utility Commission SECRETARY'S BUREAU

Please Print: (you may also type your answers directly onto the form as it appears on your screen)

1. Your name, mailing address and telephone number:

Name THOMAS CLEMENTS

Street/P.O.Box 4710 HARTEL AVE Apt # \_\_\_\_\_

City PHILA State PA Zip 19136

County PHILA Area Code/Home Phone 215-331-2492  
Area Code/Work Phone \_\_\_\_\_

2. Name of company your complaint concerns: PCW

3. What is your complaint? (Use additional paper if need more space).

I'M TIRED OF HAVING TO PAY SOMEONE ELSE'S BILLS - IF I HAVE TO PAY - WHY NOT THEM

4. What do you want the Public Utility Commission to do about your complaint? (Use additional paper if need more space).

SHUT THEIR SERVICE OFF  
YOU WOULD SHUT OURS OFF

5. You must sign and date your complaint below.

The information I have placed on this form is true and correct to the best of my knowledge. I understand that I could be punished under Pennsylvania State Law if I purposely give false information.

Thomas J. Clements  
Signature

3-29-04  
Date

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APR 08 2004

6. If you are represented by a lawyer you must provide your lawyer's name, address and telephone number.

Lawyer's Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Area Code/Phone Number \_\_\_\_\_

**Mail to:**  
Secretary  
Pennsylvania Public Utility Commission  
P. O. Box 3265  
Harrisburg, PA 17105-3265

**For more information, please contact the Secretary's Bureau at 717-772-7777.**

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 7, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0107

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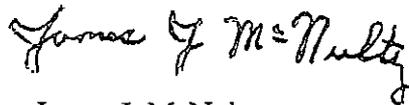
Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by THOMAS CLEMENTS.

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

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ORIGINAL

00049157C0108

Formal Complaint Form  
Pennsylvania Public Utility Commission

RECEIVED  
2004 MAR 31 AM 10:08  
SECRETARY'S BUREAU

Please Print: (you may also type your answers directly onto the form as it appears on your screen)

1. Your name, mailing address and telephone number:

Name JAMES A MAYER

Street/P.O.Box 3414 LANSING ST Apt #

City PHILA State PA Zip 19136-3034

County PHILA Area Code/Home Phone 215-624-0506  
Area Code/Work Phone

2. Name of company your complaint concerns: PGW

3. What is your complaint? (Use additional paper if need more space).

I AM AGAINST ANY INCREASE OF MY GAS BILL BECAUSE THEY ARE NOT ABLE TO COLLECT FROM PEOPLE WHO JUST REFUSE TO PAID THEIR BILL, PGW MUST FIND A WAY THAT EVERY ONE IS RESPONSIBLE FOR OWN BILL, NOT PASS IT ON TO HONEST PEOPLE WHO PAID THEIR BILL EVERY MONTH.

4. What do you want the Public Utility Commission to do about your complaint? (Use additional paper if need more space).

I WANT PGW TO FIND A WAY TO COLLECT MONEY DUE, IF THEY CANNOT OR WILL NOT THEN THAT SHOULD SELL THE BUSINESS TO SOMEBODY WHO WILL.

5. You must sign and date your complaint below.

The information I have placed on this form is true and correct to the best of my knowledge. I understand that I could be punished under Pennsylvania State Law if I purposely give false information.

James A Mayer  
Signature

MAR 28, 04  
Date

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APR 08 2004

108

6. If you are represented by a lawyer you must provide your lawyer's name, address and telephone number.

Lawyer's Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Area Code/Phone Number \_\_\_\_\_

**Mail to:**  
Secretary  
Pennsylvania Public Utility Commission  
P. O. Box 3265  
Harrisburg, PA 17105-3265

**For more information, please contact the Secretary's Bureau at 717-772-7777.**

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 7, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0108

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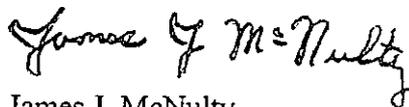
Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by JAMES A MAYER.

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

db's

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APR 08 2004

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2004 MAR 31 AM 10:51

SECRETARY'S BUREAU

R=00049157 C0109

ORIGINAL

Formal Complaint Form  
Pennsylvania Public Utility Commission

Please print: (you may also type your answers directly onto the form as it appears on your screen)

Your name, mailing address and telephone number:

Name DOLores R. DOUGHERTY

Street/P.O.Box 4248 BLEIGH AVE. Apt # \_\_\_\_\_

City PHILA. DELPHIA State PA Zip 19136-3913

County PHILA Area Code/Home Phone (215) 338-5572  
Area Code/Work Phone RETIRED

2. Name of company your complaint concerns: PHILA. GAS WORKS

3. What is your complaint? (Use additional paper if need more space).  
BEING CHARGED MORE FOR PAYING MY BILLS ON TIME. IF ALL THE PAYING CUSTOMERS GOT TOGETHER AND REFUSED TO PAY, WHAT WOULD THE GAS.COMANY DO THEN?

4. What do you want the Public Utility Commission to do about your complaint?  
(Use additional paper if need more space). STOP CHARGING CUSTOMERS WHO PAY THEIR BILLS ON TIME FOR THE PEOPLE WHO DON'T PAY. TURN OFF THEIR GAS IF THEY REFUSE TO PAY - AT LEAST HALF OR THREE QUARTERS OF THEIR BILLS.

5. You must sign and date your complaint below.

The information I have placed on this form is true and correct to the best of my knowledge. I understand that I could be punished under Pennsylvania State Law if I purposely give false information.

Dolores R. Dougherty  
Signature

03/28/04  
Date

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APR 08 2004

83

6. If you are represented by a lawyer you must provide your lawyer's name, address and telephone number.

Lawyer's Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Area Code/Phone Number \_\_\_\_\_

**Mail to:**  
Secretary  
Pennsylvania Public Utility Commission  
P. O. Box 3265  
Harrisburg, PA 17105-3265

**For more information, please contact the Secretary's Bureau at 717-772-7777.**

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 7, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0109

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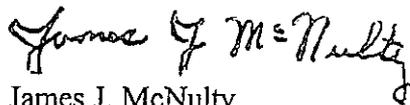
Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by DOLORES R DOUGHERTY.

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

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APR 08 2004

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FOLDER**

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ORIGINAL

R=00049157 CD110

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2004 MAR 31 AM 10:50

Formal Complaint Form  
Pennsylvania Public Utility Commission

SECRETARY'S BUREAU

Please Print: (you may also type your answers directly onto the form as it appears on your screen)

1. Your name, mailing address and telephone number:

Name GERALD P. JOHNSON

Street/P.O.Box 4225 ALDENE STREET Apt # \_\_\_\_\_

City PHILADELPHIA State PA Zip 19136

County PHILADELPHIA Area Code/Home Phone (215) 338-5818  
Area Code/Work Phone \_\_\_\_\_

2. Name of company your complaint concerns: PHILADELPHIA GAS WORKS

3. What is your complaint? (Use additional paper if need more space).

I UNDERSTAND THAT THE GAS CO. WANTS TO ADD A 25% SURCHARGE TO THE BILLS OF PAYING CUSTOMERS TO OFFSET LOSSES FROM NONPAYING CUSTOMERS, WHY SHOULD THOSE OF US WHO ARE DOING THE RIGHT THING BE PENALIZED?

4. What do you want the Public Utility Commission to do about your complaint? (Use additional paper if need more space).

PLEASE DO NOT LET THIS 25% RAISE GO FORWARD.

5. You must sign and date your complaint below.

The information I have placed on this form is true and correct to the best of my knowledge. I understand that I could be punished under Pennsylvania State Law if I purposely give false information.

Gerald P. Johnson  
Signature

3-29-04  
Date

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FOLDER

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APR 08 2004

84

6. If you are represented by a lawyer you must provide your lawyer's name, address and telephone number.

Lawyer's Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Area Code/Phone Number \_\_\_\_\_

**Mail to:**

Secretary

Pennsylvania Public Utility Commission

P. O. Box 3265

Harrisburg, PA 17105-3265

**For more information, please contact the Secretary's Bureau at 717-772-7777.**

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 7, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0110

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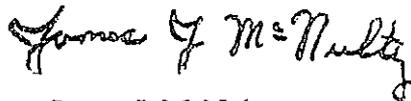
Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by GERALD P JOHNSON

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

db's

**DOCKETED**  
APR 08 2004

**DOCUMENT  
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2004 MAR 31 AM 10:26  
SECRETARY'S BUREAU

R-00049157 COM

Formal Complaint Form  
Pennsylvania Public Utility Commission

ORIGINAL

Please Print: (you may also type your answers directly onto the form as it appears on your screen)

1. Your name, mailing address and telephone number:

Name LUIS DASILVA

Street/P.O.Box 5606 RIDGE AVE Apt # \_\_\_\_\_

City PHILADELPHIA State PA Zip 19128

County ROXBOROUGH Area Code/Home Phone 267, 205, 5847  
Area Code/Work Phone \_\_\_\_\_

2. Name of company your complaint concerns: PHILADELPHIA GAS WORKS (PGW)

3. What is your complaint? (Use additional paper if need more space).

I AM AGAINST ~~THE~~ THE DOLLAR INCREASE BEING CHARGED TO ALL CUSTOMERS FOR RECOVERING UNCOLLECTED BILLINGS. THAT HAS NOTHING TO DO WITH ME.

4. What do you want the Public Utility Commission to do about your complaint? (Use additional paper if need more space).

ACT.

5. You must sign and date your complaint below.

The information I have placed on this form is true and correct to the best of my knowledge. I understand that I could be punished under Pennsylvania State Law if I purposely give false information.

[Signature]  
Signature

3/29/04  
Date

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3 APR 08 2004

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2004 MAR 31 AM 10:26  
SECRETARY'S BUREAU

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 7, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0111

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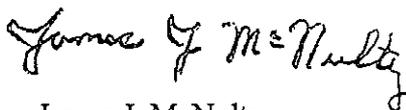
Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by LUIS DASILVA

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

db's

**DOCUMENT  
FOLDER**

**DOCKETED**  
APR 08 2004

ORIGINAL

R#00049157 C0112

Formal Complaint Form  
Pennsylvania Public Utility Commission

Please Print: (you may also type your answers directly onto the form as it appears on your screen)

1. Your name, mailing address and telephone number:

Name ANNA M. BARANOSKI

Street/P.O.Box 7125 CHARLES ST Apt #

City PHILA. State PA Zip 19135

County PHILA. Area Code/Home Phone 215-331-4183  
Area Code/Work Phone

2. Name of company your complaint concerns: PHILA GAS WORKS

3. What is your complaint? (Use additional paper if need more space).

*I am complaining about the 25% INCREASE that the PGW has proposed.*

4. What do you want the Public Utility Commission to do about your complaint? (Use additional paper if need more space).

*I want the PUC to STOP this INCREASE.*

5. You must sign and date your complaint below.

The information I have placed on this form is true and correct to the best of my knowledge. I understand that I could be punished under Pennsylvania State Law if I purposely give false information.

Anna M Baranoski  
Signature

3-29-04  
Date

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APR 08 2004

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1004 MAR 31 AM 10:26  
SECRETARY'S BUREAU

6. If you are represented by a lawyer you must provide your lawyer's name, address and telephone number.

Lawyer's Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Area Code/Phone Number \_\_\_\_\_

**Mail to:**  
Secretary  
Pennsylvania Public Utility Commission  
P. O. Box 3265  
Harrisburg, PA 17105-3265

**For more information, please contact the Secretary's Bureau at 717-772-7777.**

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 7, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0112

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Dear Sir/Madam:

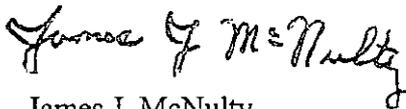
A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by ANNA M BARANOSKI.

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

**DOCUMENT  
FOLDER**

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

**DOCKETED**  
APR 08 2004

db5

ORIGINAL

R-00049157 C0113

Formal Complaint Form  
Pennsylvania Public Utility Commission

Please Print: (you may also type your answers directly onto the form as it appears on your screen)

1. Your name, mailing address and telephone number:

Name MARY M WARD  
Street/P.O.Box 713 W. WALKER ST Apt # Home  
City PHILA State PA Zip 19135  
County PA Area Code/Home Phone \_\_\_\_\_  
Area Code/Work Phone \_\_\_\_\_

2. Name of company your complaint concerns:

PHILA GAS WORKS

3. What is your complaint? (Use additional paper if need more space).

*My gas Bill is up to 89.00 on the Budget and I am on a fixed income and I paid my Bill every month or two*

4. What do you want the Public Utility Commission to do about your complaint? (Use additional paper if need more space).

*Make the people pay who do not pay or shut their gas off.*

5. You must sign and date your complaint below.

The information I have placed on this form is true and correct to the best of my knowledge. I understand that I could be punished under Pennsylvania State Law if I purposely give false information.

Mary M Ward  
Signature

March 29-24  
Date

Continued on next page

RECEIVED  
2001 MAR 31 AM 10:26  
SECRETARY'S BUREAU

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DOCKETED  
APR 08 2004

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*nee*

6. If you are represented by a lawyer you must provide your lawyer's name, address and telephone number.

Lawyer's Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Area Code/Phone Number \_\_\_\_\_

**Mail to:**  
Secretary  
Pennsylvania Public Utility Commission  
P. O. Box 3265  
Harrisburg, PA 17105-3265

For more information, please contact the Secretary's Bureau at 717-772-7777.

Robert J Bonavolento 706 Sharon Lane Phila 19115  
TOM BONAVOLENTO 7132 WALKER ST PHILA -19135  
Richard Alley 7133 Montague St Phila 19135  
ANNA ALLEY 7133 MONTAGUE ST PHILA PA. 19135  
If they do not send  
shut them give off.  
that you

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 7, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0113

---

Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by MARY M WARD.

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

db5

DOCUMENT  
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**DOCKETED**  
APR 08 2004

RECEIVED

2004 MAR 31 AM 10:26

SECRETARY'S BUREAU

R-00049157 00114

Formal Complaint Form  
Pennsylvania Public Utility Commission

ORIGINAL

Please Print: (you may also type your answers directly onto the form as it appears on your screen)

1. Your name, mailing address and telephone number:

Name DAVID De FILIPPIS

Street/P.O.Box 7372 Torresdale Ave Apt #

City Philadelphia State PA Zip 19136

County Philadelphia Area Code/Home Phone 215 331 0610  
Area Code/Work Phone 215 557 1421

2. Name of company your complaint concerns: PGW

3. What is your complaint? (Use additional paper if need more space).

Proposed rate increase for PGW.

4. What do you want the Public Utility Commission to do about your complaint?  
(Use additional paper if need more space).

To deny PGW's rate increase

5. You must sign and date your complaint below.

The information I have placed on this form is true and correct to the best of my knowledge. I understand that I could be punished under Pennsylvania State Law if I purposely give false information.

David De Filippis  
Signature

March 29, 2004  
Date

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APR 08 2004

59

6. If you are represented by a lawyer you must provide your lawyer's name, address and telephone number.

Lawyer's Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Area Code/Phone Number \_\_\_\_\_

**Mail to:**  
Secretary  
Pennsylvania Public Utility Commission  
P. O. Box 3265  
Harrisburg, PA 17105-3265

**For more information, please contact the Secretary's Bureau at 717-772-7777.**

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 7, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0114

---

Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by DAVID DE FILIPPIS.

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

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**DOCKETED**  
APR 08 2004

**DOCUMENT  
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R-00049157CO115

RECEIVED

2004 MAR 31 AM 12:15

P.A.U.C.  
SECRETARY'S BUREAU

Formal Complaint Form  
Pennsylvania Public Utility Commission

ORIGINAL

Please Print: (you may also type your answers directly onto the form as it appears on your screen)

Your name, mailing address and telephone number:

Name Mrs. Anne DeFilippis

Street/P.O.Box 1818 E. Ontario St. Apt # \_\_\_\_\_

City Phila. State Pa. Zip 19134

County Phila. Area Code/Home Phone \_\_\_\_\_  
Area Code/Work Phone \_\_\_\_\_

2. Name of company your complaint concerns: PGW

3. What is your complaint? (Use additional paper if need more space).

*I disagree with rate increase. I'm a senior citizen, & it is all I can do to pay my own.*

4. What do you want the Public Utility Commission to do about your complaint?  
(Use additional paper if need more space).

*Do not grant the rate increase.*

5. You must sign and date your complaint below.

The information I have placed on this form is true and correct to the best of my knowledge. I understand that I could be punished under Pennsylvania State Law if I purposely give false information.

Mrs. Anne DeFilippis  
Signature

3/28/04  
Date

Continued on next page

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APR 08 2004

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FOLDER

34

6. If you are represented by a lawyer you must provide your lawyer's name, address and telephone number.

Lawyer's Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Area Code/Phone Number \_\_\_\_\_

**Mail to:**  
Secretary  
Pennsylvania Public Utility Commission  
P. O. Box 3265  
Harrisburg, PA 17105-3265

**For more information, please contact the Secretary's Bureau at 717-772-7777.**

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 7, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0115

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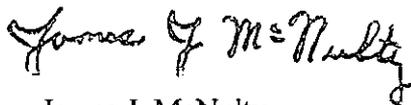
Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by ANNE DE FILIPPIS.

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

dbS

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APR 08 2004

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R-00049157 CO116

Formal Complaint Form

ORIGINAL

2004 MAR 31 AM 1:26

SECRETARIES BUREAU  
Please Print.

1. Your name, mailing address and telephone number:

Name Barbara Jo Hartzell

Street/P.O.Box 9337 Edmund St. Apt # \_\_\_\_\_

City Phila. State Pa. Zip 19114

County \_\_\_\_\_ Area Code/Home Phone 215-332-1154

Area Code/Work Phone \_\_\_\_\_

2. Name of company your complaint concerns: P.G.W.

3. What is your complaint? (Use additional paper if need more space).

*Unfair billing practices - Unfair to put surcharge on paying consumers bills to try to collect non paying consumers bills*

4. What do you want the Public Utility Commission to do about your complaint? (Use additional paper if need more space).

*Stop P.G.W.*

5. You must sign and date your complaint below.

The information I have placed on this form is true and correct to the best of my knowledge. I understand that I could be punished under Pennsylvania State Law if I purposely give false information.

Barbara Jo Hartzell  
Signature

3/28/04  
Date

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APR 08 2004

60

6. If you are represented by a lawyer you must provide your lawyer's name, address and telephone number.

Lawyer's Name NA

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Area Code/Phone Number \_\_\_\_\_

**Mail to:**  
Secretary  
Pennsylvania Public Utility Commission  
P. O. Box 3265  
Harrisburg, PA 17105-3265

**For more information, please contact the Secretary's Bureau at 717-772-7777.**

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 7, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0116

---

Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by BARBARA JO HARTZELL

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either -- satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

db's

DOCUMENT  
FOLDER

**DOCKETED**  
APR 08 2004

ORIGINAL

Formal Complaint Form  
Pennsylvania Public Utility Commission

Please Print: (you may also type your answers directly onto the form as it appears on your screen)

1. Your name, mailing address and telephone number: (Eugene husband deceased)  
 Name Mrs. MARGARET JORDAN  
 Street/P.O.Box 4421 VISTA Apt # House  
 City PHILA State PA Zip 19136-3725  
 County \_\_\_\_\_ Area Code/Home Phone 215-333-2592  
 Area Code/Work Phone \_\_\_\_\_

2. Name of company your complaint concerns: Phila Gas Co.

3. What is your complaint? (Use additional paper if need more space).  
Phila Gas Company 800 N. Montgomery Ave Phila Pa 19122  
they want to raise the Gas 25% more  
Asking please to not raise the Gas. I'm  
a widow living on my social security the  
Gas is high now I only keep it on 68 now

4. What do you want the Public Utility Commission to do about your complaint?  
 (Use additional paper if need more space).  
Don't raise the Gas any more I only  
keep it on 68 now when its real cold  
The Senior Citizen Discount doesn't help that  
much I can handle that, but I won't be able  
to handle another increase

5. You must sign and date your complaint below. Thank you  
 The information I have placed on this form is true and correct to the best of my knowledge. I understand that I could be punished under Pennsylvania State Law if I purposely give false information.

Mrs Margaret Jordan 3-29-2004  
 Signature Date

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2004 MAR 31 AM 1:26

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DOCKETED APR 08 2004

6. If you are represented by a lawyer you must provide your lawyer's name, address and telephone number.

Lawyer's Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Area Code/Phone Number \_\_\_\_\_

**Mail to:**  
Secretary  
Pennsylvania Public Utility Commission  
P. O. Box 3265  
Harrisburg, PA 17105-3265

**For more information, please contact the Secretary's Bureau at 717-772-7777.**

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 7, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0117

---

Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by MARGARET JORDAN

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,

  
James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

db's

**DOCKETED**  
APR 08 2004

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R#00049157C0118

ORIGINAL

Formal Complaint Form  
Pennsylvania Public Utility Commission

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2004 MAR 31 AM 11:00

SECRETARY'S BUREAU  
P.A. P.U.C.

Please print: (you may also type your answers directly onto the form as it appears on your screen)

Your name, mailing address and telephone number:

Name RICHARD F. BAYER

Street/P.O. Box 7183 CHARLES ST Apt #         

City PHILA. State PA Zip 19135

County PHILA. Area Code/Home Phone (215) 331-6295  
Area Code/Work Phone (610) 327-1000

2. Name of company your complaint concerns: PGW

3. What is your complaint? (Use additional paper if need more space).

WE, THE PAYING CUSTOMERS, SHOULD NOT BE BILLED FOR THOSE WHO DO NOT PAY,

4. What do you want the Public Utility Commission to do about your complaint? (Use additional paper if need more space).

I WANT THE PUC TO LOOK INTO PGW'S BUSINESS + ADDRESS THE WAY THEY WANT THE PAYING CUSTOMERS TO BE PENALIZED FOR THOSE WHO DO NOT PAY,

5. You must sign and date your complaint below.

The information I have placed on this form is true and correct to the best of my knowledge. I understand that I could be punished under Pennsylvania State Law if I purposely give false information.

Richard D. Bayer  
Signature

3/27/04  
Date

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APR 08 2004 62

6. If you are represented by a lawyer you must provide your lawyer's name, address and telephone number.

Lawyer's Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Area Code/Phone Number \_\_\_\_\_

Mail to:  
Secretary  
Pennsylvania Public Utility Commission  
P. O. Box 3265  
Harrisburg, PA 17105-3265

For more information, please contact the Secretary's Bureau at 717-772-7777.

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 7, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0118

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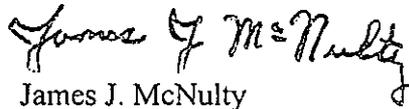
Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by RICHARD F BAUER

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,

  
James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

db's

**DOCKETED**  
APR 08 2004

**DOCUMENT  
FOLDER**

R=00049157C0119

ORIGINAL

Formal Complaint Form  
Pennsylvania Public Utility Commission

Please Print: (you may also type your answers directly onto the form as it appears on your screen)

1. Your name, mailing address and telephone number:

Name VERONICA A. LEWIS

Street/P.O.Box 6707 DITMAN ST. Apt #

City PHILADELPHIA State PA Zip 19135

County PHILA Area Code/Home Phone 215-624-5261

Area Code/Work Phone 215-955-7780

2. Name of company your complaint concerns: PGW

3. What is your complaint? (Use additional paper if need more space).

*I do not want to pay an increase to cover people who don't pay their gas bill.*

4. What do you want the Public Utility Commission to do about your complaint? (Use additional paper if need more space).

*NOT APPROVE the rate INCREASE PGW is asking for. Just approve enough to cover increases in oil.*

5. You must sign and date your complaint below.

The information I have placed on this form is true and correct to the best of my knowledge. I understand that I could be punished under Pennsylvania State Law if I purposely give false information.

Veronica A. Lewis  
Signature

3-28-04  
Date

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2004 MAR 31 10 12:58 AM  
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DOCKETED  
APR 08 2004

64

6. If you are represented by a lawyer you must provide your lawyer's name, address and telephone number.

Lawyer's Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Area Code/Phone Number \_\_\_\_\_

**Mail to:**

Secretary  
Pennsylvania Public Utility Commission  
P. O. Box 3265  
Harrisburg, PA 17105-3265

**For more information, please contact the Secretary's Bureau at 717-772-7777.**

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 7, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0119

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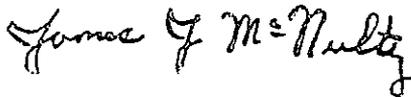
Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by VERONICA A LEWIS.

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

dbs

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APR 08 2004

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RECEIVED

2004 MAR 31 AM 12:58

SECRETARY'S BUREAU

R-00049157 CO120

Formal Complaint Form  
Pennsylvania Public Utility Commission

ORIGINAL

Please Print: (you may also type your answers directly onto the form as it appears on your screen)

1. Your name, mailing address and telephone number:

Name CYNTHIA M. BROCKINGTON

Street/P.O.Box 2242 W. HAROLD ST Apt # \_\_\_\_\_

City PHILA State PA Zip 19132

County PHILA Area Code/Home Phone 215 225 4544  
Area Code/Work Phone 215 787 2698

2. Name of company your complaint concerns: PHILA GAS WORKS

3. What is your complaint? (Use additional paper if need more space).

THE INCREASE IN GAS BILL FORCING PAYING CUSTOMERS TO PAY FOR THOSE WHO DON'T. RAISING THE BILLS BY \$80.00.

4. What do you want the Public Utility Commission to do about your complaint? (Use additional paper if need more space).

TO NOT PENALIZE PAYING CUSTOMERS AND NOT IMPOSING THE INCREASE.

5. You must sign and date your complaint below.

The information I have placed on this form is true and correct to the best of my knowledge. I understand that I could be punished under Pennsylvania State Law if I purposely give false information.

Cynthia M. Brockington  
Signature

3/24/04  
Date

Continued on next page

DOCKETED  
APR 08 2004

DOCKETED  
APR 08 2004

DOCUMENT FOLDER

65

- 6. If you are represented by a lawyer you must provide your lawyer's name, address and telephone number.

Lawyer's Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Area Code/Phone Number \_\_\_\_\_

**Mail to:**  
**Secretary**  
**Pennsylvania Public Utility Commission**  
**P. O. Box 3265**  
**Harrisburg, PA 17105-3265**

**For more information, please contact the Secretary's Bureau at 717-772-7777.**

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 7, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0120

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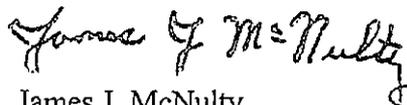
Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by CYNTHIA M BROCKINGTON.

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either -- satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

db5

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ORIGINAL

R-00049157 C0121

Formal Complaint Form  
Pennsylvania Public Utility Commission

RECEIVED  
2004 MAR 31 AM 12:58  
SECRETARY'S BUREAU

Please Print: (you may also type your answers directly onto the form as it appears on your screen)

1. Your name, mailing address and telephone number:

Name Margaret M. Seltzer

Street/P.O.Box 4237 Colendale St Apt # \_\_\_\_\_

City Phila State PA Zip 19124

County Phila Area Code/Home Phone 215-289-7510

Area Code/Work Phone 215-289-7406

2. Name of company your complaint concerns: Phila. Gas Works Co.

3. What is your complaint? (Use additional paper if need more space).

Plain & simple, this rate increase to  
get money from people who pay their bills  
to pay the bills of people who don't is

4. What do you want the Public Utility Commission to do about your complaint?  
(Use additional paper if need more space). *Extra charge!*

Stop the PGW Co. from charging people like me  
who pay their bills. I work hard to pay my own  
bills & don't or can not afford to pay for others

5. You must sign and date your complaint below. *PLEASE help!!*

The information I have placed on this form is true and correct to the best of my  
knowledge. I understand that I could be punished under Pennsylvania State Law  
if I purposely give false information.

Margaret M. Seltzer  
Signature

3-24-04  
Date

Continued on next page

DOCKETED  
APR 08 2004

DOCUMENT  
FOLDER

6. If you are represented by a lawyer you must provide your lawyer's name, address and telephone number.

Lawyer's Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Area Code/Phone Number \_\_\_\_\_

**Mail to:**

Secretary  
Pennsylvania Public Utility Commission  
P. O. Box 3265  
Harrisburg, PA 17105-3265

**For more information, please contact the Secretary's Bureau at 717-772-7777.**

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 7, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0121

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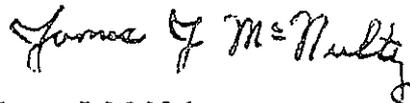
Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by MARGARET M SELTZER

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

db's

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FOLDER

**DOCKETED**  
APR 08 2004

RECEIVED

Please Print

2004 MAR 31 AM 12:57

SECRETARY'S BUREAU

R-00049157 C0122

Formal Complaint Form

ORIGINAL

1. Your name, mailing address and telephone number:

Name LAURA PEKALA

Street/P.O.Box 7025 VANDIKE STREET Apt # \_\_\_\_\_

City PHILADELPHIA State PA Zip 19135

County PHILADELPHIA Area Code/Home Phone 215 338 2942

Area Code/Work Phone 215 496 1475

2. Name of company your complaint concerns: PHILADELPHIA GAS WORKS

3. What is your complaint? (Use additional paper if need more space).

I am furious over PGW's proposed rate hike, forcing paying customers to pay more so the company can recoup money lost due to so many customers not paying for service. Why should the customer's who do continue to pay already astronomical gas bills have to pick up for those playing the system and getting away with it. Unfortunately, I cannot afford to convert my house to an oil based system, so I, like many others, are being forced to pay over and beyond what we should because of those who have learned how to successfully play the system.

4. What do you want the Public Utility Commission to do about your complaint?

(Use additional paper if need more space).

Force PGW to seriously go after those refusing to pay for their service. The paying customers seem to get continual rate hikes, while others sit back and laugh while we foot their bill. PGW is a monopoly as far as gas providers are concerned so we have no choice but to take what they shove down our throats, but we cannot afford our bills now, how will we handle yet another increase. Should we become one with those milking the system in order to survive? I am

5. You must sign and date your complaint below. *Sure we are too honorable to allow that. Please help in our quest for fair gas prices.*

The information I have placed on this form is true and correct to the best of my knowledge. I understand that I could be punished under Pennsylvania State Law if I purposely give false information.

Laura Pekala  
Signature

3/29/04  
Date

Continued on next page

DOCUMENTED  
APR 08 2004

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FOLDER

67

6. If you are represented by a lawyer you must provide your lawyer's name, address and telephone number.

Lawyer's Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Area Code/Phone Number \_\_\_\_\_

**Mail to:**

Secretary  
Pennsylvania Public Utility Commission  
P. O. Box 3265  
Harrisburg, PA 17105-3265

**For more information, please contact the Secretary's Bureau at  
717-772-7777.**

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 7, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0122

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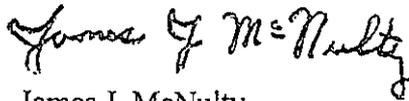
Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by LAURA PEKALA.

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

dbs

**DOCKETED**  
APR 08 2004

**DOCUMENT  
FOLDER**

ORIGINAL

R-00049157C 0123

Formal Complaint Form  
Pennsylvania Public Utility Commission

Please Print: (you may also type your answers directly onto the form as it appears on your screen)

1. Your name, mailing address and telephone number:

Name Pat Medary

Street/P.O.Box 4250. LEVICK ST Apt # \_\_\_\_\_

City Phila State PA Zip 19135

County Phila Area Code/Home Phone 215-333-5975  
Area Code/Work Phone 215-744-8800

2. Name of company your complaint concerns: PGW

3. What is your complaint? (Use additional paper if need more space).

*Having the paying customer foot the bill for the non-paying customer*

4. What do you want the Public Utility Commission to do about your complaint? (Use additional paper if need more space).

*find alternative means to recoup losses*

5. You must sign and date your complaint below.

The information I have placed on this form is true and correct to the best of my knowledge. I understand that I could be punished under Pennsylvania State Law if I purposely give false information.

Pat Medary  
Signature

3/29/04  
Date

Continued on next page

RECEIVED  
2004 MAR 31 AM 12:57  
PUBLIC UTILITIES BUREAU  
SECRETARY'S BUREAU

DOCKETED  
APR 08 2004

DOCUMENT  
FOLDER

68

6. If you are represented by a lawyer you must provide your lawyer's name, address and telephone number.

Lawyer's Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Area Code/Phone Number \_\_\_\_\_

**Mail to:**  
Secretary  
Pennsylvania Public Utility Commission  
P. O. Box 3265  
Harrisburg, PA 17105-3265

**For more information, please contact the Secretary's Bureau at 717-772-7777.**

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 7, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0123

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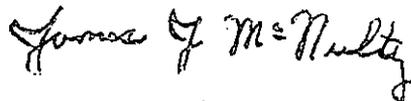
Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by PAT MEDARY.

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

dbs

DOCUMENT  
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**DOCKETED**  
APR 08 2004

ORIGINAL

R-00049157C0124

RECEIVED  
2004 MAR 31 AM 12:56  
SECRETARY'S BUREAU

Formal Complaint Form  
Pennsylvania Public Utility Commission

Please Print: (you may also type your answers directly onto the form as it appears on your screen)

1. Your name, mailing address and telephone number:

Name LOUIS PAPPAS

Street/P.O.Box 4305 VISTA ST Apt # \_\_\_\_\_

City PHILA. State PA Zip 19136

County PHILA Area Code/Home Phone 215 332-4049  
Area Code/Work Phone \_\_\_\_\_

2. Name of company your complaint concerns: Phila Gas Works

3. What is your complaint? (Use additional paper if need more space).

*I don't think it's fair to charge paying customers for those that don't or won't pay their bills*

4. What do you want the Public Utility Commission to do about your complaint?  
(Use additional paper if need more space).

*I want you to deny the gas company this proposal*

5. You must sign and date your complaint below.

The information I have placed on this form is true and correct to the best of my knowledge. I understand that I could be punished under Pennsylvania State Law if I purposely give false information.

Loretta Pappas  
Signature

3/29/04  
Date

Continued on next page

DOCKETED  
APR 08 2004

DOCUMENT  
FOLDER

6. If you are represented by a lawyer you must provide your lawyer's name, address and telephone number.

Lawyer's Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Area Code/Phone Number \_\_\_\_\_

**Mail to:**  
Secretary  
Pennsylvania Public Utility Commission  
P. O. Box 3265  
Harrisburg, PA 17105-3265

**For more information, please contact the Secretary's Bureau at 717-772-7777.**

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 7, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0124

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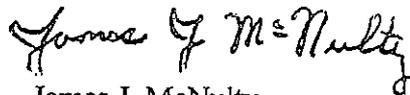
Dear Sir/Madam:

- A -Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by LOUIS PAPPAS.

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

db

**DOCKETED**  
APR 08 2004

**DOCUMENT  
FOLDER**

ORIGINAL

R-00049157 C0125

RECEIVED  
2004 MAR 31 AM 12:56  
SECRETARY'S BUREAU

Formal Complaint Form  
Pennsylvania Public Utility Commission

Please Print: (you may also type your answers directly onto the form as it appears on your screen)

1. Your name, mailing address and telephone number:

Name Bruce Snyder

Street/P.O.Box 4433 Loring St. Apt # \_\_\_\_\_

City Phila State PA Zip 19136

County \_\_\_\_\_ Area Code/Home Phone 215 333-2053  
Area Code/Work Phone \_\_\_\_\_

2. Name of company your complaint concerns: PGW

3. What is your complaint? (Use additional paper if need more space).

*I do not feel that I should be penalized for those who do not pay. Why should I pay 25% more for those who do not pay? How is that fair? I pay on time every month - maybe I shouldn't!*

4. What do you want the Public Utility Commission to do about your complaint? (Use additional paper if need more space).

5. You must sign and date your complaint below.

The information I have placed on this form is true and correct to the best of my knowledge. I understand that I could be punished under Pennsylvania State Law if I purposely give false information.

Bruce Snyder  
Signature

3/28/04  
Date

Continued on next page  
**DOCKETED**  
APR 08 2004

**DOCUMENT  
FOLDER**

6. If you are represented by a lawyer you must provide your lawyer's name, address and telephone number.

Lawyer's Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Area Code/Phone Number \_\_\_\_\_

**Mail to:**  
Secretary  
Pennsylvania Public Utility Commission  
P. O. Box 3265  
Harrisburg, PA 17105-3265

**For more information, please contact the Secretary's Bureau at 717-772-7777.**

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 7, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0125

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Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by BRUCE SNYDER.

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

db

**DOCKETED**  
APR 08 2004

**DOCUMENT  
FOLDER**

ORIGINAL

R-0004915700126

Formal Complaint Form  
Pennsylvania Public Utility Commission

Please Print: (you may also type your answers directly onto the form as it appears on your screen)

1. Your name, mailing address and telephone number:

Name MICHAEL F. SIMMONS

Street/P.O.Box 345 EAST OLNEY AVE Apt # PRIVATE-RESIDENCE

City PHILADELPHIA State PA Zip 19120-2513

County PHILADELPHIA Area Code/Home Phone 215-329-1061  
Area Code/Work Phone 215-686-6934

2. Name of company your complaint concerns: PHILA GAS WORKS-ELECTRIC-WATER

3. What is your complaint? (Use additional paper if need more space).

RATE INCREASES SHOULD ONLY BE GRANTED -ONCE IN A CALANDER YEAR, BASED ON THE SOCIAL SECURITY COST OF LIVING (COLAS). IT IS IMPOSSIBLE TO ECONOMIZE WHEN THE GAS COMPANY RAISES ITS RATES FOUR TIMES IN A CALANDER YEAR. PEOPLE WHO PAY THEIR BILLS ON TIME - SHOULD NOT HAVE TO PAY FOR THE DEAD BEATS.

4. What do you want the Public Utility Commission to do about your complaint? (Use additional paper if need more space).

I WOULD LIKE THE PUC TO ELIMINATE ALL CUSTOMER SERVICE CHARGES THAT THE UTILITY COMPANIES CHARGE THEIR CUSTOMERS FOR EXAMPLE: THE GAS COMPANY CHARGES \$12.00 A MONTH - ELECTRIC \$5.18 A MONTH - WATER \$16.98 A MONTH - FOR A TOTAL OF \$34.16 PER MONTH OR \$409.92 A YEAR. - THESE CHARGES, SHOULD BE ELIMINATED.

5. You must sign and date your complaint below.

The information I have placed on this form is true and correct to the best of my knowledge. I understand that I could be punished under Pennsylvania State Law if I purposely give false information.

Michael F. Simmons  
Signature

March 29, 2004  
Date

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2004 MAR 31 AM 12:55  
SECRETARY'S BUREAU

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 7, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0126

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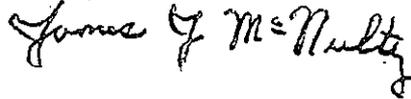
Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by MICHAEL F SIMMONS.

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

dbb

**DOCKETED**  
APR 08 2004

**DOCUMENT  
FOLDER**

**ORIGINAL** R=00049157 C0127

**Formal Complaint Form  
Pennsylvania Public Utility Commission**

Please Print: (you may also type your answers directly onto the form as it appears on your screen)

1. Your name, mailing address and telephone number:

Name RICHARD FUSBENNER

Street/P.O.Box 7149 MONTAGUE ST. Apt # \_\_\_\_\_

City Phila State PA Zip 19135

County \_\_\_\_\_ Area Code/Home Phone 215 332 2597  
Area Code/Work Phone \_\_\_\_\_

2. Name of company your complaint concerns: Phila Gas Co.

3. What is your complaint? (Use additional paper if need more space).

*I pay my gas bill each month, which I think is too high. I do not know I should have to pay for some other amount.*

4. What do you want the Public Utility Commission to do about your complaint? (Use additional paper if need more space).

*I want the P.U.C. to refuse the Mayor's request for rate increase regarding those who do not pay their bills.*

5. You must sign and date your complaint below.

The information I have placed on this form is true and correct to the best of my knowledge. I understand that I could be punished under Pennsylvania State Law if I purposely give false information.

Richard Fusbenner  
Signature

3/28/04  
Date

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2004 MAR 31 AM 12:55

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APR 08 2004

6. If you are represented by a lawyer you must provide your lawyer's name, address and telephone number.

Lawyer's Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Area Code/Phone Number \_\_\_\_\_

**Mail to:**  
Secretary  
Pennsylvania Public Utility Commission  
P. O. Box 3265  
Harrisburg, PA 17105-3265

**For more information, please contact the Secretary's Bureau at 717-772-7777.**

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 7, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0127

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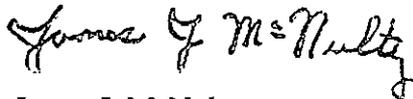
Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by RICHARD FUSBENNER.

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

dbs

**DOCKETED**  
APR 08 2004

**DOCUMENT  
FOLDER**

ORIGINAL

R-00049157 C0128

Formal Complaint Form  
Pennsylvania Public Utility Commission

Please Print: (you may also type your answers directly onto the form as it appears on your screen)

1. Your name, mailing address and telephone number:

Name DAVID G. ABERNETHY

Street/P.O.Box 5437 N. 2nd ST Apt # \_\_\_\_\_

City PHILADELPHIA State PA Zip 19120

County PHILADELPHIA Area Code/Home Phone 215 549-7875  
Area Code/Work Phone 215-745-4171

2. Name of company your complaint concerns: PGW

3. What is your complaint? (Use additional paper if need more space).

PGW IS UNFAIRLY RAISING GAS COSTS ON PEOPLE WHO PAY THEIR BILLS, TO MAKE UP LOSSES BECAUSE OF PEOPLE WHO DO NOT PAY THEIR BILLS. MY GAS COSTS ARE HIGH ENOUGH. WHY SHOULD I PAY SOMEONE ELSE'S BILL. FORCE THESE PEOPLE TO PAY WHAT THEY OWE, DON'T MAKE ME PAY MORE.

4. What do you want the Public Utility Commission to do about your complaint? (Use additional paper if need more space).

STOP THEM! THIS IS COMPLETELY UNFAIR!

AM ONE PERSON WITH ONE INCOME IN ONE HOUSE. MY JANUARY GAS BILL WAS <sup>ALWAYS</sup> \$400.00. THEY WANT ME TO PAY MORE.

NO WAY! PGW IS BEING MISMANAGED, IF THIS IS THEIR SOLUTION TO A NON PAYMENT PROBLEM.

5. You must sign and date your complaint below.

The information I have placed on this form is true and correct to the best of my knowledge. I understand that I could be punished under Pennsylvania State Law if I purposely give false information.

Signature [Handwritten Signature]

Date 3-29-04

Continued on next page

DOCUMENT FOLDER

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APR 08 2004

SECRETARY'S BUREAU

2004 MAR 31 AM 12:13

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38

6. If you are represented by a lawyer you must provide your lawyer's name, address and telephone number.

Lawyer's Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Area Code/Phone Number \_\_\_\_\_

**Mail to:**

Secretary  
Pennsylvania Public Utility Commission  
P. O. Box 3265  
Harrisburg, PA 17105-3265

**For more information, please contact the Secretary's Bureau at 717-772-7777.**

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 7, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0128

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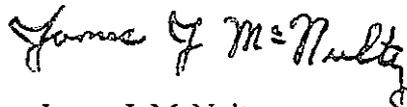
Dear Sir/Madam:

A. Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by DAVID G ABERNETHY.

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

dbs

**DOCKETED**  
APR 08 2004

**DOCUMENT  
FOLDER**

RECEIVED

2004 MAR 31 AM 12:09

SECRETARY'S BUREAU

R-00049157C0129

ORIGINAL

Formal Complaint Form  
Pennsylvania Public Utility Commission

Please Print: (you may also type your answers directly onto the form as it appears on your screen)

Your name, mailing address and telephone number:

Name John PERZCHOWSKI

Street/P.O.Box 4015 HARTEL AV. Apt # \_\_\_\_\_

City Phila. State PA. Zip 19136

County Phila. 19136 Area Code/Home Phone 215-624-0150  
Area Code/Work Phone \_\_\_\_\_

2. Name of company your complaint concerns: Phila. GAS. WORKS.

3. What is your complaint? (Use additional paper if need more space).

PROPOSED INCREASE ON PAYING CUSTOMERS,  
TO OFFSET COST OF NON-PAYING CUSTOMERS.

4. What do you want the Public Utility Commission to do about your complaint?  
(Use additional paper if need more space).

REJECT ANY INCREASE ON PAYING CUSTOMERS.

5. You must sign and date your complaint below.

The information I have placed on this form is true and correct to the best of my knowledge. I understand that I could be punished under Pennsylvania State Law if I purposely give false information.

John Perzchowski  
Signature

3-29-04  
Date

Continued on next page

**DOCKETED**  
APR 12 2004

**DOCUMENT  
FOLDER**

40

6. If you are represented by a lawyer you must provide your lawyer's name, address and telephone number.

Lawyer's Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Area Code/Phone Number \_\_\_\_\_

**Mail to:**  
Secretary  
Pennsylvania Public Utility Commission  
P. O. Box 3265  
Harrisburg, PA 17105-3265

**For more information, please contact the Secretary's Bureau at 717-772-7777.**

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 7, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0129

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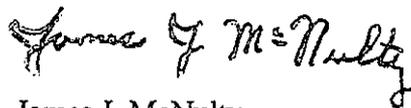
Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by JOHN PERZCHOWSKI.

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

dbS

**DOCKETED**  
APR 12 2004

**DOCUMENT  
FOLDER**

ORIGINAL

R-00049157 C0130

Formal Complaint Form  
Pennsylvania Public Utility Commission

Please Print: (you may also type your answers directly onto the form as it appears on your screen)

1. Your name, mailing address and telephone number:

Name Marcia Kent

Street/P.O.Box 4141 Maywood St Apt # \_\_\_\_\_

City Phila State Pa Zip 19124

County PITTLA Area Code/Home Phone 215-743-5392  
Area Code/Work Phone \_\_\_\_\_

2. Name of company your complaint concerns: PGW, Phila Gas Works

3. What is your complaint? (Use additional paper if need more space).

*We should not have to pay extra for  
people that do not pay their bill.  
They should be penalized*

4. What do you want the Public Utility Commission to do about your complaint?  
(Use additional paper if need more space).

*Do not put through the increase to  
us people that pay our bills on ~~time~~<sup>time</sup>*

5. You must sign and date your complaint below.

The information I have placed on this form is true and correct to the best of my knowledge. I understand that I could be punished under Pennsylvania State Law if I purposely give false information.

Marcia Kent  
Signature

3-29-04  
Date

Continued on next page

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2004 MAR 31 AM 12:06

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41

6. If you are represented by a lawyer you must provide your lawyer's name, address and telephone number.

Lawyer's Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Area Code/Phone Number \_\_\_\_\_

**Mail to:**  
Secretary  
Pennsylvania Public Utility Commission  
P. O. Box 3265  
Harrisburg, PA 17105-3265

**For more information, please contact the Secretary's Bureau at 717-772-7777.**

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 7, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0130

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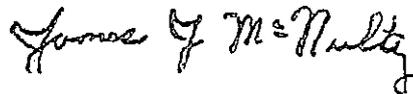
Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by MARIA KENT.

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

dbb

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ORIGINAL

R-00049157 C0131

Formal Complaint Form  
Pennsylvania Public Utility Commission

Please Print: (you may also type your answers directly onto the form as it appears on your screen)

1. Your name, mailing address and telephone number:

Name FRANK C DAVIS

Street/P.O.Box 10908 Kipling LN Apt # \_\_\_\_\_

City Phila State Pa Zip 19154

County \_\_\_\_\_ Area Code/Home Phone \_\_\_\_\_  
Area Code/Work Phone \_\_\_\_\_

2. Name of company your complaint concerns: PGW

3. What is your complaint? (Use additional paper if need more space).

*the proposed increase in monthly rates to make up the gap caused by the delinquent customers.*

4. What do you want the Public Utility Commission to do about your complaint? (Use additional paper if need more space).

*Have the delinquent customers pay their bills or threaten to cut off their cable.*

5. You must sign and date your complaint below.

The information I have placed on this form is true and correct to the best of my knowledge. I understand that I could be punished under Pennsylvania State Law if I purposely give false information.

*Francis E. Davis*  
Signature

3-27-04  
Date

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COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 7, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0131

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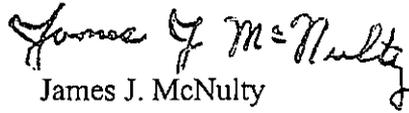
Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by FRANK C DAVIS.

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,

  
James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

db

DOCUMENT  
FOLDER

**DOCKETED**  
APR 12 2004

ORIGINAL

R=00049157 C0132

Formal Complaint Form  
Pennsylvania Public Utility Commission

Please Print: (you may also type your answers directly onto the form as it appears on your screen)

1. Your name, mailing address and telephone number:

Name EUGENE P. VANDIVER

Street/P.O.Box 4618 HARTEL AVE Apt # \_\_\_\_\_

City PHILA. State PA Zip 19136

County PHILA Area Code/Home Phone 215 338 1277  
Area Code/Work Phone \_\_\_\_\_

2. Name of company your complaint concerns: PHILA. GAS WORKS

3. What is your complaint? (Use additional paper if need more space).

THE INCREASE IN BILL'S FOR HONEST PEOPLE WHO  
PAY THEIR GAS BILLS. NO INCREASE FOR  
THE PEOPLE WHO PAY. MAKE THE PEOPLE  
WHO DON'T PAY RESPONSIBLE FOR THEIR OWN BILLS

4. What do you want the Public Utility Commission to do about your complaint?  
(Use additional paper if need more space).

DO NOT APPROVE THE INCREASE TO  
HONEST PEOPLE, FOR PEOPLE WHO DO NOT  
PAY THEIR BILLS. AFTER WARNING SHUT OFF  
THE GAS TO THEM. TAKE THE GAS CO.  
OUT OF CITY HANDS!

5. You must sign and date your complaint below.

The information I have placed on this form is true and correct to the best of my  
knowledge. I understand that I could be punished under Pennsylvania State Law  
if I purposely give false information.

Eugene P. Vandiver  
Signature

3/26/04  
Date

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2004 MAR 31 AM 10:47  
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APR 12 2004

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6. If you are represented by a lawyer you must provide your lawyer's name, address and telephone number.

Lawyer's Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Area Code/Phone Number \_\_\_\_\_

**Mail to:**  
Secretary  
Pennsylvania Public Utility Commission  
P. O. Box 3265  
Harrisburg, PA 17105-3265

**For more information, please contact the Secretary's Bureau at 717-772-7777.**

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 7, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0132

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Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by EUGENE P VANDIVER.

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

db

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APR 12 2004

**DOCKETED**  
APR 12 2004

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FOLDER**

**DOCUMENT  
FOLDER**

ORIGINAL

R-00049157C0133

Formal Complaint Form  
Pennsylvania Public Utility Commission

Please Print: (you may also type your answers directly onto the form as it appears on your screen)

1. Your name, mailing address and telephone number:

Name RAYMOND H. POPLAS

Street/P.O.Box 4553 BLEIGH AVE. Apt # N.A.

City PHILA. State PA Zip 19136.

County \_\_\_\_\_ Area Code/Home Phone 215-338-6395  
Area Code/Work Phone N.A.

2. Name of company your complaint concerns: PHILA GAS CO

3. What is your complaint? (Use additional paper if need more space).

AS A RETIREE, ON A LIMITED INCOME, I AM AGAINST ANY SURCHARGE BEING SOUGHT BY THE GAS COMPANY TO FUNCTION, BECAUSE OF DEAD BEATS, WHO DO NOT PAY THEIR BILLS. WHO DO I CRY TO BECAUSE I CANT PAY MY BILLS, SO I CAN FUNCTION THE GAS COMPANY SHOULD BE SOLD!

4. What do you want the Public Utility Commission to do about your complaint? (Use additional paper if need more space).

THE PUBLIC UTILITY COMMISSION SHOULD NOT GRANT THE GAS COMPANY TO IMPOSE THIS SURCHARGE, IF I AM FORCED TO PAY THIS SURCHARGE I WILL BE A DEAD BEAT ALSO.

5. You must sign and date your complaint below.

The information I have placed on this form is true and correct to the best of my knowledge. I understand that I could be punished under Pennsylvania State Law if I purposely give false information.

Raymond H Poplas  
Signature

MARCH 28, 2004  
Date

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6. If you are represented by a lawyer you must provide your lawyer's name, address and telephone number.

Lawyer's Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Area Code/Phone Number \_\_\_\_\_

**Mail to:**  
Secretary  
Pennsylvania Public Utility Commission  
P. O. Box 3265  
Harrisburg, PA 17105-3265

**For more information, please contact the Secretary's Bureau at 717-772-7777.**

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 7, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0133

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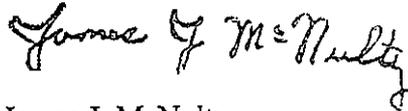
Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by RAYMOND H POPLAS.

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

db

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**DOCUMENT  
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ORIGINAL

R-00049157 C0134

Formal Complaint Form  
Pennsylvania Public Utility Commission

Please Print: (you may also type your answers directly onto the form as it appears on your screen)

1. Your name, mailing address and telephone number:

Name CHARLES TABOR

Street/P.O.Box 7123 WALKER ST Apt # \_\_\_\_\_

City PHILA State PA Zip 19135

County \_\_\_\_\_ Area Code/Home Phone 215-331-3428  
Area Code/Work Phone \_\_\_\_\_

2. Name of company your complaint concerns: PHILA GAS WORKS

3. What is your complaint? (Use additional paper if need more space).

I AM BEING DISCRIMINATED AGAINST  
BY PAYING MY BILLS IN FULL AND  
ON TIME.

4. What do you want the Public Utility Commission to do about your complaint?  
(Use additional paper if need more space).

MAKE THE PEOPLE PAY WHO ARE NOT  
PAYING. FIND OTHER MEANS OF  
FINANCING THIS PROBLEM.

5. You must sign and date your complaint below.

The information I have placed on this form is true and correct to the best of my knowledge. I understand that I could be punished under Pennsylvania State Law if I purposely give false information.

Charles Tabor  
Signature

3-27-04  
Date

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APR 12 2004

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6. If you are represented by a lawyer you must provide your lawyer's name, address and telephone number.

Lawyer's Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Area Code/Phone Number \_\_\_\_\_

**Mail to:**  
Secretary  
Pennsylvania Public Utility Commission  
P. O. Box 3265  
Harrisburg, PA 17105-3265

**For more information, please contact the Secretary's Bureau at 717-772-7777.**

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 7, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0134

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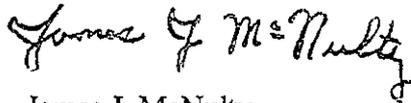
Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by CHARLES TABOR.

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

dbS

**DOCKETED**  
APR 12 2004

**DOCUMENT  
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**DOCUMENT  
FOLDER**

Formal Complaint Form  
Pennsylvania Public Utility Commission

Please Print: (you may also type your answers directly onto the form as it appears on your screen)

1. Your name, mailing address and telephone number:

Name PAUL M ROBERTS

Street/P.O.Box 7229 Pitman St Apt #

City PHILA State PA Zip 19135

County PHILA Area Code/Home Phone 215-624-2060  
Area Code/Work Phone

2. Name of company your complaint concerns: PHILA GAS WORKS

3. What is your complaint? (Use additional paper if need more space).

I DO NOT WANT TO PAY FOR  
OTHER PEOPLES GAS USAGE.

4. What do you want the Public Utility Commission to do about your complaint?  
(Use additional paper if need more space).

SHUT-OFF ANY CITIZENS GAS & KEEP  
IT OFF UNTILL GAS BILL IS PAID OFF.  
NO EXCEPTIONS!

5. You must sign and date your complaint below.

The information I have placed on this form is true and correct to the best of my knowledge. I understand that I could be punished under Pennsylvania State Law if I purposely give false information.

Paul M. Roberts  
Signature

3-27-04  
Date

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APR 12 2004  
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6. If you are represented by a lawyer you must provide your lawyer's name, address and telephone number.

Lawyer's Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Area Code/Phone Number \_\_\_\_\_

**Mail to:**

Secretary

Pennsylvania Public Utility Commission

P. O. Box 3265

Harrisburg, PA 17105-3265

**For more information, please contact the Secretary's Bureau at 717-772-7777.**

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 7, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0135

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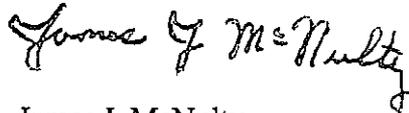
Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by PAUL M ROBERTS.

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

dbs

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APR 12 2004

ORIGINAL

R-00049157 C0136

Formal Complaint Form  
Pennsylvania Public Utility Commission

RECEIVED  
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SECRETARY'S BUREAU

Please Print: (you may also type your answers directly onto the form as it appears on your screen)

1. Your name, mailing address and telephone number:

Name EDWARD J BROWN  
Street/P.O.Box 3035 GULLFORD ST Apt #  
City PHILA State PA Zip 19152  
County PHILA Area Code/Home Phone 215 745-6410  
Area Code/Work Phone

2. Name of company your complaint concerns: PGW

3. What is your complaint? (Use additional paper if need more space).

I DO NOT FEEL I SHOULD HAVE TO  
BE PENALIZED BECAUSE I ALWAYS  
PAY MY BILL ON TIME. I DON'T  
WANT TO PAY EXTRA FOR THOSE WHO  
DON'T PAY THEIR BILLS

4. What do you want the Public Utility Commission to do about your complaint?  
(Use additional paper if need more space).

DO NOT LET PGW RAISE MY BILL  
TO PAY FOR THOSE WHO DON'T PAY  
THEIR BILL. THANK YOU

5. You must sign and date your complaint below.

The information I have placed on this form is true and correct to the best of my knowledge. I understand that I could be punished under Pennsylvania State Law if I purposely give false information.

[Signature]  
Signature

March 28, 2004  
Date

Continued on next page

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APR 12 2004

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- 6: If you are represented by a lawyer you must provide your lawyer's name, address and telephone number.

Lawyer's Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Area Code/Phone Number \_\_\_\_\_

**Mail to:**  
Secretary  
Pennsylvania Public Utility Commission  
P. O. Box 3265  
Harrisburg, PA 17105-3265

**For more information, please contact the Secretary's Bureau at 717-772-7777.**

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 7, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0136

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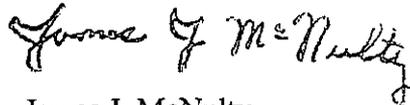
Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by EDWARD J BROWN.

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

dbb

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**DOCKETED**  
APR 12 2004

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R-00049157 C0137

ORIGINAL

2004 MAR 31 AM 12:52

SECRETARY'S BUREAU

Formal Complaint Form  
Pennsylvania Public Utility Commission

Please Print: (you may also type your answers directly onto the form as it appears on your screen)

1. Your name, mailing address and telephone number:

Name HENRY C. BITTNER  
Street/P.O.Box 7147 ERDRICK ST Apt # \_\_\_\_\_  
City Philadelphia State PA Zip 19135  
County Phila. Area Code/Home Phone 624-2793  
Area Code/Work Phone \_\_\_\_\_

2. Name of company your complaint concerns: PGW

3. What is your complaint? (Use additional paper if need more space).

ADDED 25% ADDITIONAL CHARGE FOR GAS  
DO NOT AGREE

4. What do you want the Public Utility Commission to do about your complaint?  
(Use additional paper if need more space).

KNOCK DOWN THIS ADDITIONAL RAISE  
IN GAS RATES OF MAYOR  
STREET

5. You must sign and date your complaint below.

The information I have placed on this form is true and correct to the best of my knowledge. I understand that I could be punished under Pennsylvania State Law if I purposely give false information.

Henry C. Bittner  
Signature

3-28-03  
Date

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APR 12 2004

6. If you are represented by a lawyer you must provide your lawyer's name, address and telephone number.

Lawyer's Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Area Code/Phone Number \_\_\_\_\_

**Mail to:**  
Secretary  
Pennsylvania Public Utility Commission  
P. O. Box 3265  
Harrisburg, PA 17105-3265

**For more information, please contact the Secretary's Bureau at 717-772-7777.**

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 8, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0137

---

Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by HENRY C BITTNER.

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

dbs

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**DOCKETED**  
APR 12 2004

ORIGINAL

P-00049157C0138

Formal Complaint Form  
Pennsylvania Public Utility Commission

Please Print: (you may also type your answers directly onto the form as it appears on your screen)

1. Your name, mailing address and telephone number:

Name Anne B. Cheatham

Street/P.O.Box 215 Rock St. Apt # G5

City Phila. State Pa. Zip 19128

County \_\_\_\_\_ Area Code/Home Phone 215-487-2972  
Area Code/Work Phone 215-248-4935

2. Name of company your complaint concerns: PGW

3. What is your complaint? (Use additional paper if need more space).

Can not afford anymore rate hikes.  
Live from pay check to pay check.

4. What do you want the Public Utility Commission to do about your complaint?  
(Use additional paper if need more space).

Try and stop this rate hike.

5. You must sign and date your complaint below.

The information I have placed on this form is true and correct to the best of my knowledge. I understand that I could be punished under Pennsylvania State Law if I purposely give false information.

Anne B. Cheatham  
Signature

3/24/04  
Date

Continued on next page

RECEIVED  
2004 MAR 31 AM 12:52  
SECRETARY'S BUREAU

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COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 8, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0138

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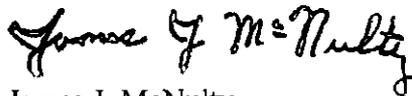
Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by ANNE B CHEATHAM.

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

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APR 12 2004

ORIGINAL

R=00049157 C0139

Formal Complaint Form  
Pennsylvania Public Utility Commission

Please Print: (you may also type your answers directly onto the form as it appears on your screen)

1. Your name, mailing address and telephone number:

Name MARY Mc CARTNEY

Street/P.O.Box 4203 MARPLE ST. Apt # \_\_\_\_\_

City PHILA State PA Zip 19136

County PHILA Area Code/Home Phone 215-338-5727

Area Code/Work Phone 215-440-3001 ex 3011

2. Name of company your complaint concerns: PHILA GAS WORKS

3. What is your complaint? (Use additional paper if need more space).

MAJOR STREETS PLAN TO INCREASE RATES BY 20% FOR THE PEOPLE WHO PAY THEIR GAS BILL ON TIME TO MAKE UP FOR THOSE WHO DON'T PAY.

4. What do you want the Public Utility Commission to do about your complaint?

(Use additional paper if need more space).

DO NOT ALLOW THIS INCREASE TO TAKE PLACE.

5. You must sign and date your complaint below.

The information I have placed on this form is true and correct to the best of my knowledge. I understand that I could be punished under Pennsylvania State Law if I purposely give false information.

Mary McCartney  
Signature

3/28/04  
Date

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2004 MAR 31 AM 12:47

SECRETARY'S OFFICE

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17

6. If you are represented by a lawyer you must provide your lawyer's name, address and telephone number.

Lawyer's Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Area Code/Phone Number \_\_\_\_\_

**Mail to:**  
Secretary  
Pennsylvania Public Utility Commission  
P. O. Box 3265  
Harrisburg, PA 17105-3265

**For more information, please contact the Secretary's Bureau at 717-772-7777.**

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 8, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0139

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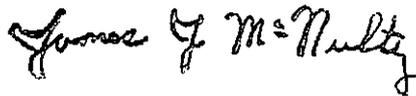
Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by MARY MCCARTNEY.

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

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ORIGINAL

R-00049157C040

Formal Complaint Form  
Pennsylvania Public Utility Commission

Please Print: (you may also type your answers directly onto the form as it appears on your screen)

1. Your name, mailing address and telephone number:

Name Joanne C. Murphy

Street/P.O.Box 4552 Aldine St. Apt # \_\_\_\_\_

City Philadelphia State PA Zip 19136

County Philadelphia Area Code/Home Phone 215-331-7579  
Area Code/Work Phone 215-227-6400 x 119

2. Name of company your complaint concerns: Philadelphia Gas Works

3. What is your complaint? (Use additional paper if need more space).

Additional charges to up to date, paying customers will be billed for non-paying customers.

4. What do you want the Public Utility Commission to do about your complaint? (Use additional paper if need more space).

I want PUC to forbid these charges to take place. PGW should handle these delinquent customers some other way. Certainly, not by charging good customers more money.

5. You must sign and date your complaint below.

The information I have placed on this form is true and correct to the best of my knowledge. I understand that I could be punished under Pennsylvania State Law if I purposely give false information.

Joanne C. Murphy  
Signature

March 28, 2004  
Date

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2004 MAR 31 AM 12:46

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18

6. If you are represented by a lawyer you must provide your lawyer's name, address and telephone number.

Lawyer's Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Area Code/Phone Number \_\_\_\_\_

**Mail to:**  
Secretary  
Pennsylvania Public Utility Commission  
P. O. Box 3265  
Harrisburg, PA 17105-3265

**For more information, please contact the Secretary's Bureau at 717-772-7777.**

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 8, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0140

---

Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by JOANNE C MURPHY.

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

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2004 MAR 31 AM 12:45

SECRETARY'S BUREAU

R-00049157 C0141

ORIGINAL

Formal Complaint Form  
Pennsylvania Public Utility Commission

Please Print: (you may also type your answers directly onto the form as it appears on your screen)

1. Your name, mailing address and telephone number:

Name WILLIAM F. SMITH

Street/P.O.Box 4309 MARPLE ST. Apt #

City PHILA. State PA Zip 19136

County PHILA Area Code/Home Phone 215-624-1457  
Area Code/Work Phone

2. Name of company your complaint concerns: P6W

3. What is your complaint? (Use additional paper if need more space).

*I vehemently oppose an increase in my gas bill to cover the cost of the "deadbeats" who do not pay and this includes big business. What is wrong with your collection agency? If I owed a gas bill, they would come after me immediately.*

4. What do you want the Public Utility Commission to do about your complaint? (Use additional paper if need more space).

*Publish names of "deadbeats" and what they owe in the paper.  
Have the State take over P6W and get rid of "dead wood".*

5. You must sign and date your complaint below.

The information I have placed on this form is true and correct to the best of my knowledge. I understand that I could be punished under Pennsylvania State Law if I purposely give false information.

William F. Smith  
Signature

3/28/04  
Date

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*\* Has Mayor Street ever paid his past due bills from past years?*

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APR 12 2004

6. If you are represented by a lawyer you must provide your lawyer's name, address and telephone number.

Lawyer's Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Area Code/Phone Number \_\_\_\_\_

**Mail to:**  
Secretary  
Pennsylvania Public Utility Commission  
P. O. Box 3265  
Harrisburg, PA 17105-3265

**For more information, please contact the Secretary's Bureau at 717-772-7777.**

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 8, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0141

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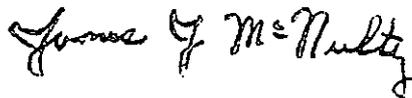
Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by WILLIAM F SMITH.

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

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APR 12 2004

ORIGINAL

R-00049157C0142

Formal Complaint Form  
Pennsylvania Public Utility Commission

Please Print: (you may also type your answers directly onto the form as it appears on your screen)

1. Your name, mailing address and telephone number:

Name LISA T. FELIX

Street/P.O.Box 4637 PINE ST. Apt # D-511

City PHILADELPHIA State PA Zip 19143

County PHILADELPHIA Area Code/Home Phone 215/476-7630  
Area Code/Work Phone 215/878-1647

2. Name of company your complaint concerns: PHILADELPHIA GAS WORKS

3. What is your complaint? (Use additional paper if need more space).

*PGW has proposed a rate increase to "recover the costs associated with increases in its uncollected billed revenues." While I understand that customers will pay for management and administrative activities, I do not accept that dutiful, paying customers will cover the unpaid bills of others. I do not support a rate increase to compensate for unpaid balances of scofflaws.*

4. What do you want the Public Utility Commission to do about your complaint? (Use additional paper if need more space).

*I want the PUC to mandate that any rate increase PGW imposes be limited to additional costs for the gas itself and/or administrative costs in recovering unpaid bills. Further, I want PUC to monitor the accounting for any rate increase so that paying customers are not paying for negligent accounts.*

5. You must sign and date your complaint below.

The information I have placed on this form is true and correct to the best of my knowledge. I understand that I could be punished under Pennsylvania State Law if I purposely give false information.

*Lisa T. Felix*  
Signature

3/28/04  
Date

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6. If you are represented by a lawyer you must provide your lawyer's name, address and telephone number.

Lawyer's Name \_\_\_\_\_ *none* \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Area Code/Phone Number \_\_\_\_\_

**Mail to:**

Secretary  
Pennsylvania Public Utility Commission  
P. O. Box 3265  
Harrisburg, PA 17105-3265

**For more information, please contact the Secretary's Bureau at 717-772-7777.**

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 8, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0142

---

Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by LISA T FELIX.

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

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R-00049157 00143

ORIGINAL

Formal Complaint Form  
Pennsylvania Public Utility Commission

Please Print: (you may also type your answers directly onto the form as it appears on your screen)

1. Your name, mailing address and telephone number:

Name ALBERT MYERS

Street/P.O.Box 4319 BLENK H AVE Apt #

City PHILADELPHIA State PA Zip 19136

County  Area Code/Home Phone 215-338-6792  
Area Code/Work Phone 11 11 61

2. Name of company your complaint concerns: PHILADELPHIA GAS WORKS

3. What is your complaint? (Use additional paper if need more space).

I DONT WANT TO PAY FOR PEOPLE WHO DONT PAY.

4. What do you want the Public Utility Commission to do about your complaint?  
(Use additional paper if need more space).

SHOT OFF GAS OF PEOPLE WHO DONT PAY GAS BILL.

5. You must sign and date your complaint below.

The information I have placed on this form is true and correct to the best of my knowledge. I understand that I could be punished under Pennsylvania State Law if I purposely give false information.

Albert Myers  
Signature

3-27-04  
Date

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APR 12 2004

6. If you are represented by a lawyer you must provide your lawyer's name, address and telephone number.

Lawyer's Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Area Code/Phone Number \_\_\_\_\_

**Mail to:**  
Secretary  
Pennsylvania Public Utility Commission  
P. O. Box 3265  
Harrisburg, PA 17105-3265

**For more information, please contact the Secretary's Bureau at 717-772-7777.**

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 8, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0143

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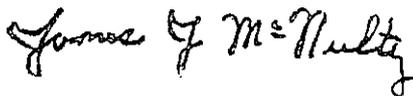
Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by ALBERT MYERS.

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

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Return Receipt Requested

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R-00049157 COM 44

ORIGINAL

Formal Complaint Form  
Pennsylvania Public Utility Commission

Please Print: (you may also type your answers directly onto the form as it appears on your screen)

1. Your name, mailing address and telephone number:

Name Russell MARCH

Street/P.O.Box 7180 COTTAGE ST Apt # \_\_\_\_\_

City Phila State PA Zip 19135

County Phila Area Code/Home Phone (215)333-7490  
Area Code/Work Phone RETIRED

2. Name of company your complaint concerns: P.M.W

3. What is your complaint? (Use additional paper if need more space).

*Their request to charge a surcharge to their customers that pay on time to cover delinquent customers. Worse customer service of ANY utility. impossible to get though when you try to call*

4. What do you want the Public Utility Commission to do about your complaint? (Use additional paper if need more space).

*Refuse Their request for the increase*

5. You must sign and date your complaint below.

The information I have placed on this form is true and correct to the best of my knowledge. I understand that I could be punished under Pennsylvania State Law if I purposely give false information.

Russell March  
Signature

3/28/04  
Date

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24

6. If you are represented by a lawyer you must provide your lawyer's name, address and telephone number.

Lawyer's Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Area Code/Phone Number \_\_\_\_\_

**Mail to:**  
Secretary  
Pennsylvania Public Utility Commission  
P. O. Box 3265  
Harrisburg, PA 17105-3265

**For more information, please contact the Secretary's Bureau at 717-772-7777.**

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 8, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0144

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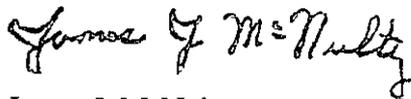
Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by RUSSELL MARCH.

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

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APR 12 2004



R-00049157C0145

R-0004

Formal Complaint Form  
Pennsylvania Public Utility Commission

ORIGINAL

Please Print: (you may also type your answers directly onto the form as it appears on your screen)

1. Your name, mailing address and telephone number:

Name DANIEL F BROZOSKI

Street/P.O.Box 4428 ALDINE ST. Apt # \_\_\_\_\_

City PHILA. State PA. Zip 19136

County PHILA. Area Code/Home Phone 215-333-6913  
Area Code/Work Phone N/A

2. Name of company your complaint concerns: PHILA GAS WORKS

3. What is your complaint? (Use additional paper if need more space).

THE PROPOSED RATE INCREASE FOR RESIDENTIAL CUSTOMERS WHO REGULARLY PAY THEIR BILLS PROMPTLY, TO SUBSIDIZE NON-PAYING CUSTOMERS. THIS IS THE REASON MORE "CONSCIENTIOUS" CITIZENS ARE LEAVING THIS CITY OF SLACKERS.

4. What do you want the Public Utility Commission to do about your complaint? (Use additional paper if need more space).

DENY ANY SUCH INCREASE. ADVISE ROW TO LEVEL EXECUTIVES TO CUT BACK FROM "THEIR" POCKET BOOKS AND FIND ALTERNATIVE BUDGET SOLUTIONS (FOR WHICH THEY ARE PAID TO DO).

5. You must sign and date your complaint below.

The information I have placed on this form is true and correct to the best of my knowledge. I understand that I could be punished under Pennsylvania State Law if I purposely give false information.

Daniel F. Brozowski  
Signature

3-28-04  
Date

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6. If you are represented by a lawyer you must provide your lawyer's name, address and telephone number.

Lawyer's Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Area Code/Phone Number \_\_\_\_\_

**Mail to:**  
Secretary  
Pennsylvania Public Utility Commission  
P. O. Box 3265  
Harrisburg, PA 17105-3265

**For more information, please contact the Secretary's Bureau at 717-772-7777.**

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 8, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0145

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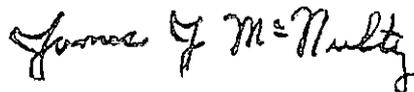
Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by DANIEL E BROZOSKI.

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
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2004 MAR 31 AM 12:43

SECRETARY'S BUREAU

R-00049157 CO 46

ORIGINAL

Formal Complaint Form  
Pennsylvania Public Utility Commission

Please Print: (you may also type your answers directly onto the form as it appears on your screen)

1. Your name, mailing address and telephone number:

Name ANTHONY J. CATALANO

Street/P.O.Box 4542 LORING ST. Apt # \_\_\_\_\_

City PHILA State PA Zip 19136

County PHILA Area Code/Home Phone 215-338-3117  
Area Code/Work Phone N/A

2. Name of company your complaint concerns: PHILA GAS WORKS

3. What is your complaint? (Use additional paper if need more space).

RAISING GAS BILL TO COVER UNPAID  
BILLS OF GAS CUSTOMERS WHO DO NOT  
PAY. VERY, VERY UNFAIR

4. What do you want the Public Utility Commission to do about your complaint?  
(Use additional paper if need more space).

STOP THE INCREASE  
ARE GAS EMPLOYEES ON THE UNPAID  
BILL LIST - IF SO TAKE FROM THEIR  
PAYS.

5. You must sign and date your complaint below.

The information I have placed on this form is true and correct to the best of my knowledge. I understand that I could be punished under Pennsylvania State Law if I purposely give false information.

Anthony J. Catalano &  
Eileen M. Catalano

Signature

Date

3/29/04

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APR 12 2004

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6. If you are represented by a lawyer you must provide your lawyer's name, address and telephone number.

Lawyer's Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Area Code/Phone Number \_\_\_\_\_

**Mail to:**  
Secretary  
Pennsylvania Public Utility Commission  
P. O. Box 3265  
Harrisburg, PA 17105-3265

**For more information, please contact the Secretary's Bureau at 717-772-7777.**

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 8, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0146

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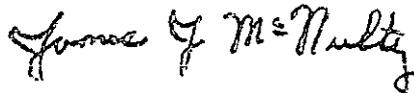
Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by ANTHONY J CATALANO.

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

dbS

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**DOCKETED**  
APR 12 2004

ORIGINAL

R=00049157 C0147

Formal Complaint Form  
Pennsylvania Public Utility Commission

Please Print: (you may also type your answers directly onto the form as it appears on your screen)

1. Your name, mailing address and telephone number:

Name JOAN TARPINIAN

Street/P.O.Box 3110. STIRLING ST. Apt #

City PHILA. State PA Zip 19149-3116

County PA. Area Code/Home Phone 215 988 1589  
Area Code/Work Phone

2. Name of company your complaint concerns: P.G.W

3. What is your complaint? (Use additional paper if need more space).

*I am on a fixed income with social security and can not afford to pay for someone else's gas bill. I keep my heat low as to be able to afford to pay my bills!*

4. What do you want the Public Utility Commission to do about your complaint? (Use additional paper if need more space).

*Do not charge us for other people's gas bills.*

5. You must sign and date your complaint below.

The information I have placed on this form is true and correct to the best of my knowledge. I understand that I could be punished under Pennsylvania State Law if I purposely give false information.

Joan H. Tarpinian  
Signature

Mar 29, 2004  
Date

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2004 MAR 31 AM 12:43

SECRETARY'S BUREAU

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APR 12 2004<sub>3</sub>

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COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 8, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0147

---

Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by JOAN TARPINIAN.

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

dbb

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ORIGINAL

R-00049157 C0148

Formal Complaint Form  
Pennsylvania Public Utility Commission

Please Print: (you may also type your answers directly onto the form as it appears on your screen)

1. Your name, mailing address and telephone number:

Name COAIL A. YOUNG

Street/P.O.Box 1421 Bristol RD. Apt # \_\_\_\_\_

City Churchville State PA Zip 18966

County Ducks Area Code/Home Phone 215-355-9440  
Area Code/Work Phone 215-676-6500

2. Name of company your complaint concerns: PCW

3. What is your complaint? (Use additional paper if need more space).

AS REPORTED IN THE NEWS, PCW WANTS TO RAISE THE RATES ON PEOPLE WHO PAY THEIR BILL ON TIME. I WANT THIS INSANITY TO STOP! I DON'T WANT THIS INCREASE TO HAPPEN.

4. What do you want the Public Utility Commission to do about your complaint? (Use additional paper if need more space).

Make the Desoberts responsible for themselves. We WORK HARD TO PAY OUR Bills promptly, why should we pay for people trying to abuse the system. MAKE THEM PAY OR SHUT OFF SERVICE TO THEM!!! Like you would DO TO US.

5. You must sign and date your complaint below.

The information I have placed on this form is true and correct to the best of my knowledge. I understand that I could be punished under Pennsylvania State Law if I purposely give false information.

Coail Young  
Signature

3/28/04  
Date

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APR 12 2004

28

6. If you are represented by a lawyer you must provide your lawyer's name, address and telephone number.

Lawyer's Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Area Code/Phone Number \_\_\_\_\_

**Mail to:**  
Secretary  
Pennsylvania Public Utility Commission  
P. O. Box 3265  
Harrisburg, PA 17105-3265

**For more information, please contact the Secretary's Bureau at 717-772-7777.**

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 8, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0148

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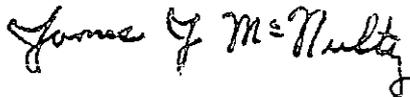
Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by GAIL A YOUNG.

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

dbS

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APR 12 2004

ORIGINAL

R-00049157C0149

SECRETARY'S BUREAU

004 MAR 31 AM 12:33

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Formal Complaint Form  
Pennsylvania Public Utility Commission

Please Print: (you may also type your answers directly onto the form as it appears on your screen)

1. Your name, mailing address and telephone number:

Name Margaret Amberg Turk

Street/P.O.Box 713 S. 3rd St. Apt # 1st floor

City Philadelphia State Pa Zip 19147

County Philadelphia Area Code/Home Phone 215-432-6726  
Area Code/Work Phone \_\_\_\_\_

2. Name of company your complaint concerns: PGW

3. What is your complaint? (Use additional paper if need more space).

I am in opposition to the bill that would make PGW paying customers pay (a surcharge / tax / additional money) for those who do not pay their PGW bill.

4. What do you want the Public Utility Commission to do about your complaint? (Use additional paper if need more space).

Deny request of PGW to charge paying customers for non-paying

5. You must sign and date your complaint below.

The information I have placed on this form is true and correct to the best of my knowledge. I understand that I could be punished under Pennsylvania State Law if I purposely give false information.

Margaret Amberg Turk  
Signature

3/29/04  
Date

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6. If you are represented by a lawyer you must provide your lawyer's name, address and telephone number.

Lawyer's Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Area Code/Phone Number \_\_\_\_\_

**Mail to:**  
Secretary  
Pennsylvania Public Utility Commission  
P. O. Box 3265  
Harrisburg, PA 17105-3265

**For more information, please contact the Secretary's Bureau at 717-772-7777.**

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 8, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0149

---

Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by MARGARET AMBERG TURK.

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

dbs

**DOCKETED**  
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ORIGINAL

R-00049157 C0150

Formal Complaint Form  
Pennsylvania Public Utility Commission

Please Print: (you may also type your answers directly onto the form as it appears on your screen)

1. Your name, mailing address and telephone number:

Name MRS. DONNA A. LARSEN (SORRY NEW ADDRESS)  
Street/P.O.Box ~~7156~~ 7156 HEGERMAN ST. apt # 3  
City Phila. State PA. Zip 19135  
County PHILA. Area Code/Home Phone (215) 331-4204  
Area Code/Work Phone (215) 685-1312

2. Name of company your complaint concerns: PGW

3. What is your complaint? (Use additional paper if need more space).

PROPOSED RATE INCREASE.

4. What do you want the Public Utility Commission to do about your complaint?  
(Use additional paper if need more space).

STOP THE RATE INCREASE. FORCE PGW TO COLLECT ALL MONIES OWED TO THEM. WHEN THEY DO THIS, THEN THEY WILL BE ABLE TO LOWER RATES. TELL PGW TO INSTALL "PAY AS YOU USE" METERS IN ALL HOMES DELINQUENT.

5. You must sign and date your complaint below.

LOOK INTO WHERE ALL PGW'S MONEY GOES!

The information I have placed on this form is true and correct to the best of my knowledge. I understand that I could be punished under Pennsylvania State Law if I purposely give false information.

Donna A. Larsen 29 March 04  
Signature Date

Continued on next page

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2004 MAR 31 AM 12:22

SECRETARY'S BUREAU

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APR 12 2004

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30

6. If you are represented by a lawyer you must provide your lawyer's name, address and telephone number.

Lawyer's Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Area Code/Phone Number \_\_\_\_\_

**Mail to:**  
Secretary  
Pennsylvania Public Utility Commission  
P. O. Box 3265  
Harrisburg, PA 17105-3265

**For more information, please contact the Secretary's Bureau at 717-772-7777.**

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 8, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0150

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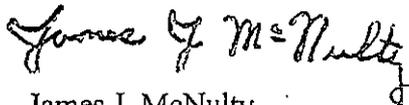
Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by DONNA A LARSEN.

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

dbs

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APR 12 2004

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FOLDER**

ORIGINAL

R-00049157 00151

Formal Complaint Form  
Pennsylvania Public Utility Commission

Please Print: (you may also type your answers directly onto the form as it appears on your screen)

1. Your name, mailing address and telephone number:

Name DOROTHY MILLER

Street/P.O.Box 1218 HELLERMAN ST. Apt # \_\_\_\_\_

City PHILADELPHIA, State PA. Zip 19111

County \_\_\_\_\_ Area Code/Home Phone 215-289-1581  
Area Code/Work Phone NONE

2. Name of company your complaint concerns: PGW

3. What is your complaint? (Use additional paper if need more space).

NOTICE OF PROPOSED GAS COST INCREASE  
INCLUDED WITH MY GAS BILL

4. What do you want the Public Utility Commission to do about your complaint?  
(Use additional paper if need more space).

BECAUSE MY HUSBAND + I ARE SENIOR CITIZENS  
AND ON A FIXED INCOME, WE REFUSE TO PAY FOR  
PEOPLE THAT ARE DELINQUENT OR DONOT PAY AT ALL.  
WHY SHOULD WE BE PENALIZED?

5. You must sign and date your complaint below.

The information I have placed on this form is true and correct to the best of my knowledge. I understand that I could be punished under Pennsylvania State Law if I purposely give false information.

Dorothy Miller  
Signature

3/28/04  
Date

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COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 8, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0151

---

Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by DOROTHY MILLER.

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

db5

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ORIGINAL

R-00049157 C0152

Formal Complaint Form  
Pennsylvania Public Utility Commission

Please Print: (you may also type your answers directly onto the form as it appears on your screen)

1. Your name, mailing address and telephone number:

Name Joseph KIRSCHMAN

Street/P.O.Box 4014 OAKMONT ST, Apt # -

City Philadelphia State PA. Zip 19136

County Phila. Area Code/Home Phone (215) 338-0882  
Area Code/Work Phone -

2. Name of company your complaint concerns: Phila. Gas Works

3. What is your complaint? (Use additional paper if need more space).  
RAISING RATES TO PAY FOR PEOPLE WHO DONT PAY BILLS. WE KEEP OUR THERMOSTAT LOW TO SAVE ON GAS BILLS. I AM A CANCER PATIENT ON CHEMO AND AM COLD. I WEAR A JACKET AT TIMES. NOW I HAVE TO PAY MORE FOR THOSE WHO DONT PAY. I AM RETIRED ON A LIMITED INCOME

4. What do you want the Public Utility Commission to do about your complaint?  
(Use additional paper if need more space).  
THE GAS COMPANY OBVIOUSLY MISMANAGES MONEY. NEED SOMEBODY WHO CAN HANDLE IT BETTER. ALSO GO AFTER PEOPLE WHO DONT PAY. WHY SHOULD I PAY FOR THEM.

5. You must sign and date your complaint below.

The information I have placed on this form is true and correct to the best of my knowledge. I understand that I could be punished under Pennsylvania State Law if I purposely give false information.

Joseph Kirschman  
Signature

MAR. 29, 2004  
Date

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12:21 PM MAR 31 2004  
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6. If you are represented by a lawyer you must provide your lawyer's name, address and telephone number.

Lawyer's Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Area Code/Phone Number \_\_\_\_\_

**Mail to:**  
Secretary  
Pennsylvania Public Utility Commission  
P. O. Box 3265  
Harrisburg, PA 17105-3265

**For more information, please contact the Secretary's Bureau at 717-772-7777.**

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 8, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0152

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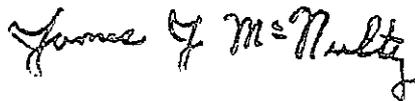
Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by JOSEPH KIRSCHMAN.

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

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2004 MAR 31 AM 12:15

SECRETARY'S BUREAU

R-00049157 C0153

Formal Complaint Form  
Pennsylvania Public Utility Commission

ORIGINAL

Please Print: (you may also type your answers directly onto the form as it appears on your screen)

1. Your name, mailing address and telephone number:

Name DORIS BREUNINGER

Street/P.O.Box 1029 E. COLUMBIA AVE Apt#

City PHILA State PA Zip 19125

County Phila Area Code/Home Phone 215-634-2181  
Area Code/Work Phone

2. Name of company your complaint concerns: PGW

3. What is your complaint? (Use additional paper if need more space).

*I am on a fixed income and soon I am going to be asked / charged to pay for residents of Phila who do not pay their gas Bill - I barely am able to pay mine - But make sure I do*

4. What do you want the Public Utility Commission to do about your complaint? (Use additional paper if need more space).

*maybe if 'TOP Personal' didn't get all those high Bonus - RAISES that money can go to help - or punish those who do not pay (turn gas OFF) instead of us who do*

5. You must sign and date your complaint below:

The information I have placed on this form is true and correct to the best of my knowledge. I understand that I could be punished under Pennsylvania State Law if I purposely give false information.

Doris Breuninger  
Signature

3/28/04  
Date

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APR 12 2004

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6. If you are represented by a lawyer you must provide your lawyer's name, address and telephone number.

Lawyer's Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Area Code/Phone Number \_\_\_\_\_

**Mail to:**

Secretary  
Pennsylvania Public Utility Commission  
P.O. Box 3265  
Harrisburg, PA 17105-3265

**For more information, please contact the Secretary's Bureau at 717-772-7777.**

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 8, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0153

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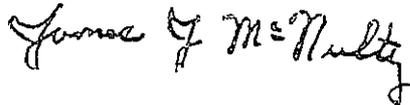
Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by DORIS BREUNINGER.

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

db5

**DOCKETED**  
APR 12 2004

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ORIGINAL

R-00049157C0154

Formal Complaint Form  
Pennsylvania Public Utility Commission

SECRETARY'S BUREAU

2004 MAR 31 AM 12:53

RECEIVED

Please Print: (you may also type your answers directly onto the form as it appears on your screen)

1. Your name, mailing address and telephone number:

Name THOMAS C. De Lellis

Street/P.O.Box 4326 CHIPPENDALE AVE. Apt # \_\_\_\_\_

City PHILA. State PA. Zip 19136

County \_\_\_\_\_ Area Code/Home Phone 215-332-8688  
Area Code/Work Phone \_\_\_\_\_

2. Name of company your complaint concerns: PHILA. GAS. WORKS

3. What is your complaint? (Use additional paper if need more space).

MY FAMILY STRONGLY OBJECTS TO THE IDEA OF BEING PENALIZED FOR PAYING OUR GAS BILLS ON TIME. THIS PRACTICE WILL ONLY ADD TO MORE FAMILIES

4. What do you want the Public Utility Commission to do about your complaint? (Use additional paper if need more space). LEAVING THE CITY.

DO A BETTER JOB OF POLICING DELINQUENT CUSTOMERS.

5. You must sign and date your complaint below.

The information I have placed on this form is true and correct to the best of my knowledge. I understand that I could be punished under Pennsylvania State Law if I purposely give false information.

Thomas C. De Lellis  
Signature

3/29/04  
Date

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APR 12 2004

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6. If you are represented by a lawyer you must provide your lawyer's name, address and telephone number.

Lawyer's Name \_\_\_\_\_  
Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Area Code/Phone Number \_\_\_\_\_

**Mail to:**  
Secretary  
Pennsylvania Public Utility Commission  
P. O. Box 3265  
Harrisburg, PA 17105-3265

**For more information, please contact the Secretary's Bureau at 717-772-7777.**

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 8, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0154

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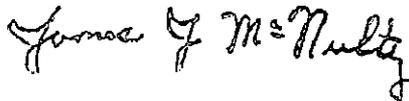
Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by THOMAS C DE LELLIS.

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

dbs

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**DOCKETED**  
APR 12 2004

ORIGINAL

R-00049157C0155

Formal Complaint Form  
Pennsylvania Public Utility Commission

Please Print: (you may also type your answers directly onto the form as it appears on your screen)

1. Your name, mailing address and telephone number:

Name MISS FRANCES CANNIZZO

Street/P.O.Box 3648 JASPER ST. Apt # \_\_\_\_\_

City PHILA. State PA. Zip 19136

County PHILA. Area Code/Home Phone 215-533-1007  
Area Code/Work Phone \_\_\_\_\_

2. Name of company your complaint concerns: PHILADELPHIA GAS WORKS

3. What is your complaint? (Use additional paper if need more space).

THE MAJOR WANTS TO RAISE OUR GAS BILLS TO PAY FOR THE PEOPLE UNABLE TO PAY THEIR GAS BILLS. I'M A SENIOR CITIZEN LIVING ON A FIXED INCOME, IT IS DIFFICULT FOR ME TO PAY MY GAS BILLS, BUT I'M PAYING THEM. IF ~~THE~~ MY BILLS ARE RAISED ANY HIGHER I WON'T BE ABLE TO PAY MY BILLS EITHER. WHICH WOULD MAKE MORE PEOPLE NOT PAYING.

4. What do you want the Public Utility Commission to do about your complaint? (Use additional paper if need more space).

COLLECTOR SHUT OFF FROM THE PEOPLE NOT PAYING THEIR GAS.

5. You must sign and date your complaint below.

The information I have placed on this form is true and correct to the best of my knowledge. I understand that I could be punished under Pennsylvania State Law if I purposely give false information.

Frances Cannizzo  
Signature

3/29/04  
Date

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DOCKETED  
APR 12 2004

RECEIVED  
2004 MAR 31 AM 12:35  
SECRETARY'S BUREAU

6. If you are represented by a lawyer you must provide your lawyer's name, address and telephone number.

Lawyer's Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Area Code/Phone Number \_\_\_\_\_

**Mail to:**  
Secretary  
Pennsylvania Public Utility Commission,  
P. O. Box 3265  
Harrisburg, PA 17105-3265

**For more information, please contact the Secretary's Bureau at 717-772-7777.**

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 8, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0155

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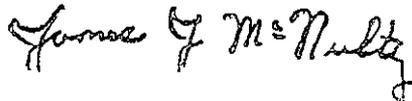
Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by FRANCES CANNIZZO.

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

db's

**DOCKETED**  
APR 12 2004  
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SECRETARY'S BUREAU

R-00049157C0156

Formal Complaint Form  
Pennsylvania Public Utility Commission

ORIGINAL

Please Print: (you may also type your answers directly onto the form as it appears on your screen)

1. Your name, mailing address and telephone number:

Name MRS. JOHN WOOD

Street/P.O.Box 4314 SHEFFIELD AVE Apt # \_\_\_\_\_

City PHILA State PA Zip 19136

County \_\_\_\_\_ Area Code/Home Phone 215-333-8650  
Area Code/Work Phone \_\_\_\_\_

2. Name of company your complaint concerns: PHILA. GAS WORKS

3. What is your complaint? (Use additional paper if need more space).

I THINK WE PAY ENOUGH NOW. WE ARE BOTH  
RETIRED & CAN NOT AFFORD ANY MORE.

WE PAY OUR OWN MEDICAL INSURANCE & 50% OF OUR MEDICINE

4. What do you want the Public Utility Commission to do about your complaint?  
(Use additional paper if need more space).

NO MORE RISES

5. You must sign and date your complaint below.

The information I have placed on this form is true and correct to the best of my knowledge. I understand that I could be punished under Pennsylvania State Law if I purposely give false information.

Signature Janet R. Hood

Date 3-29-04

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6. If you are represented by a lawyer you must provide your lawyer's name, address and telephone number.

Lawyer's Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Area Code/Phone Number \_\_\_\_\_

**Mail to:**  
Secretary  
Pennsylvania Public Utility Commission  
P. O. Box 3265  
Harrisburg, PA 17105-3265

**For more information, please contact the Secretary's Bureau at 717-772-7777.**

COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 8, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0156

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Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by JANET R (MRS JOHN) WOOD.

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

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P.E.U.C.  
SECRETARY'S BUREAU

Formal Complaint Form  
Pennsylvania Public Utility Commission

ORIGINAL

Please Print: (you may also type your answers directly onto the form as it appears on your screen)

1. Your name, mailing address and telephone number:

Name SANDRA ZELONIS

Street/P.O.Box 7149 CHARLES STREET Apt #

City PHILADELPHIA State PA Zip 19135

County PHILADELPHIA Area Code/Home Phone 215 338 3967  
Area Code/Work Phone

2. Name of company your complaint concerns: PHILADELPHIA GAS WORKS

3. What is your complaint? (Use additional paper if need more space).

*I do not feel it is fair for me to pay extra for a company's inability to collect revenue. I pay on time every month as I expect most people do. I can not pay on time the full amount if rates go much higher, wages are not going up.*

4. What do you want the Public Utility Commission to do about your complaint?  
(Use additional paper if need more space).

*I would like the request for rate increases for September 2004 be denied. Recovering the cost of gas is one thing but paying someone else's bills are another.*

5. You must sign and date your complaint below.

The information I have placed on this form is true and correct to the best of my knowledge. I understand that I could be punished under Pennsylvania State Law if I purposely give false information.

Sandra L Zelonis  
Signature

March 30, 2004  
Date

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APR 12 2004

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COMMONWEALTH OF PENNSYLVANIA  
PENNSYLVANIA PUBLIC UTILITY COMMISSION  
P O BOX 3265, HARRISBURG PA 17105-3265

APRIL 8, 2004

GREGORY J STUNDER ESQUIRE  
800 WEST MONTGOMERY AVENUE  
PHILADELPHIA PA 19122

RE: PA PUC vs PHILADELPHIA GAS WORKS  
Docket Number R-00049157C0157

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Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by SANDRA ZELONIS.

This complaint, of which the attached is a true and correct copy, has been presented and filed of record with the Pennsylvania Public Utility Commission. The Pennsylvania Public Utility Code, 66 Pa. C.S., requires the Commission to serve on each party named in a complaint a copy of the complaint.

Within twenty (20) days from the date on which this complaint is served, you may either satisfy this complaint or comply with the provisions of 52 Pa. Code, Section 5.61 et seq., as amended.

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

dbs

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APR 12 2004

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