

ORIGINAL

PENNSYLVANIA PUBLIC UTILITY COMMISSION

Formal Complaint Form

Please print or type. R-000614930001

1. CUSTOMER NAME (COMPLAINANT)

Your name, mailing address, county, telephone number, utility account number and service address:

Name KENNETH C. SPRINGIRTH

Street/P.O. Box 4720 CLIFF DRIVE Apt # _____

City ERIE State PA Zip 16511

County ERIE

Area Code/HOME Phone 814-899-4202

Area Code/WORK Phone _____

Utility Account Number 3661239-01
(from your bill)

DOCUMENT FOLDER

If your complaint involves utility service provided to a different address than your mailing address, please list this information below.

Name _____

Street/P.O. Box _____

City _____ State _____ Zip _____

RECEIVED
2006 JUN 13 AM 9:22
A.P.U.C.
SECRETARY'S BUREAU

2. UTILITY NAME (RESPONDENT)

Name of utility company your complaint concerns: NATIONAL FUEL GAS DISTRIBUTION CORPORATION

3. TYPE OF UTILITY (check one)

- ELECTRIC
- GAS
- WATER
- TELEPHONE
(local, long distance)
- STEAM HEAT
- WASTE WATER
- MOTOR CARRIER
(taxi, moving company, limousine)

DOCKETED

JUN 16 2006

4

4. COMPLAINT (check one)

A. In general, what is your complaint?

- I want to oppose the company's proposed rate increase.
- There are incorrect charges on my bill.
- There is a reliability, safety or quality problem with my utility service.
- I received a notice that my utility service is being terminated.
- I would like a payment agreement.
- Other.
(explain)

B. State the facts of your complaint.

Include any specific dates, times or places that are important. If the complaint is about a bill, tell us about any charges that you believe are not correct. Use additional paper if you need more space. Provide copies of all relevant documents you believe will support your complaint.

- A. SUPPLEMENT NO. 61 TO TARIFF GAS-PA, P.U.C. NO. 9 FILED BY NATIONAL FUEL GAS DISTRIBUTION CORPORATION (NFGD) ON MAY 31, 2006 AND PROPOSED TO BECOME EFFECTIVE JULY 30, 2006 WOULD INCREASE NFGD'S ANNUAL REVENUES BY APPROXIMATELY \$25,892,000 PER YEAR.
- B. FOR THE RESIDENTIAL CLASS, NFGD IS PROPOSING A 72% INCREASE IN THE RESIDENTIAL CUSTOMER CHARGE FROM \$12.00 TO \$20.64 PER MONTH.
- C. THE NFGD FILING VOL I EXHIBIT #2 SCHEDULE 2 PAGE 1 SHOWS 7.19% RATE OF RETURN UNDER PRESENT RATES AND 9.48% RATE OF RETURN UNDER PROPOSED RATES.

5. RELIEF

What do you want the Public Utility Commission to do about your complaint? Use additional paper if you need more space. KENNETH C. SPRINGIRTH REQUESTS:

- A. THE PA. P.U.C. SHOULD SUSPEND AND INVESTIGATE THE PROPOSED TARIFF.
- B. HOLD AN EVENING PUBLIC HEARING IN ERIE, PA.
- C. DENY NFGD THE FOLLOWING EXPENSES SHOWN IN VOL III EXHIBIT 104 SCHEDULE 3 PAGE 1 FORECASTED FOR THE YEAR ENDING JANUARY 31, 2007 \$841,192 RATE CASE EXPENSE; \$605,164 ADVERTISING EXPENSE; \$204,263 DUES; AND ANY OTHER EXPENSES THAT ARE NOT USEFUL TO CUSTOMERS.
- D. DISALLOW THE PROPOSED RIDER I, "ENHANCED ENERGY EFFICIENCY PROGRAM COST RECOVERY RIDER" UNDER WHICH ANY DECLINE IN AVERAGE USAGE PER ACCOUNT FOR THE SMALL VOLUME CUSTOMER CLASSES WOULD BE RECOVERED THROUGH AN ANNUAL CHARGE. THE FEE SURCHARGE RATE IS A COMPLICATED CALCULATION THAT WOULD MAKE IT MORE DIFFICULT FOR CUSTOMERS TO FIGURE OUT THEIR GAS BILL AND CUSTOMERS WOULD ACTUALLY BE PENALIZED FOR CONSERVING NATURAL GAS.

6. PROTECTION FROM ABUSE

Answer the following question if your complaint is against a natural gas distribution company, an electric distribution company or a water company **AND** your complaint is about a billing problem, an application for service problem, a termination of service problem or a request for a payment agreement.

Has a court granted a "Protection from Abuse" order for your personal safety?

YES

NO

7. PRIOR UTILITY CONTACT

Answer the following question only if you are a residential customer and your complaint is against an electric distribution utility, natural gas distribution utility or a water distribution utility.

Have you spoken to a utility company representative about this complaint?

YES

(includes appeals of BCS determinations)

NO

If you tried to, but could not speak to a utility company representative about your complaint, please explain why.

8. VERIFICATION AND SIGNATURE

You must print or type your name below on the line provided for the verification paragraph, and you must sign and date (in ink) this form on the lines provided.

Verification:

I KENNETH C. SPRINGIRTH, hereby state that the facts above set forth are true and correct (or are true and correct to the best of my knowledge, information and belief) and that I expect to be able to prove the same at a hearing held in this matter. I understand that the statements herein are made subject to the penalties of 18 Pa. C.S. § 4904 (relating to unsworn falsification to authorities).

Kenneth C. Springirth
(Signature)

June 8, 2006
(Date)

9. LEGAL REPRESENTATION (IF ANY)

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

Lawyer's Name _____

Street _____

City _____ State _____ Zip _____

Area Code/Phone Number _____

10. FILING

Please return the completed form to one of the addresses listed below:

If using U.S. Postal Service:

If using overnight delivery service:

| | |
|--|--|
| Secretary Pennsylvania Public Utility Commission P.O. Box 3265 Harrisburg, PA 17105 | Secretary Pennsylvania Public Utility Commission 400 North Street Commonwealth Keystone Building, 2 nd Floor Harrisburg, Pennsylvania 17120 |
|--|--|

Facsimiles and/or electronic filings of the complaint form will not be accepted.

If you have any questions about filling out this form, please contact the Secretary's Bureau at 717-772-7777.

Keep a copy of your complaint for your records.

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

JUNE 16, 2006

JOHN H. ISOM
POST & SCHELL
17 NORTH SECOND STREET
12TH FLOOR
HARRISBURG PA 17101-1601

DOCUMENT
FOLDER

RE: PA PUC vs. NATIONAL FUEL GAS DISTRIBUTION CORPORATION
Docket Number R-00061493C0001

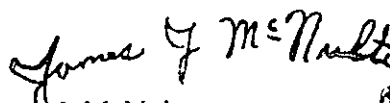
Dear Sir/Madam:

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

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

jih

DOCKETED
JUN 16 2006

ORIGINAL

PENNSYLVANIA PUBLIC UTILITY COMMISSION

Formal Complaint Form

RECEIVED

2006 JUN 15 AM 9:08

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

Please print or type. R-00061493C0002

1. CUSTOMER NAME (COMPLAINANT)

Your name, mailing address, county, telephone number, utility account number and service address:

Name HELEN M. ELLETSON

Street/P.O. Box 3424 NORTH ST Apt # 1ST FL

City ERIE State PA Zip 16510

County ERIE

Area Code/HOME Phone 814-572-8877

Area Code/WORK Phone _____

Utility Account Number 5911325-01
(from your bill)

DOCUMENT
FOLDER

If your complaint involves utility service provided to a different address than your mailing address, please list this information below.

Name _____

Street/P.O. Box _____

City _____ State _____ Zip _____

DOCKETED
JUN 16 2006

2. UTILITY NAME (RESPONDENT)

Name of utility company your complaint concerns: NATIONAL FUEL

3. TYPE OF UTILITY (check one)

ELECTRIC

STEAM HEAT

GAS

WASTE WATER

WATER

MOTOR CARRIER
(taxi, moving company, limousine)

TELEPHONE
(local, long distance)

4. COMPLAINT (check one)

A. In general, what is your complaint?

- I want to oppose the company's proposed rate increase.
- There are incorrect charges on my bill.
- There is a reliability, safety or quality problem with my utility service.
- I received a notice that my utility service is being terminated.
- I would like a payment agreement.
- Other.
(explain)

B. State the facts of your complaint.

Include any specific dates, times or places that are important. If the complaint is about a bill, tell us about any charges that you believe are not correct. Use additional paper if you need more space. Provide copies of all relevant documents you believe will support your complaint.

5. RELIEF

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

I WOULD LIKE THE PROPOSED RATE HIKE TO BE DENIED BECAUSE THE RATE HIKE IS TO PAY FOR PAY RAISES TO EMPLOYEES. THIS SHOULD BE TAKEN OUT OF 1) THE PROFIT MARGIN THE GAS COMPANY MAKES AND 2) THE AMOUNT OF DIVIDENDS PAID TO ITS STOCK HOLDERS. THE PEOPLE ON A FIX INCOME, SUCH AS MYSELF AND HUSBAND ARE FINDING IT HARDER TO MAKE ENDS MEET. WE CANNOT EVEN AFFORD HEALTH INSURANCE! THEIR METER READERS NEED TO DO THE JOB THEY ARE GETTING PAID FOR!! THANK YOU

6. PROTECTION FROM ABUSE

Answer the following question if your complaint is against a natural gas distribution company, an electric distribution company or a water company AND your complaint is about a billing problem, an application for service problem, a termination of service problem or a request for a payment agreement.

Has a court granted a "Protection from Abuse" order for your personal safety?

YES

NO

7. PRIOR UTILITY CONTACT

Answer the following question only if you are a residential customer and your complaint is against an electric distribution utility, natural gas distribution utility or a water distribution utility.

Have you spoken to a utility company representative about this complaint?

YES
(includes appeals of BCS determinations)

NO

If you tried to, but could not speak to a utility company representative about your complaint, please explain why.

8. VERIFICATION AND SIGNATURE

You must print or type your name below on the line provided for the verification paragraph, and you must sign and date (in ink) this form on the lines provided.

Verification:

I HELEN M. ELLETSON hereby state that the facts above set forth are true and correct (or are true and correct to the best of my knowledge, information and belief) and that I expect to be able to prove the same at a hearing held in this matter. I understand that the statements herein are made subject to the penalties of 18 Pa. C.S. § 4904 (relating to unsworn falsification to authorities).

Helen M. Elletson
(Signature)

6/7/06
(Date)

9. LEGAL REPRESENTATION (IF ANY)

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

Lawyer's Name _____

Street _____

City _____ State _____ Zip _____

Area Code/Phone Number _____

10. FILING

Please return the completed form to one of the addresses listed below:

If using U.S. Postal Service:

If using overnight delivery service:

| | |
|--|--|
| Secretary Pennsylvania Public Utility Commission P.O. Box 3265 Harrisburg, PA 17105 | Secretary Pennsylvania Public Utility Commission 400 North Street Commonwealth Keystone Building, 2 nd Floor Harrisburg, Pennsylvania 17120 |
|--|--|

Facsimiles and/or electronic filings of the complaint form will not be accepted.

If you have any questions about filling out this form, please contact the Secretary's Bureau at 717-772-7777.

Keep a copy of your complaint for your records.

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

JUNE 16, 2006

JOHN H. ISOM
POST & SCHELL
17 NORTH SECOND STREET
12TH FLOOR
HARRISBURG PA 17101-1601

DOCUMENT
FOLDER

RE: PA PUC vs. NATIONAL FUEL GAS DISTRIBUTION CORPORATION
Docket Number R-00061493C0002

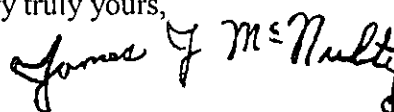
Dear Sir/Madam:

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

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

jih

DOCKETED
JUN 16 2006



OFFICE OF CONSUMER ADVOCATE

555 Walnut Street, 5th Floor, Forum Place
Harrisburg, Pennsylvania 17101-1923
(717) 783-5048
800-684-6560 (in PA only)

IRWINA. POPOWSKY
Consumer Advocate

FAX (717) 783-7152
consumer@paoca.org

June 15, 2006

DOCUMENT
FOLDER

ORIGINAL

James J. McNulty
Secretary
PA Public Utility Commission
Commonwealth Keystone Building
400 North Street
Harrisburg, PA 17120

Re: Pennsylvania Public Utility Commission
v.
National Fuel Gas Distribution Corporation
Docket No. R-00061493 **CO003**

Dear Secretary McNulty:

Enclosed please find for filing an original and three (3) copies of the Office of Consumer Advocate's Formal Complaint and Public Statement, in the above-captioned proceeding.

Copies have been served upon all parties of record as shown on the attached Certificate of Service.

Sincerely,

Aron J. Beatty
Assistant Consumer Advocate
PA Attorney I.D. # 86625

Enclosures

cc: All parties of record
Chief Administrative Law Judge

SECRETARY'S OFFICE

2006 JUN 15 PM 4:18

45

ORIGINAL

2005 JUN 15 10:16:18
UTILITY'S DIVISION

Pennsylvania Public Utility Commission

Formal Complaint Form

Please Print.

R-000614930003

1. Your name, mailing address, telephone number and utility account number:

Name Irwin A. Popowsky, Consumer Advocate

Street/P.O.Box 555 Walnut Street 5th Floor Forum Place Apt # _____

City Harrisburg State Pennsylvania Zip 17101-1923

County Dauphin

Area Code/Home Phone _____ Area Code/Work Phone (717)783-5048

Utility Account Number _____

If the above mailing address differs from the address where the utility service is provided, list this information below.

Name _____

Street/P.O. Box _____

City _____ State _____ Zip _____

County _____

2. Name of utility company your complaint concerns: _____

3. Type of Utility (circle one):

GAS

WATER

MOTOR CARRIER

STEAM HEAT

ELECTRIC

SEWER

TELEPHONE – (LOCAL OR LONG DISTANCE)

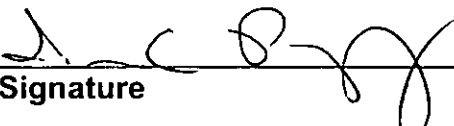
**DOCUMENT
FOLDER**

DOCKETED
JUN 16 2006

4. What is your complaint? (Use additional paper if you need more space and provide copies of any relevant documentation you believe will support your complaint).
 - A. On May 31, 2006, National Fuel Gas Distribution Corporation (NFGD or Company) filed Supplement No. 61 to Tariff Gas - Pa. P.U.C. No. 9 at Docket No. R-00061493 (Tariff). The Company proposes to increase rates to produce additional annual operating revenues of \$25.8 million, or 6.1%, over present revenues. The Company proposes that the rate increase would become effective on or about July 30, 2006.
 - B. NFGD is engaged in the business of furnishing natural gas service to approximately 214,000 residential, commercial, industrial, resale and transportation customers in 14 counties in northwestern Pennsylvania.
 - C. For the residential class, the Company is proposing an overall increase in rates of 6.1%. A residential customer using 100 Mcf annually will see their average bill rise from \$143.94 per month to \$153.83 per month, or by 6.9%. As part of this increase, the Company is proposing a 72% increase to the monthly customer charges for Residential Service. If the rates were to be approved as proposed by the Company, the monthly Customer Charge for Residential Service would increase from \$12 to \$20.64.
 - D. The Company's proposed rate increase, if approved, will produce a 9.48% overall rate of return on its original cost rate base, including an 12.25% rate of return on common equity.
 - E. The Consumer Advocate is empowered to represent the interests of consumers before the Pennsylvania Public Utility Commission, pursuant to Act 161 of the General Assembly, as amended, 71 P.S. §§ 309-1, et seq.
 - F. A preliminary examination of the Company's filing, including the Company's proposed surcharge recovery of lost margin associated with reduced consumption, surcharge recovery of storage gas working capital and a portion of uncollectible costs, seasonal rates, 72% increase in residential customer charges and otherwise modified rate design and a program for purchase of small customer receivables, indicates that the proposed changes and increases in rates, proposed rate schedule modifications and proposed changes in rate policy, rules and regulations contained in the proposed Tariff may be unjust, unreasonable, in violation of law and will or may produce an excessive return on investment in violation of the Public Utility Code, 66 Pa. C.S. § 1301, et seq.
 - G. The Consumer Advocate also avers that the proposed tariff changes and proposed rate design may be unlawfully discriminatory, in violation of the Public Utility Code, 66 Pa. C.S. §§ 1301 and 1304, et seq., and may otherwise be contrary to sound ratemaking principles and public policy.

- H. A preliminary examination and review by the OCA of the Company's existing rates, rules and regulations indicates that certain rates, rules and regulations may not be just and reasonable or otherwise proper under the Public Utility Code and applicable ratemaking principles. 66 Pa.C.S. §1301, et seq.
 - I. The Consumer Advocate files this complaint to insure that the Commission fully and fairly adjudicates issues pertaining to whether the Company's existing and proposed rates – and all rate policy changes – are unjust, unreasonable, unduly discriminatory or otherwise unlawful.
5. What do you want the Public Utility Commission to do about your complaint?
(Use additional paper if you need more space).
- A. Suspend and investigate the operation of the Tariff, pursuant to Section 1308(d) of the Public Utility Code, 66 Pa. C.S. § 1308(d);
 - B. Consolidate all complaints filed against proposed Tariff;
 - C. Hold full evidentiary hearings examining the reasonableness of the Company's current rates and its proposed increases in rates;
 - D. After providing the public with adequate notice, hold public input hearings in the Company's service territory in order to provide its customers with an opportunity to be heard on the record, and hold those hearings as early in the case as feasible;
 - E. Deny any increase or change in Company's rates that is unjust, unreasonable or inconsistent with the Public Utility Code, sound ratemaking principles, and public policy;
 - F. Determine the justness and reasonableness of Company's current and proposed rates; and
 - G. Grant such other relief it deems appropriate.
6. 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

6/16/06
Date

7. If you are represented by a lawyer in this matter you must provide your lawyer's name, address and telephone number.

Lawyer's Name Erin L. Gannon, Assistant Consumer Advocate (PA Bar 83487), egannon@paoca.org; Aron J. Beatty, Assistant Consumer Advocate (PA Bar 86625), abeatty@paoca.org; Stephen J. Keene, Senior Assistant Consumer Advocate (PA Bar 70279), skeene@paoca.org

Street 555 Walnut Street, 5th Floor, Forum Place

City Harrisburg, PA 17101-1923

Area Code/Phone Number (717) 783-5048

8. **Mail to:**

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

If you have additional questions about filling out this form, please contact the Secretary's Bureau at 717-772-7777.

PUBLIC STATEMENT OF THE
OFFICE OF CONSUMER ADVOCATE
PURSUANT TO 71 P.S. SECTION 309-4(e)

2006 JUL 19 11:11:19
SECRETARY'S OFFICE

Act 161 of the Pennsylvania General Assembly, 71 P.S. 309-2, as enacted July 9, 1976, authorizes the Consumer Advocate to represent the interests of consumers before the Pennsylvania Public Utility Commission (PUC). In accordance with Act 161, and for the following reasons, the Consumer Advocate determined to file a Formal Complaint and participate in proceedings before the Commission involving the proposed rate increase requested by National Fuel Gas Distribution Corporation (NFGD or the Company) at Docket No. R-00061493.

On May 31, 2006, NFGD filed for an overall increase in annual operating revenues of \$25.8 million or an increase of 6.1% over present rates. The proposed rate increase would be effective July 30, 2006. For the residential class, a typical NFGD residential customer using 100 Mcf annually will see their average bill rise from \$143.94 per month to \$153.83 per month, or by 6.9%. NFGD is engaged in the business of furnishing natural gas service to approximately 214,000 residential, commercial, industrial, resale and transportation customers in 14 counties in northwestern Pennsylvania. The Company's proposed rate increase, if approved, will produce a 9.48% overall rate of return on its original cost rate base, including a 12.25% cost of common equity. The Company has also proposed changes including: (1) proposed surcharge recovery of lost margin associated with reduced consumption; (2) surcharge recovery of storage gas working capital and a portion of uncollectible costs; (3) seasonal rates; (4) 72% increase in residential customer charges and otherwise modified rate design; and (4) a program for purchase of small customer receivables.

The Consumer Advocate files this Complaint to determine whether the rate increase and other policy changes sought by NFGD are just and reasonable based upon the information filed by the Company in support of its claim. The Consumer Advocate will represent the interests of NFGD's consumers before the Commission and seek to ensure that customers are not charged rates that unjust, unreasonable or otherwise contrary to law.

889196.doc

CERTIFICATE OF SERVICE

Pennsylvania Public Utility Commission :

v. :

National Fuel Gas Distribution Corporation :

Docket No.

R-00061493

C0003

I hereby certify that I have this day served a true copy of the foregoing document, Formal Complaint and Public Statement of the Office of Consumer Advocate, upon parties of record in this proceeding in accordance with the requirements of 52 Pa. Code § 1.54 (relating to service by a participant), in the manner and upon the persons listed below:

Dated this 15th day of June 2006.

SERVICE BY E-MAIL and INTEROFFICE MAIL

Johnnie E. Simms, Esquire
Office of Trial Staff
Pennsylvania Public Utility Commission
Commonwealth Keystone Building
400 North Street
Harrisburg, PA 17105-3265

SECRETARY'S BUREAU

2006 JUN 15 PM 4:19

SERVICE BY E-MAIL and FIRST CLASS MAIL

John H. Isom, Esquire
Post & Schell, P.C.
17 North Second Street
12 Floor
Harrisburg, PA 17101-1601
Counsel For: *National Fuel Gas Distribution*

William R. Lloyd, Jr.
Small Business Advocate
Office of Small Business Advocate
Commerce Building - Suite 1102
300 North Second Street
Harrisburg, PA 17101
Counsel for: *Office of Small Business Advocate*



Stephen J. Keene
Senior Assistant Consumer Advocate
PA Attorney I.D. # 70279
E-Mail: SKeene@paoca.org
Aron J. Beatty
Assistant Consumer Advocate
PA Attorney I.D. # 86625
E-Mail: ABeatty@paoca.org
Erin L. Gannon
Assistant Consumer Advocate
PA Attorney I.D. # 83487
E-Mail: EGannon@paoca.org

Counsel for
Office of Consumer Advocate
555 Walnut Street 5th Floor, Forum Place
Harrisburg, PA 17101-1923
Phone: (717) 783-5048
Fax: (717) 783-7152

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

JUNE 16, 2006

JOHN H. ISOM
POST & SCHELL
17 NORTH SECOND STREET
12TH FLOOR
HARRISBURG PA 17101-1601

DOCUMENT
FOLDER

RE: PA PUC vs. NATIONAL FUEL GAS DISTRIBUTION CORPORATION
Docket Number R-00061493C0003

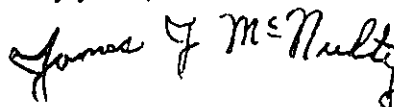
Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by OFFICE OF CONSUMER ADVOCATE.

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

jih

DOCKETED
JUN 16 2006

ORIGINAL

PENNSYLVANIA PUBLIC UTILITY COMMISSION

Formal Complaint Form

R-00061493 C0004

Please print or type.

1. CUSTOMER NAME (COMPLAINANT)

Your name, mailing address, county, telephone number, utility account number and service address:

Name PATRICIA CARTWRIGHT

Street/P.O. Box 8 RUSSELL DR. Apt # _____

City BROOKLYN State PA Zip 15824

County JEFFERSON

Area Code/HOME Phone 814-265-1833

Area Code/WORK Phone _____

Utility Account Number 3287712-09
(from your bill)

DOCUMENT
FOLDER

If your complaint involves utility service provided to a different address than your mailing address, please list this information below.

Name _____

Street/P.O. Box _____

City _____ State _____ Zip _____

DOCKETED
JUN 19 2006

2. UTILITY NAME (RESPONDENT)

Name of utility company your complaint concerns: NATIONAL Fuel

3. TYPE OF UTILITY (check one)

ELECTRIC

STEAM HEAT

GAS

WASTE WATER

WATER

MOTOR CARRIER

(taxi, moving company, limousine)

TELEPHONE
(local, long distance)

RECEIVED
2006 JUN 15 AM 9:06
PA.P.U.C.
SECRETARY'S BUREAU

4. COMPLAINT (check one)

A. In general, what is your complaint?

- I want to oppose the company's proposed rate increase.
- There are incorrect charges on my bill.
- There is a reliability, safety or quality problem with my utility service.
- I received a notice that my utility service is being terminated.
- I would like a payment agreement.
- Other. *WANT HEARING IN DuBOIS, PA.*
(explain)

B. State the facts of your complaint.

Include any specific dates, times or places that are important. If the complaint is about a bill, tell us about any charges that you believe are not correct. Use additional paper if you need more space. Provide copies of all relevant documents you believe will support your complaint.

OPPOSE RATE INCREASE

5. RELIEF

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

WANT PUC HEARING IN DuBOIS, PA 15801

6. PROTECTION FROM ABUSE

Answer the following question if your complaint is against a natural gas distribution company, an electric distribution company or a water company AND your complaint is about a billing problem, an application for service problem, a termination of service problem or a request for a payment agreement.

Has a court granted a "Protection from Abuse" order for your personal safety?

YES

NO

7. PRIOR UTILITY CONTACT

Answer the following question only if you are a residential customer and your complaint is against an electric distribution utility, natural gas distribution utility or a water distribution utility.

Have you spoken to a utility company representative about this complaint?

YES

(includes appeals of BCS determinations)

NO

If you tried to, but could not speak to a utility company representative about your complaint, please explain why.

8. VERIFICATION AND SIGNATURE

You must print or type your name below on the line provided for the verification paragraph, and you must sign and date (in ink) this form on the lines provided.

Verification:

I PATRICIA CARTWRIGHT, hereby state that the facts above set forth are true and correct (or are true and correct to the best of my knowledge, information and belief) and that I expect to be able to prove the same at a hearing held in this matter. I understand that the statements herein are made subject to the penalties of 18 Pa. C.S. § 4904 (relating to unsworn falsification to authorities).

Patricia Cartwright
(Signature)

6-12-06
(Date)

9. LEGAL REPRESENTATION (IF ANY)

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

Lawyer's Name _____

Street _____

City _____ State _____ Zip _____

Area Code/Phone Number _____

10. FILING

Please return the completed form to one of the addresses listed below:

If using U.S. Postal Service:

If using overnight delivery service:

| | |
|--|--|
| Secretary Pennsylvania Public Utility Commission P.O. Box 3265 Harrisburg, PA 17105 | Secretary Pennsylvania Public Utility Commission 400 North Street Commonwealth Keystone Building, 2 nd Floor Harrisburg, Pennsylvania 17120 |
|--|--|

Facsimiles and/or electronic filings of the complaint form will not be accepted.

If you have any questions about filling out this form, please contact the Secretary's Bureau at 717-772-7777.

Keep a copy of your complaint for your records.

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

JUNE 16, 2006

DOCUMENT
FOLDER

JOHN H. ISOM
POST & SCHELL
17 NORTH SECOND STREET
12TH FLOOR
HARRISBURG PA 17101-1601

RE: PA PUC vs. NATIONAL FUEL GAS DISTRIBUTION CORPORATION
Docket Number R-00061493C0004

Dear Sir/Madam:

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

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

jih

DOCKETED
JUN 19 2006



ORIGINAL

OFFICE OF SMALL BUSINESS ADVOCATE
Suite 1102, Commerce Building
300 North Second Street
Harrisburg, Pennsylvania 17101

William R. Lloyd, Jr.
Small Business Advocate

(717) 783-2525
(717) 783-2831 (FAX)

June 21, 2006

HAND DELIVERED

DOCUMENT
FOLDER

ORIGINAL

James J. McNulty, Secretary
Pennsylvania Public Utility Commission
Commonwealth Keystone Building
P. O. Box 3265
Harrisburg, PA 17105-3265

Re: Pennsylvania Public Utility Commission v. National Fuel Gas Distribution Corporation
Docket No. R-00061493 COOS

Dear Secretary McNulty:

I am delivering for filing today the original plus three copies of the Complaint, Verification, Public Statement, and Notice of Appearance, on behalf of the Small Business Advocate, in the above captioned matter.

Two copies have been served today on all known parties in this proceeding. A Certificate of Service to that effect is enclosed.

If you have any questions, please do not hesitate to contact me.

Sincerely,

Sharon E. Webb
Assistant Small Business Advocate
Attorney ID No. 73995

Enclosures

cc: Hon. Veronica Smith
Parties of Record

SECRETARY'S BUREAU
JUN 21 PM 3:47

47

ORIGINAL

BEFORE THE
PENNSYLVANIA PUBLIC UTILITY COMMISSION

PENNSYLVANIA PUBLIC UTILITY :
COMMISSION :
v. :
NATIONAL FUEL GAS :
DISTRIBUTION CORPORATION :

Docket No. R-00061493 **CO005**

**COMPLAINT OF
SMALL BUSINESS ADVOCATE**

**DOCUMENT
FOLDER**

1. The Complainant is:

William R. Lloyd, Jr.
Small Business Advocate
Suite 1102, Commerce Building
300 North Second Street
Harrisburg, PA 17101
(717) 783-2525

SECRETARY'S LUNcheon
2006 JUN 21 11:34:17

2. The name and address of the Complainant's attorney is:

Sharon E. Webb
Assistant Small Business Advocate
Office of Small Business Advocate
Suite 1102, Commerce Building
300 North Second Street
Harrisburg, PA 17101
(717) 783-2525
(717) 783-2831 (fax)
swebb@state.pa.us

DOCKETED
JUN 22 2006

3. The name and address of the Complainant's expert in this proceeding is:

Robert D. Knecht
Industrial Economics Incorporated
2067 Massachusetts Avenue
Cambridge, MA 02140
(617) 354-0074
(617) 354-0463 (fax)
rdk@indecon.com

4. The respondent utility is:

National Fuel Gas Distribution Corporation
6363 Main Street
Williamsville, NY 14221

5. The Complainant is authorized and directed by the Small Business Advocate Act, Act 181 of 1988, 73 P.S. §§ 399.41 – 399.50, to represent the interests of small business consumers of utility services in matters before the Pennsylvania Public Utility Commission (“Commission”).

6. This Complaint is filed against the rates, terms and other provisions of Tariff Gas – Pa. P.U.C. No. 9 (Supplement No. 61), which was filed on May 31, 2006, by National Fuel Gas Distribution Corporation (“NFGD” or “Company”). The proposed Tariff, if approved by the Commission, would increase the total operating revenues of NFGD by \$25.8 million per year based on a future test year ending December 31, 2006. This is an increase of 6.1% over the current levels (24.9% excluding the cost of gas). The Company’s proposed rate increase will produce a 9.48% overall rate of return on its original cost rate base, including an 12.25% return on common equity. After preliminary review of the materials filed by the Company in support of the proposed Tariff, Complainant believes, and therefore avers, that those materials may be insufficient to justify the rate increase requested and that the Company’s present and proposed rates, rules, and conditions of service may be unjust, unreasonable, unduly discriminatory, and otherwise contrary to law, particularly as they pertain to small business customers.

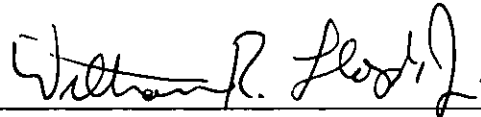
7. Complainant believes, and therefore avers, that NFGD’s proposed rates,

rate design and cost and revenue allocation are or may be unjust, unreasonable and unlawfully discriminatory in violation of, inter alia, Sections 1301 and 1304 of the Public Utility Code, 66 Pa.C.S. §§1301 and 1304, and contrary to appropriate public policy and sound ratemaking considerations, and may not be supported by the materials filed by NFGD.

8. In view of the foregoing, the Small Business Advocate respectfully requests that the Pennsylvania Public Utility Commission:

- a. Suspend and investigate the operation of Tariff Gas – Pa. P.U.C. No. 9 (Supplement No. 61);
- b. At the conclusion of such investigation, reject the proposed new rates and other tariff changes in Tariff Gas – PA P.U.C. No. 9 (Supplement No. 61) to the extent required to insure that NFGD's rates are lawful, just, reasonable and not unduly discriminatory to any class of customers; and
- c. Grant such other relief as may be necessary or appropriate.

Respectfully submitted,



William R. Lloyd, Jr.
Small Business Advocate
Attorney I.D. No 16452

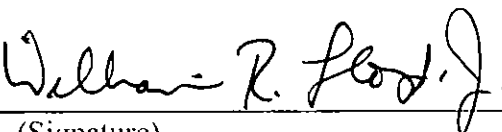
Office of Small Business Advocate
Suite 1102, Commerce Building
300 North Second Street
Harrisburg, PA 17101
(717) 783-2525
(717) 783-2831 (fax)

Dated: June 21, 2006

VERIFICATION

I, William R. Lloyd, Jr., hereby state that the facts set forth herein above are true and correct to the best of my knowledge, information and belief and that I expect to be able to prove the same at a hearing held in this matter. I understand that the statements herein are made subject to the penalties of 18 Pa. C.S. §4904 (relating to unsworn falsification to authorities).

Date: June 21, 2006



(Signature)

William R. Lloyd, Jr.
Small Business Advocate
Attorney ID #16452

2006 JUN 21 PM 3:47
SECRETARY'S OFFICE

SECRETARY'S BUREAU
JUL 21 11 36 AM '87

**PUBLIC STATEMENT OF
SMALL BUSINESS ADVOCATE
CONCERNING THE INTEREST
OF SMALL BUSINESS CONSUMERS
TO BE PROTECTED BY THE FILING OF A COMPLAINT
AGAINST PROPOSED TARIFF GAS –
PA. P.U.C. NO. 9 (SUPPLEMENT NO. 61) FILED BY
NATIONAL FUEL GAS DISTRIBUTION CORPORATION AT
DOCKET NO. R-00061493**

The Small Business Advocate is authorized and directed to represent the interests of small business consumers of utility services in Pennsylvania under the provisions of the Small Business Advocate Act, Act 181 of 1988, 73 P.S. §§ 399.41 – 399.50 (“the Act”). The Act further provides that the Small Business Advocate issue publicly a written statement stating concisely the specific interest of small business consumers to be protected by the initiation of or intervention in any proceeding involving those interests before the Public Utility Commission (“Commission”) or any other agency or court. This public statement relates to the filing today by the Small Business Advocate of a Complaint against proposed Supplement Tariff Gas – Pa. P.U.C. No. 9 (Supplement No. 61) of National Fuel Gas Distribution Corporation (“NFGD” or “Company”).

NFGD’s proposed Tariff Gas – PA P.U.C. No. 9 (Supplement No. 61) would increase by \$25.8 million the amount of operating revenues collected from all customers, including small business customers.

The Small Business Advocate has filed a formal Complaint against NFGD’s proposed rate increase in order to protect the interests of NFGD’s small business customers. A preliminary review of the data filed by NFGD in support of its request for a rate increase indicates that the costs claimed by the utility for ratemaking purposes may be excessive. A thorough inquiry by the Commission into all elements of NFGD’s

request for a rate increase is necessary to ensure that NFGD's rates, including any new rates that may result from this proceeding, are just and reasonable.

In view of the foregoing, the Small Business Advocate will participate in proceedings before the Commission to investigate the reasonableness of the proposed rates in NFGD's Tariff Gas – PA P.U.C. No. 9 (Supplement No. 61). The Small Business Advocate will ask the Commission to deny any proposed rate increase or other changes in NFGD's present tariffs that apply to small business customers that are not proven by NFGD to be lawful, just, reasonable and non-discriminatory to all of its customer classes.

Dated: June 21, 2006

BEFORE THE
PENNSYLVANIA PUBLIC UTILITY COMMISSION

PENNSYLVANIA PUBLIC UTILITY :
COMMISSION :
v. :
NATIONAL FUEL GAS : Docket No. R-00061493
DISTRIBUTION CORPORATION :

SECRETARY'S BUREAU
JUN 21 11 30 AM '06

CERTIFICATE OF SERVICE

I certify that I am serving two copies of the Complaint, Verification, Public Statement, and Notice of Appearance, on behalf of the Office of Small Business Advocate, by e-mail and first class mail (unless otherwise noted) upon the persons addressed below:

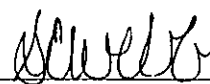
Hon. Veronica Smith
Chief Administrative Law Judge
Pa. Public Utility Commission
P.O. Box 3265
Harrisburg, PA 17105
(717) 787-1191
(717) 787-0481 (fax)
verosmith@state.pa.us
(E-mail and Hand Delivery)

Johnnie E. Simms, Esquire
Office of Trial Staff
Pa. Public Utility Commission
P.O. Box 3265
Harrisburg, PA 17105
(717) 787-1976
(717) 772-2677 (fax)
josimms@state.pa.us
(E-mail and Hand Delivery)

Stephen J. Keene, Esquire
Office of Consumer Advocate
555 Walnut Street
5th Floor Forum Place
Harrisburg, PA 17101
(717) 783-5048
(717) 783-7152 (fax)
skeene@paoca.org
(E-mail and Hand Delivery)

John H. Isom, Esquire
Post & Schell, P.C.
17 North Second Street - 12th Floor
Harrisburg, PA 17104
(717) 612-6032
(717) 731-1985 (fax)
jisom@postschell.com

Cheryl Walker Davis, Esquire
Office of Special Assistants
Pa. Public Utility Commission
P.O. Box 3265
Harrisburg, PA 17105
(717) 787-1827
(717) 783-6324 (fax)
cwalkerdav@state.pa.us
(E-mail and Hand Delivery)


Sharon E. Webb
Assistant Small Business Advocate
Attorney ID No. 73995

Date: June 21, 2006

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

JUNE 22, 2006

DOCUMENT
FOLDER

JOHN H. ISOM
POST & SCHELL
17 NORTH SECOND STREET
12TH FLOOR
HARRISBURG PA 17101-1601

RE: PA PUC vs. NATIONAL FUEL GAS DISTRIBUTION CORPORATION
Docket Number R-00061493C0005

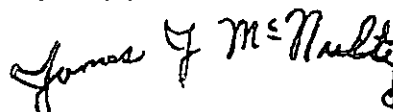
Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by OFFICE OF SMALL BUSINESS ADVOCATE.

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

jih

DOCKETED
JUN 22 2006

ORIGINAL

PENNSYLVANIA PUBLIC UTILITY COMMISSION

Formal Complaint Form

RECEIVED
JUN 28 AM 11:00
PENNSYLVANIA
SECRETARY'S BUREAU

Please print or type.

R-00061493C0006

1. CUSTOMER NAME (COMPLAINANT)

Your name, mailing address, county, telephone number, utility account number and service address:

Name CAROL COLE

Street/P.O. Box 302 E. 18th St. Apt # —

City Erie State PA Zip 16503

County Erie

Area Code/HOME Phone 814 454 6902

Area Code/WORK Phone 814 878 3673

Utility Account Number 3590973-11
(from your bill)

DOCUMENT
FOLDER

If your complaint involves utility service provided to a different address than your mailing address, please list this information below.

Name _____

Street/P.O. Box _____

City _____ State _____ Zip _____

DOCKETED
JUL 20 2006

2. UTILITY NAME (RESPONDENT)

Name of utility company your complaint concerns: Nat'l Fuel

3. TYPE OF UTILITY (check one)

ELECTRIC

STEAM HEAT

GAS

WASTE WATER

WATER

MOTOR CARRIER

(taxi, moving company, limousine)

TELEPHONE
(local, long distance)

3

4. **COMPLAINT** (check one)

A. **In general, what is your complaint?**

- I want to oppose the company's proposed rate increase.
- There are incorrect charges on my bill.
- There is a reliability, safety or quality problem with my utility service.
- I received a notice that my utility service is being terminated.
- I would like a payment agreement.
- Other.
(explain)

B. **State the facts of your complaint.**

Include any specific dates, times or places that are important. If the complaint is about a bill, tell us about any charges that you believe are not correct. Use additional paper if you need more space. Provide copies of all relevant documents you believe will support your complaint.

*Our current bill dated 6/6/06 is prorated
incorrectly*

5. **RELIEF**

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

*Do not allow the proposed rate increase
or surcharges that penalize us
when we conserve energy —*

6. PROTECTION FROM ABUSE

Answer the following question if your complaint is against a natural gas distribution company, an electric distribution company or a water company AND your complaint is about a billing problem, an application for service problem, a termination of service problem or a request for a payment agreement.

Has a court granted a "Protection from Abuse" order for your personal safety?

YES

NO

7. PRIOR UTILITY CONTACT

Answer the following question only if you are a residential customer and your complaint is against an electric distribution utility, natural gas distribution utility or a water distribution utility.

Have you spoken to a utility company representative about this complaint?

YES
(includes appeals of BCS determinations)

NO

If you tried to, but could not speak to a utility company representative about your complaint, please explain why.

8. VERIFICATION AND SIGNATURE

You must print or type your name below on the line provided for the verification paragraph, and you must sign and date (in ink) this form on the lines provided.

Verification:

I CAROL COLE, hereby state that the facts above set forth are true and correct (or are true and correct to the best of my knowledge, information and belief) and that I expect to be able to prove the same at a hearing held in this matter. I understand that the statements herein are made subject to the penalties of 18 Pa. C.S. § 4904 (relating to unsworn falsification to authorities).

Carol Cole
(Signature)

6-26-04
(Date)

9. LEGAL REPRESENTATION (IF ANY)

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

Lawyer's Name _____

Street _____

City _____ State _____ Zip _____

Area Code/Phone Number _____

10. FILING

Please return the completed form to one of the addresses listed below:

If using U.S. Postal Service:

If using overnight delivery service:

| | |
|--|--|
| Secretary Pennsylvania Public Utility Commission P.O. Box 3265 Harrisburg, PA 17105 | Secretary Pennsylvania Public Utility Commission 400 North Street Commonwealth Keystone Building, 2 nd Floor Harrisburg, Pennsylvania 17120 |
|--|--|

Facsimiles and/or electronic filings of the complaint form will not be accepted.

If you have any questions about filling out this form, please contact the Secretary's Bureau at 717-772-7777.

Keep a copy of your complaint for your records.

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

JULY 7, 2006

JOHN H. ISOM
POST & SCHELL
17 NORTH SECOND STREET
12TH FLOOR
HARRISBURG PA 17101-1601

DOCUMENT
FOLDER

RE: PA PUC vs. NATIONAL FUEL GAS DISTRIBUTION CORPORATION
Docket Number R-00061493C0006

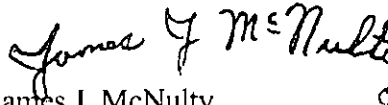
Dear Sir/Madam:

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

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

jih

DOCKETED
JUL 20 2006

ORIGINAL

PENNSYLVANIA PUBLIC UTILITY COMMISSION

Formal Complaint Form

RECEIVED

Please print or type.

R-000614930000

2006 JUL -3 11:10:17

SECRETARY'S BUREAU

1. CUSTOMER NAME (COMPLAINANT)

Your name, mailing address, county, telephone number, utility account number and service address:

Name GREGG HEINOLD

Street/P.O. Box 380 WEILER ROAD Apt # _____

City WARREN State PA Zip 16365

County WARREN

Area Code/HOME Phone 814-726-3218

Area Code/WORK Phone _____

Utility Account Number 4309391-04
(from your bill)

DOCUMENT FOLDER

If your complaint involves utility service provided to a different address than your mailing address, please list this information below.

Name _____

Street/P.O. Box _____

City _____ State _____ Zip _____

DOCKETED
JUL 20 2006

2. UTILITY NAME (RESPONDENT)

Name of utility company your complaint concerns: NATIONAL FUEL GAS

3. TYPE OF UTILITY (check one)

- ELECTRIC
- GAS
- WATER
- TELEPHONE
(local, long distance)
- STEAM HEAT
- WASTE WATER
- MOTOR CARRIER
(taxi, moving company, limousine)

38

4. **COMPLAINT** (check one)

A. In general, what is your complaint?

- I want to oppose the company's proposed rate increase.
- There are incorrect charges on my bill.
- There is a reliability, safety or quality problem with my utility service.
- I received a notice that my utility service is being terminated.
- I would like a payment agreement.
- Other.
(explain)

B. State the facts of your complaint.

Include any specific dates, times or places that are important. If the complaint is about a bill, tell us about any charges that you believe are not correct. Use additional paper if you need more space. Provide copies of all relevant documents you believe will support your complaint.

NATIONAL FUEL GAS WANTS TO SURCHARGE MY GAS BILL FOR GAS I AM NOT USING. THEY ALSO FILED FOR A 25.9 MILLION INCREASE IN MAY 2006.

I SHOULD NOT BE CHARGED EXTRA FOR CONSERVING ENERGY. IT COST ME TO INSULATE +
RELIEF NOW THEY WANT TO SURCHARGE ME FOR IT.

5.

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

SCHEDULE A PUBLIC HEARING IN WARREN COUNTY ON THE SURCHARGE REQUEST.

6. PROTECTION FROM ABUSE

Answer the following question if your complaint is against a natural gas distribution company, an electric distribution company or a water company AND your complaint is about a billing problem, an application for service problem, a termination of service problem or a request for a payment agreement.

Has a court granted a "Protection from Abuse" order for your personal safety?

YES

NO

7. PRIOR UTILITY CONTACT

Answer the following question only if you are a residential customer and your complaint is against an electric distribution utility, natural gas distribution utility or a water distribution utility.

Have you spoken to a utility company representative about this complaint?

YES
(includes appeals of BCS determinations)

NO

If you tried to, but could not speak to a utility company representative about your complaint, please explain why.

8. VERIFICATION AND SIGNATURE

You must print or type your name below on the line provided for the verification paragraph, and you must sign and date (in ink) this form on the lines provided.

Verification:

I GREGG HEINOLD, hereby state that the facts above set forth are true and correct (or are true and correct to the best of my knowledge, information and belief) and that I expect to be able to prove the same at a hearing held in this matter. I understand that the statements herein are made subject to the penalties of 18 Pa. C.S. § 4904 (relating to unsworn falsification to authorities).

Gregg Heinold
(Signature)

7/1/2006
(Date)

9. LEGAL REPRESENTATION (IF ANY)

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

Lawyer's Name _____

Street _____

City _____ State _____ Zip _____

Area Code/Phone Number _____

10. FILING

Please return the completed form to one of the addresses listed below:

If using U.S. Postal Service:

If using overnight delivery service:

| | |
|--|--|
| Secretary Pennsylvania Public Utility Commission P.O. Box 3265 Harrisburg, PA 17105 | Secretary Pennsylvania Public Utility Commission 400 North Street Commonwealth Keystone Building, 2 nd Floor Harrisburg, Pennsylvania 17120 |
|--|--|

Facsimiles and/or electronic filings of the complaint form will not be accepted.

If you have any questions about filling out this form, please contact the Secretary's Bureau at 717-772-7777.

Keep a copy of your complaint for your records.

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

JULY 7, 2006

JOHN H. ISOM
POST & SCHELL
17 NORTH SECOND STREET
12TH FLOOR
HARRISBURG PA 17101-1601

DOCUMENT
FOLDER

RE: PA PUC vs. NATIONAL FUEL GAS DISTRIBUTION CORPORATION
Docket Number R-00061493C0007

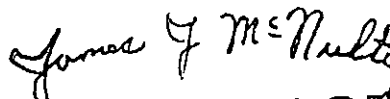
Dear Sir/Madam:

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

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

DOCKETED
JUL 20 2006

(SEAL)

Certified Mail
Return Receipt Requested

jih

ORIGINAL

PENNSYLVANIA PUBLIC UTILITY COMMISSION

Formal Complaint Form

Please print or type.

R-00061493C0008

RECEIVED
2006 JUL -5 AM 9:22
P.A.C.U.
SECRETARY'S BUREAU

1. CUSTOMER NAME (COMPLAINANT)

Your name, mailing address, county, telephone number, utility account number and service address:

Name ROBERT J. ZAKSHEK

Street/P.O. Box 5642 ROCKLEDGE DR. Apt # _____

City ERIE State PA. Zip 16511

County ERIE

Area Code/HOME Phone 814-899-7033

Area Code/WORK Phone _____

Utility Account Number 3662834-04
(from your bill)

DOCUMENT
FOLDER

If your complaint involves utility service provided to a different address than your mailing address, please list this information below.

Name _____

Street/P.O. Box _____

City _____ State _____ Zip _____

DOCKETED
JUL 20 2006

2. UTILITY NAME (RESPONDENT)

Name of utility company your complaint concerns: NATIONAL FUEL

3. TYPE OF UTILITY (check one)

ELECTRIC

STEAM HEAT

GAS

WASTE WATER

WATER

MOTOR CARRIER
(taxi, moving company, limousine)

TELEPHONE
(local, long distance)

4. COMPLAINT (check one)

A. In general, what is your complaint?

- I want to oppose the company's proposed rate increase.
- There are incorrect charges on my bill.
- There is a reliability, safety or quality problem with my utility service.
- I received a notice that my utility service is being terminated.
- I would like a payment agreement.
- Other.
(explain)

B. State the facts of your complaint.

Include any specific dates, times or places that are important. If the complaint is about a bill, tell us about any charges that you believe are not correct. Use additional paper if you need more space. Provide copies of all relevant documents you believe will support your complaint.

5. RELIEF

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

VOTE AGAINST RATE INCREASE FROM NATIONAL FUEL GAS!

6. PROTECTION FROM ABUSE

Answer the following question if your complaint is against a natural gas distribution company, an electric distribution company or a water company AND your complaint is about a billing problem, an application for service problem, a termination of service problem or a request for a payment agreement.

Has a court granted a "Protection from Abuse" order for your personal safety?

YES

NO

7. PRIOR UTILITY CONTACT

Answer the following question only if you are a residential customer and your complaint is against an electric distribution utility, natural gas distribution utility or a water distribution utility.

Have you spoken to a utility company representative about this complaint?

YES
(includes appeals of BCS determinations)

NO

If you tried to, but could not speak to a utility company representative about your complaint, please explain why.

8. VERIFICATION AND SIGNATURE

You must print or type your name below on the line provided for the verification paragraph, and you must sign and date (in ink) this form on the lines provided.

Verification:

I ROBERT J. ZAKSHESKE, hereby state that the facts above set forth are true and correct (or are true and correct to the best of my knowledge, information and belief) and that I expect to be able to prove the same at a hearing held in this matter. I understand that the statements herein are made subject to the penalties of 18 Pa. C.S. § 4904 (relating to unsworn falsification to authorities).

Robert J. Zaksheske
(Signature)

7/3/2006
(Date)

9. LEGAL REPRESENTATION (IF ANY)

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

Lawyer's Name NO

Street _____

City _____ State _____ Zip _____

Area Code/Phone Number _____

10. FILING

Please return the completed form to one of the addresses listed below:

If using U.S. Postal Service:

If using overnight delivery service:

| | |
|--|--|
| Secretary Pennsylvania Public Utility Commission P.O. Box 3265 Harrisburg, PA 17105 | Secretary Pennsylvania Public Utility Commission 400 North Street Commonwealth Keystone Building, 2 nd Floor Harrisburg, Pennsylvania 17120 |
|--|--|

Facsimiles and/or electronic filings of the complaint form will not be accepted.

If you have any questions about filling out this form, please contact the Secretary's Bureau at 717-772-7777.

Keep a copy of your complaint for your records.

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

JULY 7, 2006

JOHN H. ISOM
POST & SCHELL
17 NORTH SECOND STREET
12TH FLOOR
HARRISBURG PA 17101-1601

DOCUMENT
FOLDER

RE: PA PUC vs. NATIONAL FUEL GAS DISTRIBUTION CORPORATION
Docket Number R-00061493C0008

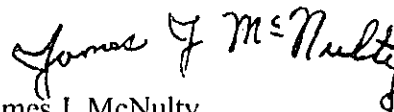
Dear Sir/Madam:

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

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

jih

DOCKETED
JUL 20 2006

ORIGINAL

PENNSYLVANIA PUBLIC UTILITY COMMISSION

Formal Complaint Form

Please print or type.

R-0006149300009

RECEIVED
2006 JUL -5 AM 9:22
P.U.C.
SECRETARY'S BUREAU

1. CUSTOMER NAME (COMPLAINANT)

Your name, mailing address, county, telephone number, utility account number and service address:

Name Stephanie A Shaw

Street/P.O. Box 2804 Emerson Ave Apt #

City Erie State PA Zip 16508

County Erie

Area Code/HOME Phone 814-866-7642

Area Code/WORK Phone 814-746-9292

Utility Account Number 4177621-06
(from your bill)

DOCUMENT FOLDER

If your complaint involves utility service provided to a different address than your mailing address, please list this information below.

Name N/A

Street/P.O. Box

City State Zip

2. UTILITY NAME (RESPONDENT)

Name of utility company your complaint concerns: National Fuel

3. TYPE OF UTILITY (check one)

ELECTRIC

STEAM HEAT

GAS

WASTE WATER

WATER

MOTOR CARRIER
(taxi, moving company, limousine)

TELEPHONE
(local, long distance)

DOCKETED
JUL 20 2006

4. COMPLAINT (check one)

A. In general, what is your complaint?

- I want to oppose the company's proposed rate increase.
- There are incorrect charges on my bill.
- There is a reliability, safety or quality problem with my utility service.
- I received a notice that my utility service is being terminated.
- I would like a payment agreement.
- Other.
(explain)

B. State the facts of your complaint.

Include any specific dates, times or places that are important. If the complaint is about a bill, tell us about any charges that you believe are not correct. Use additional paper if you need more space. Provide copies of all relevant documents you believe will support your complaint.

I hereby request that the PUC vote against the National Fuel surcharge request because consumers have reduced the amount of their usage. The commodity charge and delivery charges have both been increased from February 2005 to July 2006 at an increase of approximately 46% in this household. The Company must reduce their expenses and overhead instead of continuing to get increases approved by the PUC. The Pennsylvania Utility Commission is supposed to be for the consumer protection, and have not protected us consumers at all against the National Fuel Company. It is our only choice for gas in this area, and we have no choice, except to reduce consumption to pay for all the past increases they have imposed.

5. RELIEF

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

Request that the PUC deny National Fuel's request for surcharge and also to reduce the commodity charge to 2005 commodity charge, without adding any additional fees, surcharges, etc.

6. PROTECTION FROM ABUSE

Answer the following question if your complaint is against a natural gas distribution company, an electric distribution company or a water company AND your complaint is about a billing problem, an application for service problem, a termination of service problem or a request for a payment agreement.

Has a court granted a "Protection from Abuse" order for your personal safety?

YES

NO

7. PRIOR UTILITY CONTACT

Answer the following question only if you are a residential customer and your complaint is against an electric distribution utility, natural gas distribution utility or a water distribution utility.

Have you spoken to a utility company representative about this complaint?

YES

(includes appeals of BCS determinations)

NO

If you tried to, but could not speak to a utility company representative about your complaint, please explain why.

8. VERIFICATION AND SIGNATURE

You must print or type your name below on the line provided for the verification paragraph, and you must sign and date (in ink) this form on the lines provided.

Verification:

I STEPHANIE A. SHAW, hereby state that the facts above set forth are true and correct (or are true and correct to the best of my knowledge, information and belief) and that I expect to be able to prove the same at a hearing held in this matter. I understand that the statements herein are made subject to the penalties of 18 Pa. C.S. § 4904 (relating to unsworn falsification to authorities).

Stephanie A Shaw 7-5-06
(Signature) (Date)

9. LEGAL REPRESENTATION (IF ANY)

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

Lawyer's Name _____

Street _____

City _____ State _____ Zip _____

Area Code/Phone Number _____

10. FILING

Please return the completed form to one of the addresses listed below:

If using U.S. Postal Service:

If using overnight delivery service:

| | |
|--|--|
| Secretary Pennsylvania Public Utility Commission P.O. Box 3265 Harrisburg, PA 17105 | Secretary Pennsylvania Public Utility Commission 400 North Street Commonwealth Keystone Building, 2 nd Floor Harrisburg, Pennsylvania 17120 |
|--|--|

Facsimiles and/or electronic filings of the complaint form will not be accepted.

If you have any questions about filling out this form, please contact the Secretary's Bureau at 717-772-7777.

Keep a copy of your complaint for your records.

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

JULY 7, 2006

JOHN H. ISOM
POST & SCHELL
17 NORTH SECOND STREET
12TH FLOOR
HARRISBURG PA 17101-1601

DOCUMENT
FOLDER

RE: PA PUC vs. NATIONAL FUEL GAS DISTRIBUTION CORPORATION
Docket Number R-00061493C0009

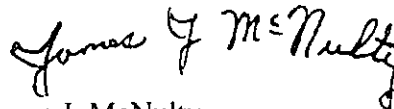
Dear Sir/Madam:

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

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

jih

DOCKETED
JUL 20 2006

ORIGINAL

| | |
|--|--|
| Secretary Pennsylvania Public Utility Commission P.O. Box 3265 Harrisburg, PA 17105 | Secretary Pennsylvania Public Utility Commission 400 North Street Commonwealth Keystone Building, 2 nd Floor Harrisburg, Pennsylvania 17120 |
|--|--|

Keep a copy of your complaint for your records.

Facsimiles and/or electronic filings of the complaint form will not be accepted.

PENNSYLVANIA PUBLIC UTILITY COMMISSION

DOCUMENT
FOLDER

Formal Complaint Form

Please print or type.

R-00061493 C0010

1. **CUSTOMER NAME (COMPLAINANT)**

Your name, mailing address, county, telephone number, utility account number and service address:

Name HAROLD W. McELHATTEN

Street/P.O. Box 1 MAPLE PLACE Apt #

City NORTH WARREN State PA. Zip 16365

County WARREN

Area Code/HOME Phone 814-723-6153

Area Code/WORK Phone RETIRED

Utility Account Number (from your bill) 3592788-07

If your complaint involves utility service provided to a different address than your mailing address, please list this information below.

Name

DOCKETED
JUL 20 2006

Street/P.O. Box

City

State

Zip

2. **UTILITY NAME (RESPONDENT)**

NATIONAL FUEL GAS

18

RECEIVED
2005 JUL -3 AM 9:18
SECRETARY BUREAU

3. TYPE OF UTILITY (check one)

ELECTRIC

STEAM HEAT

GAS

WASTE WATER

WATER

MOTOR CARRIER
(taxi, moving company,

limousine)

TELEPHONE
(local, long distance)

4. COMPLAINT (check one)

A. In general, what is your complaint?

- I want to oppose the company's proposed rate increase.
- There are incorrect charges on my bill.
- There is a reliability, safety or quality problem with my utility service.
- I received a notice that my utility service is being terminated.
- I would like a payment agreement.
- Other.
(explain)

B. State the facts of your complaint.

Include any specific dates, times or places that are important. If the complaint is about a bill, tell us about any charges that you believe are not correct. Use additional paper if you need more space. Provide copies of all relevant documents you believe will support your complaint.

According to our local newspaper the TIMES OBSERVER
(DATED JUNE 24, 25 - 2006 WEEKENDER). NATIONAL FUEL GAS WANTS TO HIT
US IN THE GUTS WITH A "RIDICULOUS" SURCHARGE for using TOO LITTLE GAS. IT
STATES THAT YOU AS A CUSTOMER ARE GOING TO BE BILLED \$12.00 a month even
IF YOU USE NO GAS AT ALL. LETS GET REAL MR. BIG EXECUTIVES AND SHARE
HOLDERS. MAYBE YOU MIGHT HAVE TO DRIVE THAT OLD TAUNTING ANOTHER
YEAR RELIEFED THOUGH ITS A 2005. OR MAYBE TAKE A FEW

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

LESS VACATIONS TO THE BANANAS. MAYBE YOU SHOULD HAVE TO
COME DOWN FROM YOUR CASTLES AND TRY TO SURVIVE ON WHAT
LITTLE BIT WE IN WARREN COUNTY MAKE. AND SEE HOW
REAL FOLKS LIVE. YOU GREEDY INDUSTRIAL HIPPOCRITES
BURN ME UP WITH YOUR 2 FACED ANSWERS OF
CALCULATIONS FOR THIS SURCHARGE. ATLEAST TELL IT LIKE
IT IS. ITS ALL ABOUT THE MONEY.!!

6. PROTECTION FROM ABUSE

Answer the following question if your complaint is against a natural gas distribution company, an electric distribution company or a water company AND your complaint is about a billing problem, an application for service problem, a termination of service problem or a request for a payment agreement.

Has a court granted a "Protection from Abuse" order for your personal safety?

YES

NO

7. PRIOR UTILITY CONTACT

Answer the following question only if you are a residential customer and your complaint is against an electric distribution utility, natural gas distribution utility or a water distribution utility.

Have you spoken to a utility company representative about this complaint?

YES
(includes appeals of BCS determinations)

NO

If you tried to, but could not speak to a utility company representative about your complaint, please explain why.

8. VERIFICATION AND SIGNATURE

You must print or type your name below on the line provided for the verification paragraph, and you must sign and date (in ink) this form on the lines provided.

Verification: *Harold W. McElhatten*
HAROLD W. McELHATTEN

_____, hereby state that the facts above set forth are true and correct (or are true and correct to the best of my knowledge, information and belief) and that I expect to be able to prove the same at a hearing held in this matter. I understand that the statements herein are made subject to the penalties of 18 Pa. C.S. § 4904 (relating to unsworn falsification

9. LEGAL REPRESENTATION (IF ANY)

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

Lawyer's Name

Street

City

State

Zip

Area Code/Phone Number

10. FILING

Please return the completed form to one of the addresses listed below:

If using U.S. Postal Service:
service:

If using overnight delivery



| | |
|--|--|
| Secretary Pennsylvania Public Utility Commission P.O. Box 3265 Harrisburg, PA 17105 | Secretary Pennsylvania Public Utility Commission 400 North Street Commonwealth Keystone Building, 2 nd Floor Harrisburg, Pennsylvania 17120 |
|--|--|

Facsimiles and/or electronic filings of the complaint form will not be accepted.

If you have any questions about filling out this form, please contact the Secretary's Bureau at 717-772-7777.

Keep a copy of your complaint for your records.

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

JULY 7, 2006

JOHN H. ISOM
POST & SCHELL
17 NORTH SECOND STREET
12TH FLOOR
HARRISBURG PA 17101-1601

DOCUMENT
FOLDER

RE: PA PUC vs. NATIONAL FUEL GAS DISTRIBUTION CORPORATION
Docket Number R-00061493C0010

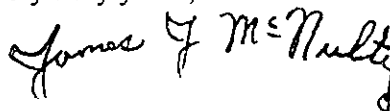
Dear Sir/Madam:

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

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

jih

DOCKETED
JUL 20 2006

ORIGINAL

PENNSYLVANIA PUBLIC UTILITY COMMISSION

Formal Complaint Form

Please print or type.

R-00061493 CO011

2006 JUL 10 AM 9:55
SECRETARY'S OFFICE

1. CUSTOMER NAME (COMPLAINANT)

Your name, mailing address, county, telephone number, utility account number and service address:

Name DONALD J. HERBSTRIIT

Street/P.O. Box 3814 Fidler Dr. Apt # _____

City ERIE State PA Zip 16506-2204

County ERIE

Area Code/HOME Phone 814-538-2826

Area Code/WORK Phone _____

Utility Account Number 3219962-07
(from your bill)

**DOCUMENT
FOLDER**

If your complaint involves utility service provided to a different address than your mailing address, please list this information below.

Name _____

DOCKETED
JUL 20 2006

Street/P.O. Box _____

City _____ State _____ Zip _____

2. UTILITY NAME (RESPONDENT)

Name of utility company your complaint concerns: NATIONAL FUEL

3. TYPE OF UTILITY (check one)

ELECTRIC

STEAM HEAT

GAS

WASTE WATER

WATER

MOTOR CARRIER
(taxi, moving company, limousine)

TELEPHONE
(local, long distance)

4. **COMPLAINT** (check one)

A. **In general, what is your complaint?**

- I want to oppose the company's proposed rate increase.
- There are incorrect charges on my bill.
- There is a reliability, safety or quality problem with my utility service.
- I received a notice that my utility service is being terminated.
- I would like a payment agreement.
- Other.
(explain)

B. **State the facts of your complaint.**

Include any specific dates, times or places that are important. If the complaint is about a bill, tell us about any charges that you believe are not correct. Use additional paper if you need more space. Provide copies of all relevant documents you believe will support your complaint.

5. **RELIEF**

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

Refuse any Rate increase

6. PROTECTION FROM ABUSE

Answer the following question if your complaint is against a natural gas distribution company, an electric distribution company or a water company **AND** your complaint is about a billing problem, an application for service problem, a termination of service problem or a request for a payment agreement.

Has a court granted a "Protection from Abuse" order for your personal safety?

YES

NO

7. PRIOR UTILITY CONTACT

Answer the following question only if you are a residential customer and your complaint is against an electric distribution utility, natural gas distribution utility or a water distribution utility.

Have you spoken to a utility company representative about this complaint?

YES
(includes appeals of BCS determinations)

NO

If you tried to, but could not speak to a utility company representative about your complaint, please explain why.

8. VERIFICATION AND SIGNATURE

You must print or type your name below on the line provided for the verification paragraph, and you must sign and date (in ink) this form on the lines provided.

Verification:

I DONALD J. HERBSTRIIT, hereby state that the facts above set forth are true and correct (or are true and correct to the best of my knowledge, information and belief) and that I expect to be able to prove the same at a hearing held in this matter. I understand that the statements herein are made subject to the penalties of 18 Pa. C.S. § 4904 (relating to unsworn falsification to authorities).

Donald J. Herbstritt
(Signature)

7-6-06
(Date)

9. LEGAL REPRESENTATION (IF ANY)

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

Lawyer's Name _____

Street _____

City _____ State _____ Zip _____

Area Code/Phone Number _____

10. FILING

Please return the completed form to one of the addresses listed below:

If using U.S. Postal Service:

If using overnight delivery service:

| | |
|--|--|
| Secretary Pennsylvania Public Utility Commission P.O. Box 3265 Harrisburg, PA 17105 | Secretary Pennsylvania Public Utility Commission 400 North Street Commonwealth Keystone Building, 2 nd Floor Harrisburg, Pennsylvania 17120 |
|--|--|

Facsimiles and/or electronic filings of the complaint form will not be accepted.

If you have any questions about filling out this form, please contact the Secretary's Bureau at 717-772-7777.

Keep a copy of your complaint for your records.

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

JULY 14, 2006

JOHN H. ISOM
POST & SCHELL
17 NORTH SECOND STREET
12th FLOOR
HARRISBURG PA 17101-1601

DOCUMENT
FOLDER

RE: PA PUC vs. NATIONAL FUEL GAS DISTRIBUTION CORPORATION
Docket Number R-00061493C0011

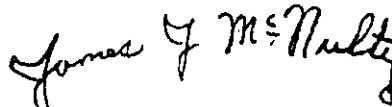
Dear Sir/Madam:

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

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

jih

DOCKETED
JUL 20 2006

PENNSYLVANIA PUBLIC UTILITY COMMISSION

ORIGINAL

Formal Complaint Form

Please print or type.

R-000614930002

2006 JUL 10 AM 9:55

SECRETARY'S BUREAU

1. CUSTOMER NAME (COMPLAINANT)

Your name, mailing address, county, telephone number, utility account number and service address:

Name CHARLES W. GOEHRING

Street/P.O. Box 2731 PATIO DRIVE Apt # _____

City ERIE State PA Zip 16506

County ERIE

Area Code/HOME Phone (814) 835-3450

Area Code/WORK Phone (814) 833-6131

Utility Account Number 4740084-06
(from your bill)

DOCUMENT
FOLDER

If your complaint involves utility service provided to a different address than your mailing address, please list this information below.

Name _____

Street/P.O. Box _____

City _____ State _____ Zip _____

DOCKETED
JUL 20 2006

2. UTILITY NAME (RESPONDENT)

Name of utility company your complaint concerns: NATIONAL FUEL GAS

3. TYPE OF UTILITY (check one)

ELECTRIC

STEAM HEAT

GAS

WASTE WATER

WATER

MOTOR CARRIER
(taxi, moving company, limousine)

TELEPHONE
(local, long distance)

56

4. COMPLAINT (check one)

A. In general, what is your complaint?

- I want to oppose the company's proposed rate increase.
- There are incorrect charges on my bill.
- There is a reliability, safety or quality problem with my utility service.
- I received a notice that my utility service is being terminated.
- I would like a payment agreement.
- Other.
(explain)

B. State the facts of your complaint.

Include any specific dates, times or places that are important. If the complaint is about a bill, tell us about any charges that you believe are not correct. Use additional paper if you need more space. Provide copies of all relevant documents you believe will support your complaint.

NATIONAL FUEL GAS IS REQUESTING TWO RATE HIKE:

1) 6.7% GENERAL RATE HIKE

2) SURCHARGE FOR CONSERVATION

* WHEN NATURAL GAS WENT FROM \$7.00 PER MILLION BTU TO \$14.00 PER MILLION BTU, OUR BILL WENT UP 30-40%. NOW GAS IS DOWN UNDER \$7.00 PER MILLION BTU, OUR BILL WAS REDUCED 4.5%. THE CONSUMER NEEDS RELIEF. THIS IS ANOTHER ENRON! NFG IS A MONOPOLY, THERE'S NO WHERE TO GO!
RELIEF

5.

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

DO NOT GRANT NFG THE REQUESTED HIKE. SINCE WE ONLY PAY FOR THE GAS FLUCTUATIONS, REDUCE NFG'S BILLING BY THE 30-40% LEVIED AS

THE PRICE OF GAS HAS FALLEN BACK TO COSTS PRIOR TO THE INCREASE. DON'T BE

NATIONAL FUEL'S RUBBER STAMP!
IF NFG ISN'T MAKING PAYROLL, IT'S TIME TO CUT THE PAYROLL, STOP WASTE AND ACT LIKE ANY OTHER BUSINESS. TOUGH DECISIONS NEED TO BE MADE AND

IMPLEMENTED, NOT⁵ SURCHARGED TO THE CONSUMER.

6. PROTECTION FROM ABUSE

Answer the following question if your complaint is against a natural gas distribution company, an electric distribution company or a water company AND your complaint is about a billing problem, an application for service problem, a termination of service problem or a request for a payment agreement.

Has a court granted a "Protection from Abuse" order for your personal safety?

YES

NO

7. PRIOR UTILITY CONTACT

Answer the following question only if you are a residential customer and your complaint is against an electric distribution utility, natural gas distribution utility or a water distribution utility.

Have you spoken to a utility company representative about this complaint?

YES
(includes appeals of BCS determinations)

NO

If you tried to, but could not speak to a utility company representative about your complaint, please explain why.

8. VERIFICATION AND SIGNATURE

You must print or type your name below on the line provided for the verification paragraph, and you must sign and date (in ink) this form on the lines provided.

Verification:

I CHARLES W. GOETTING, hereby state that the facts above set forth are true and correct (or are true and correct to the best of my knowledge, information and belief) and that I expect to be able to prove the same at a hearing held in this matter. I understand that the statements herein are made subject to the penalties of 18 Pa. C.S. § 4904 (relating to unsworn falsification to authorities).

Charles W. Goetting
(Signature)

1 JULY 06
(Date)

9. LEGAL REPRESENTATION (IF ANY)

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

Lawyer's Name _____

Street _____

City _____ State _____ Zip _____

Area Code/Phone Number _____

10. FILING

Please return the completed form to one of the addresses listed below:

If using U.S. Postal Service:

If using overnight delivery service:

| | |
|--|--|
| Secretary Pennsylvania Public Utility Commission P.O. Box 3265 Harrisburg, PA 17105 | Secretary Pennsylvania Public Utility Commission 400 North Street Commonwealth Keystone Building, 2 nd Floor Harrisburg, Pennsylvania 17120 |
|--|--|

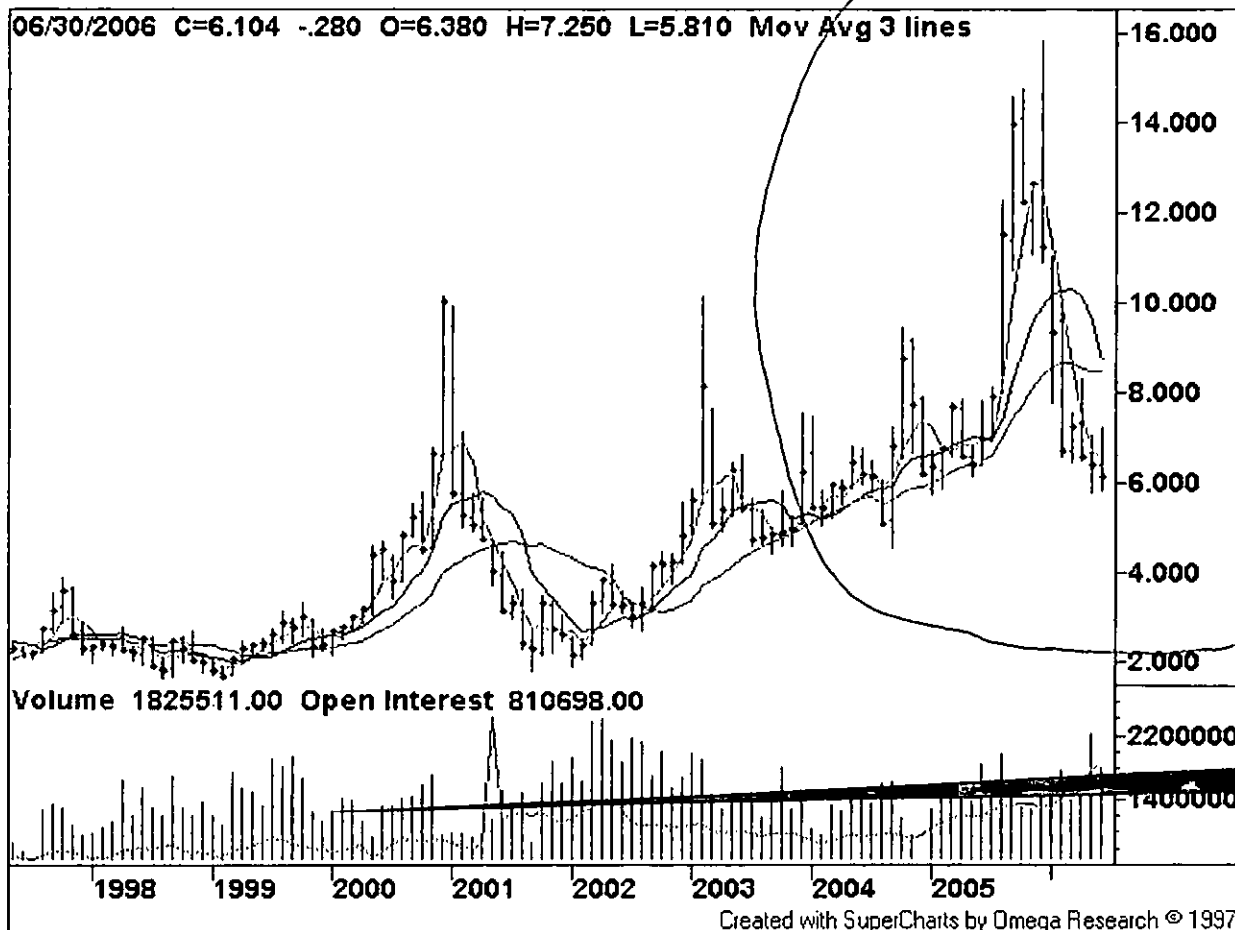
Facsimiles and/or electronic filings of the complaint form will not be accepted.

If you have any questions about filling out this form, please contact the Secretary's Bureau at 717-772-7777.

Keep a copy of your complaint for your records.



TFC Commodity Charts
Natural Gas (NG, NYMEX)
 Monthly Price Chart



[Return] [Chart Menu] [Personal Menu] [Home]

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

JULY 14, 2006

JOHN H. ISOM
POST & SCHELL
17 NORTH SECOND STREET
12th FLOOR
HARRISBURG PA 17101-1601

DOCUMENT
FOLDER

RE: PA PUC vs. NATIONAL FUEL GAS DISTRIBUTION CORPORATION
Docket Number R-00061493C0012

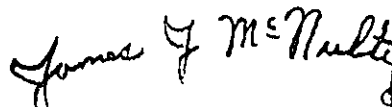
Dear Sir/Madam:

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

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

jih

DOCKETED
JUL 20 2006

ORIGINAL

PENNSYLVANIA PUBLIC UTILITY COMMISSION

Formal Complaint Form

R-00061493 C0013

RECEIVED
2006 JUL 12 AM 9:35
SECRETARY'S OFFICE
BUREAU

Please print or type.

1. CUSTOMER NAME (COMPLAINANT)

Your name, mailing address, county, telephone number, utility account number and service address:

Name PATRICIA D. WOLFGANG

Street/P.O. Box RR 3 Box 3264A Apt # _____

City RUSSELL State PA Zip 16345

County WARREN

Area Code/HOME Phone 814-757-8895

Area Code/WORK Phone _____

Utility Account Number _____
(from your bill)

DOCUMENT
FOLDER

If your complaint involves utility service provided to a different address than your mailing address, please list this information below.

Name _____

Street/P.O. Box _____

City _____ State _____ Zip _____

DOCKETED
JUL 20 2006

2. UTILITY NAME (RESPONDENT)

Name of utility company your complaint concerns: NATIONAL FUEL GAS

3. TYPE OF UTILITY (check one)

- ELECTRIC
- GAS
- WATER
- TELEPHONE
(local, long distance)
- STEAM HEAT
- WASTE WATER
- MOTOR CARRIER
(taxi, moving company, limousine)

4. COMPLAINT (check one)

A. In general, what is your complaint?

- I want to oppose the company's proposed rate increase.
- There are incorrect charges on my bill.
- There is a reliability, safety or quality problem with my utility service.
- I received a notice that my utility service is being terminated.
- I would like a payment agreement.
- Other.
(explain)

B. State the facts of your complaint.

Include any specific dates, times or places that are important. If the complaint is about a bill, tell us about any charges that you believe are not correct. Use additional paper if you need more space. Provide copies of all relevant documents you believe will support your complaint.

From my understanding, National Fuel has proposed a surcharge to customers who use less fuel than the previous period. This amounts to a company just taking money from their customers. It's called theft when we take something that doesn't belong to us. National Fuel would be taking money that does not belong to them. (See attached sheet)

5. RELIEF

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

Do not approve this charge

The only way National Fuel or any other Company should get money from a customer is if that customer makes a purchase and then they should only be charged for that purchase.

If this is approved, I will go to all electric as I refuse to give National Fuel or anyone else money for nothing!

Regardless of what name is assigned to it (surcharge) it is just taking money from customers for services NOT rendered.

National Fuel should be ashamed for even presenting this idea.

Let them tighten their belts when it comes to their budget. That's what the ~~business~~ consumer has to do.

6. PROTECTION FROM ABUSE

Answer the following question if your complaint is against a natural gas distribution company, an electric distribution company or a water company **AND** your complaint is about a billing problem, an application for service problem, a termination of service problem or a request for a payment agreement.

Has a court granted a "Protection from Abuse" order for your personal safety?

YES

NO

7. PRIOR UTILITY CONTACT

Answer the following question only if you are a residential customer and your complaint is against an electric distribution utility, natural gas distribution utility or a water distribution utility.

Have you spoken to a utility company representative about this complaint?

YES

(includes appeals of BCS determinations)

NO

If you tried to, but could not speak to a utility company representative about your complaint, please explain why.

8. VERIFICATION AND SIGNATURE

You must print or type your name below on the line provided for the verification paragraph, and you must sign and date (in ink) this form on the lines provided.

Verification:

I Patricia Wolfgang, hereby state that the facts above set forth are true and correct (or are true and correct to the best of my knowledge, information and belief) and that I expect to be able to prove the same at a hearing held in this matter. I understand that the statements herein are made subject to the penalties of 18 Pa. C.S. § 4904 (relating to unsworn falsification to authorities).

Patricia Wolfgang
(Signature)

7/3/06
(Date)

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

JULY 14, 2006

JOHN H. ISOM
POST & SCHELL
17 NORTH SECOND STREET
12th FLOOR
HARRISBURG PA 17101-1601

DOCUMENT
FOLDER

RE: PA PUC vs. NATIONAL FUEL GAS DISTRIBUTION CORPORATION
Docket Number R-00061493C0013

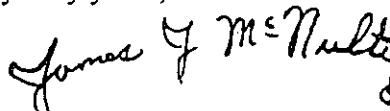
Dear Sir/Madam:

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

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

jih

DOCKETED
JUL 20 2006

ORIGINAL

PENNSYLVANIA PUBLIC UTILITY COMMISSION

Formal Complaint Form

RECEIVED
2005 JUL -7 AM 9:01
SECRETARY'S OFFICE

Please print or type.

R-00061493 C0014

1. CUSTOMER NAME (COMPLAINANT)

Your name, mailing address, county, telephone number, utility account number and service address:

Name Michael T. Greene

Street/P.O. Box 3304 W. 38th st Apt # _____

City Greene State PA Zip 16506

County Greene

Area Code/HOME Phone (814) 838-0723

Area Code/WORK Phone (814) 833-1847

Utility Account Number 5705678-01
(from your bill)

DOCUMENT
FOLDER

If your complaint involves utility service provided to a different address than your mailing address, please list this information below.

Name _____

Street/P.O. Box _____

City _____ State _____ Zip _____

DOCKETED
JUL 20 2006

2. UTILITY NAME (RESPONDENT)

Name of utility company your complaint concerns: Natural Fuel Gas

3. TYPE OF UTILITY (check one)

ELECTRIC

STEAM HEAT

GAS

WASTE WATER

WATER

MOTOR CARRIER
(taxi, moving company, limousine)

TELEPHONE
(local, long distance)

4. **COMPLAINT** (check one)

A. **In general, what is your complaint?**

- I want to oppose the company's proposed rate increase (surcharge)
- There are incorrect charges on my bill.
- There is a reliability, safety or quality problem with my utility service.
- I received a notice that my utility service is being terminated.
- I would like a payment agreement.
- Other.
(explain)

B. **State the facts of your complaint.**

Include any specific dates, times or places that are important. If the complaint is about a bill, tell us about any charges that you believe are not correct. Use additional paper if you need more space. Provide copies of all relevant documents you believe will support your complaint.

5. **RELIEF**

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

stop them from stealing money, which also ~~is~~ is used for food, clothing and shelter for my family.

6. PROTECTION FROM ABUSE

Answer the following question if your complaint is against a natural gas distribution company, an electric distribution company or a water company AND your complaint is about a billing problem, an application for service problem, a termination of service problem or a request for a payment agreement.

Has a court granted a "Protection from Abuse" order for your personal safety?

YES
NO

7. PRIOR UTILITY CONTACT

Answer the following question only if you are a residential customer and your complaint is against an electric distribution utility, natural gas distribution utility or a water distribution utility.

Have you spoken to a utility company representative about this complaint?


YES
(includes appeals of BCS determinations)
NO

If you tried to, but could not speak to a utility company representative about your complaint, please explain why.

8. VERIFICATION AND SIGNATURE

You must print or type your name below on the line provided for the verification paragraph, and you must sign and date (in ink) this form on the lines provided.

Verification: I Michael T. Greene, hereby state that the facts above set forth are true and correct (or are true and correct to the best of my knowledge, information and belief) and that I expect to be able to prove the same at a hearing held in this matter. I understand that the statements herein are made subject to the penalties of 18 Pa. C.S. § 4904 (relating to unsworn falsification to authorities).

 7-4-06
(Signature) (Date)

9. **LEGAL REPRESENTATION (IF ANY)**

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

Lawyer's Name _____

Street _____

City _____ State _____ Zip _____

Area Code/Phone Number _____

10. **FILING**

Please return the completed form to one of the addresses listed below:

If using U.S. Postal Service:

If using overnight delivery service:

| | |
|--|--|
| Secretary Pennsylvania Public Utility Commission P.O. Box 3265 Harrisburg, PA 17105 | Secretary Pennsylvania Public Utility Commission 400 North Street Commonwealth Keystone Building, 2 nd Floor Harrisburg, Pennsylvania 17120 |
|--|--|

Facsimiles and/or electronic filings of the complaint form will not be accepted.

If you have any questions about filling out this form, please contact the Secretary's Bureau at 717-772-7777.

Keep a copy of your complaint for your records.

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

JULY 14, 2006

JOHN H. ISOM
POST & SCHELL
17 NORTH SECOND STREET
12th FLOOR
HARRISBURG PA 17101-1601

DOCUMENT
FOLDER

RE: PA PUC vs. NATIONAL FUEL GAS DISTRIBUTION CORPORATION
Docket Number R-00061493C0014

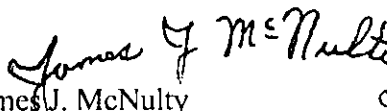
Dear Sir/Madam:

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

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

DOCKETED
JUL 20 2006

jih

ORIGINAL

PENNSYLVANIA PUBLIC UTILITY COMMISSION

Formal Complaint Form

RECORDED

2006 JUL 10 AM 9:27

SECRETARY'S BUREAU

Please print or type.

R-00061493 COOLIS

1. CUSTOMER NAME (COMPLAINANT)

Your name, mailing address, county, telephone number, utility account number and service address:

Name JAN ALSPAUGH

Street/P.O. Box 3092 A STANTON HILL RD Apt # _____

City Russell State PA Zip 16345

County WARREN

Area Code/HOME Phone 814-757-8788

Area Code/WORK Phone NA

Utility Account Number 5460187-08
(from your bill)

DOCUMENT
FOLDER

If your complaint involves utility service provided to a different address than your mailing address, please list this information below.

Name _____

Street/P.O. Box _____

City _____ State _____ Zip _____

2. UTILITY NAME (RESPONDENT)

Name of utility company your complaint concerns: National Fuel

3. TYPE OF UTILITY (check one)

ELECTRIC

STEAM HEAT

GAS

WASTE WATER

WATER

MOTOR CARRIER

(taxi, moving company, limousine)

TELEPHONE
(local, long distance)

DOCKETED
JUL 31 2006

71

4. **COMPLAINT** (check one)

A. **In general, what is your complaint?**

- I want to oppose the company's proposed rate increase.
- There are incorrect charges on my bill.
- There is a reliability, safety or quality problem with my utility service.
- I received a notice that my utility service is being terminated.
- I would like a payment agreement.
- Other.
(explain)

B. **State the facts of your complaint.**

Include any specific dates, times or places that are important. If the complaint is about a bill, tell us about any charges that you believe are not correct. Use additional paper if you need more space. Provide copies of all relevant documents you believe will support your complaint.

I do not believe that a surcharge is justified to recoup a loss caused by conservation. ALL (most) people I have talked to are outraged. Greed is the only possible reason they can have. There is no logic to explain it. It's business. They sell a product, they should make it on their sales.

5. **RELIEF**

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

I would like to have a well publicised hearing at a time when people can attend without leaving their jobs. have 2 hearing times if necessary.

I would like the public utility commission to stand up for the public. - America is waking up. We can't survive if things of this nature aren't stopped.

Just SAY NO!

6. PROTECTION FROM ABUSE

Answer the following question if your complaint is against a natural gas distribution company, an electric distribution company or a water company AND your complaint is about a billing problem, an application for service problem, a termination of service problem or a request for a payment agreement.

Has a court granted a "Protection from Abuse" order for your personal safety?

YES

NO

7. PRIOR UTILITY CONTACT

Answer the following question only if you are a residential customer and your complaint is against an electric distribution utility, natural gas distribution utility or a water distribution utility.

Have you spoken to a utility company representative about this complaint?

YES

(includes appeals of BCS determinations)

NO

If you tried to, but could not speak to a utility company representative about your complaint, please explain why.

8. VERIFICATION AND SIGNATURE

You must print or type your name below on the line provided for the verification paragraph, and you must sign and date (in ink) this form on the lines provided.

Verification:

I JAN ALSPAUGH, hereby state that the facts above set forth are true and correct (or are true and correct to the best of my knowledge, information and belief) and that I expect to be able to prove the same at a hearing held in this matter. I understand that the statements herein are made subject to the penalties of 18 Pa. C.S. § 4904 (relating to unsworn falsification to authorities).

JAN ALSPAUGH
(Signature)

7-7-06
(Date)

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

JULY 18, 2006

JOHN H. ISOM
POST & SCHELL
17 NORTH SECOND STREET
12TH FLOOR
HARRISBURG PA 17101-1601

DOCUMENT
FOLDER

RE: PA PUC vs. NATIONAL FUEL GAS DISTRIBUTION CORPORATION
Docket Number R-00061493C0015

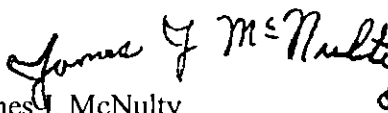
Dear Sir/Madam:

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

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

DOCKETED
JUL 31 2006

jih

ORIGINAL

PENNSYLVANIA PUBLIC UTILITY COMMISSION

Formal Complaint Form

RECEIVED

2006 JUL 12 AM 9:35

SECRETARY'S BUREAU

Please print or type.

R-00061493 C0016

1. CUSTOMER NAME (COMPLAINANT)

Your name, mailing address, county, telephone number, utility account number and service address:

Name Shirley Alvino ^{with} Shirley ALVINO ^{Print}

Street/P.O. Box 15 Elm ST Apt # DOWN

City WARREN State Pa Zip 16365

County WARREN

Area Code/HOME Phone 814

Area Code/WORK Phone _____

Utility Account Number 6074810-09
(from your bill)

DOCUMENT
FOLDER

If your complaint involves utility service provided to a different address than your mailing address, please list this information below.

Name _____

Street/P.O. Box _____

City _____ State _____ Zip _____

2. UTILITY NAME (RESPONDENT)

Name of utility company your complaint concerns: National Fuel

3. TYPE OF UTILITY (check one)

ELECTRIC

STEAM HEAT

GAS

WASTE WATER

WATER

MOTOR CARRIER
(taxi, moving company, limousine)

TELEPHONE
(local, long distance)

DOCKETED
JUL 31 2006

9

4. **COMPLAINT** (check one)

A. **In general, what is your complaint?**

- I want to oppose the company's proposed rate increase.
- There are incorrect charges on my bill.
- There is a reliability, safety or quality problem with my utility service.
- I received a notice that my utility service is being terminated.
- I would like a payment agreement.
- Other.
(explain)

B. **State the facts of your complaint.**

Include any specific dates, times or places that are important. If the complaint is about a bill, tell us about any charges that you believe are not correct. Use additional paper if you need more space. Provide copies of all relevant documents you believe will support your complaint.

5. **RELIEF**

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

don't ~~raise our~~ ~~rate~~ ~~you~~ utility any more
I nearly froze last winter I cut back
to conserve now you want me to pay
more because I cut back. I can't
go any lower on my gas bill.
unless you want me to freeze
I'm on fixed income 603 a month
can't pay more.

6. PROTECTION FROM ABUSE

Answer the following question if your complaint is against a natural gas distribution company, an electric distribution company or a water company AND your complaint is about a billing problem, an application for service problem, a termination of service problem or a request for a payment agreement.

Has a court granted a "Protection from Abuse" order for your personal safety?

YES

NO

7. PRIOR UTILITY CONTACT

Answer the following question only if you are a residential customer and your complaint is against an electric distribution utility, natural gas distribution utility or a water distribution utility.

Have you spoken to a utility company representative about this complaint?

YES

(includes appeals of BCS determinations)

NO

If you tried to, but could not speak to a utility company representative about your complaint, please explain why.

8. VERIFICATION AND SIGNATURE

You must print or type your name below on the line provided for the verification paragraph, and you must sign and date (in ink) this form on the lines provided.

Verification:

I Shirley ALVINO, hereby state that the facts above set forth are true and correct (or are true and correct to the best of my knowledge, information and belief) and that I expect to be able to prove the same at a hearing held in this matter. I understand that the statements herein are made subject to the penalties of 18 Pa. C.S. § 4904 (relating to unsworn falsification to authorities).

Shirley Alvin
(Signature)

7-8-06
(Date)

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

JULY 18, 2006

JOHN H. ISOM
POST & SCHELL
17 NORTH SECOND STREET
12TH FLOOR
HARRISBURG PA 17101-1601

DOCUMENT
FOLDER

RE: PA PUC vs. NATIONAL FUEL GAS DISTRIBUTION CORPORATION
Docket Number R-00061493C0016

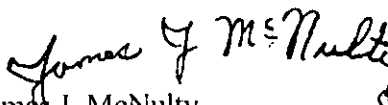
Dear Sir/Madam:

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

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

jih

DOCKETED
JUL 31 2006

ORIGINAL

PENNSYLVANIA PUBLIC UTILITY COMMISSION

Formal Complaint Form

RECEIVED
2006 JUL 12 AM 9:35
SECRETARY'S BUREAU

Please print or type.

R-00061493C0017

1. CUSTOMER NAME (COMPLAINANT)

Your name, mailing address, county, telephone number, utility account number and service address:

Name PRISCILLA J. SPENCER

Street/P.O. Box 26 SMAW ST. Apt # _____

City CHANDLER VALLEY State PA Zip 16312

County WARREN

Area Code/HOME Phone 814-489-3352

Area Code/WORK Phone NA

Utility Account Number 3187063-05
(from your bill)

DOCUMENT
FOLDER

If your complaint involves utility service provided to a different address than your mailing address, please list this information below.

Name NA.

Street/P.O. Box _____

City _____ State _____ Zip _____

2. UTILITY NAME (RESPONDENT)

Name of utility company your complaint concerns: NATIONAL FUEL

3. TYPE OF UTILITY (check one)

- | | |
|--|---|
| <input type="checkbox"/> ELECTRIC | <input type="checkbox"/> STEAM HEAT |
| <input checked="" type="checkbox"/> GAS | <input type="checkbox"/> WASTE WATER |
| <input type="checkbox"/> WATER | <input type="checkbox"/> MOTOR CARRIER (taxi, moving company, limousine) |
| <input type="checkbox"/> TELEPHONE (local, long distance) | |

DOCKETED
JUL 31 2006

13

4. **COMPLAINT** (check one)

A. **In general, what is your complaint?**

- I want to oppose the company's proposed rate increase.
- There are incorrect charges on my bill.
- There is a reliability, safety or quality problem with my utility service.
- I received a notice that my utility service is being terminated.
- I would like a payment agreement.
- Other.
(explain)

B. **State the facts of your complaint.**

Include any specific dates, times or places that are important. If the complaint is about a bill, tell us about any charges that you believe are not correct. Use additional paper if you need more space. Provide copies of all relevant documents you believe will support your complaint.

I AM AGAINST THE NATIONAL FUEL REQUEST TO ADD AN ENERGY CONSERVATION SURCHARGE TO MY GAS BILL. MY INCOME IS A SMALL PENSION & SOCIAL SECURITY, I CANNOT AFFORD TO PAY A HIGHER RATE.

5. **RELIEF**

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

I WANT THE P.U.C. TO DENY NATIONAL FUEL THEIR REQUEST FOR THE CONSERVATION SURCHARGE

6. PROTECTION FROM ABUSE

Answer the following question if your complaint is against a natural gas distribution company, an electric distribution company or a water company **AND** your complaint is about a billing problem, an application for service problem, a termination of service problem or a request for a payment agreement.

Has a court granted a "Protection from Abuse" order for your personal safety?

YES

NO

7. PRIOR UTILITY CONTACT

Answer the following question only if you are a residential customer and your complaint is against an electric distribution utility, natural gas distribution utility or a water distribution utility.

Have you spoken to a utility company representative about this complaint?

YES

(includes appeals of BCS determinations)

NO

If you tried to, but could not speak to a utility company representative about your complaint, please explain why.

8. VERIFICATION AND SIGNATURE

You must print or type your name below on the line provided for the verification paragraph, and you must sign and date (in ink) this form on the lines provided.

Verification:

I PRISCILLA J. SPEULER, hereby state that the facts above set forth are true and correct (or are true and correct to the best of my knowledge, information and belief) and that I expect to be able to prove the same at a hearing held in this matter. I understand that the statements herein are made subject to the penalties of 18 Pa. C.S. § 4904 (relating to unsworn falsification to authorities).

Priscilla J. Speuler
(Signature)

7-10-06
(Date)

9. LEGAL REPRESENTATION (IF ANY)

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

Lawyer's Name UA

Street _____

City _____ State _____ Zip _____

Area Code/Phone Number _____

10. FILING

Please return the completed form to one of the addresses listed below:

If using U.S. Postal Service:

If using overnight delivery service:

| | |
|--|--|
| Secretary Pennsylvania Public Utility Commission P.O. Box 3265 Harrisburg, PA 17105 | Secretary Pennsylvania Public Utility Commission 400 North Street Commonwealth Keystone Building, 2 nd Floor Harrisburg, Pennsylvania 17120 |
|--|--|

Facsimiles and/or electronic filings of the complaint form will not be accepted.

If you have any questions about filling out this form, please contact the Secretary's Bureau at 717-772-7777.

Keep a copy of your complaint for your records.

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

JULY 18, 2006

JOHN H. ISOM
POST & SCHELL
17 NORTH SECOND STREET
12TH FLOOR
HARRISBURG PA 17101-1601

DOCUMENT
FOLDER

RE: PA PUC vs. NATIONAL FUEL GAS DISTRIBUTION CORPORATION
Docket Number R-00061493C0017

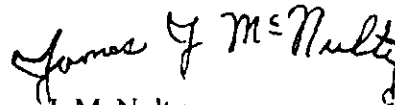
Dear Sir/Madam:

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

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

jih

DOCKETED
JUL 31 2006

ORIGINAL

PENNSYLVANIA PUBLIC UTILITY COMMISSION

Formal Complaint Form

2006 JUL 10 AM 9:49

SECRETARY'S BUREAU

Please print or type.

R-0006149300018

1. CUSTOMER NAME (COMPLAINANT)

Your name, mailing address, county, telephone number, utility account number and service address:

Name Donald J. Frye

Street/P.O. Box 11 Rumbarger Ave Apt # _____

City DuBois State Pa. Zip 15801

County Clearfield

Area Code/HOME Phone 814-371-8760

Area Code/WORK Phone SAME

Utility Account Number 5320269-04
(from your bill)

DOCUMENT FOLDER

If your complaint involves utility service provided to a different address than your mailing address, please list this information below.

Name _____

Street/P.O. Box _____

City _____ State _____ Zip _____

2. UTILITY NAME (RESPONDENT)

Name of utility company your complaint concerns: National Fuel GAS Distribution Corporation

3. TYPE OF UTILITY (check one)

- ELECTRIC
- GAS
- WATER
- TELEPHONE
(local, long distance)
- STEAM HEAT
- WASTE WATER
- MOTOR CARRIER
(taxi, moving company, limousine)

DOCKETED
JUL 31 2006

53

4. COMPLAINT (check one)

A. In general, what is your complaint?

I want to oppose the company's proposed rate increase.

There are incorrect charges on my bill.

There is a reliability, safety or quality problem with my utility service.

I received a notice that my utility service is being terminated.

I would like a payment agreement.

Other. *They want to also put a Surge Charge*
(explain) *If we don't use a certain amount of GAS.*

B. State the facts of your complaint.

Include any specific dates, times or places that are important. If the complaint is about a bill, tell us about any charges that you believe are not correct. Use additional paper if you need more space. Provide copies of all relevant documents you believe will support your complaint.

5. RELIEF

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

To have a hearing in DuBois!
My GAS bill is too high now. And they
want to put Surge Charge on if I don't
use enough GAS.

6. PROTECTION FROM ABUSE

Answer the following question if your complaint is against a natural gas distribution company, an electric distribution company or a water company **AND** your complaint is about a billing problem, an application for service problem, a termination of service problem or a request for a payment agreement.

Has a court granted a "Protection from Abuse" order for your personal safety?

YES

(NA)

NO

7. PRIOR UTILITY CONTACT

Answer the following question only if you are a residential customer and your complaint is against an electric distribution utility, natural gas distribution utility or a water distribution utility.

Have you spoken to a utility company representative about this complaint?

YES

(NA)

(includes appeals of BCS determinations)

NO

If you tried to, but could not speak to a utility company representative about your complaint, please explain why.

8. VERIFICATION AND SIGNATURE

You must print or type your name below on the line provided for the verification paragraph, and you must sign and date (in ink) this form on the lines provided.

Verification:

I Donald J. Frye, hereby state that the facts above set forth are true and correct (or are true and correct to the best of my knowledge, information and belief) and that I expect to be able to prove the same at a hearing held in this matter. I understand that the statements herein are made subject to the penalties of 18 Pa. C.S. § 4904 (relating to unsworn falsification to authorities).

Donald J. Frye
(Signature)

July 6, 06
(Date)

9. LEGAL REPRESENTATION (IF ANY) (NA)

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

Lawyer's Name _____

Street _____

City _____ State _____ Zip _____

Area Code/Phone Number _____

10. FILING

Please return the completed form to one of the addresses listed below:

If using U.S. Postal Service:

If using overnight delivery service:

| | |
|--|--|
| Secretary Pennsylvania Public Utility Commission P.O. Box 3265 Harrisburg, PA 17105 | Secretary Pennsylvania Public Utility Commission 400 North Street Commonwealth Keystone Building, 2 nd Floor Harrisburg, Pennsylvania 17120 |
|--|--|

Facsimiles and/or electronic filings of the complaint form will not be accepted.

If you have any questions about filling out this form, please contact the Secretary's Bureau at 717-772-7777.

Keep a copy of your complaint for your records.

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

JULY 18, 2006

JOHN H. ISOM
POST & SCHELL
17 NORTH SECOND STREET
12TH FLOOR
HARRISBURG PA 17101-1601

DOCUMENT
FOLDER

RE: PA PUC vs. NATIONAL FUEL GAS DISTRIBUTION CORPORATION
Docket Number R-00061493C0018

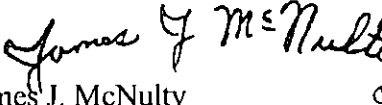
Dear Sir/Madam:

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

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

jih

DOCKETED
JUL 31 2006

ORIGINAL

PENNSYLVANIA PUBLIC UTILITY COMMISSION

Formal Complaint Form

RECEIVED
2006 JUL 17 AM 9:07
SECRETARY'S BUREAU

Please print or type.

R-00061493C0019

1. CUSTOMER NAME (COMPLAINANT)

Your name, mailing address, county, telephone number, utility account number and service address:

Name NANCY L. MCKEE

Street/P.O. Box 554 CRESCENT PARK Apt # _____

City WARREN State PA Zip 16365

County WARREN

Area Code/HOME Phone 814-723-7383

Area Code/WORK Phone _____

Utility Account Number 329 7547-03
(from your bill)

DOCUMENT
FOLDER

If your complaint involves utility service provided to a different address than your mailing address, please list this information below.

Name _____

Street/P.O. Box _____

City _____ State _____ Zip _____

2. UTILITY NAME (RESPONDENT)

Name of utility company your complaint concerns: National Fuel Gas Co.

3. TYPE OF UTILITY (check one)

- ELECTRIC
- GAS
- WATER
- TELEPHONE
(local, long distance)
- STEAM HEAT
- WASTE WATER
- MOTOR CARRIER
(taxi, moving company, limousine)

DOCKETED
JUL 31 2006

4. COMPLAINT (check one)

A. In general, what is your complaint?

- I want to oppose the company's proposed rate increase.
- There are incorrect charges on my bill.
- There is a reliability, safety or quality problem with my utility service.
- I received a notice that my utility service is being terminated.
- I would like a payment agreement.
- Other.
(explain)

B. State the facts of your complaint.

Include any specific dates, times or places that are important. If the complaint is about a bill, tell us about any charges that you believe are not correct. Use additional paper if you need more space. Provide copies of all relevant documents you believe will support your complaint.

Last year the company increased rates due to fuel shortages (?) and asked people to decrease gas consumption. When we did - were sweeter and were cold all winter - our gas bills were outrageous. Now they say they are increasing rates because we are using less. They need to find a way to cut corporate costs - not make the customers pay for their problems.

5. RELIEF

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

The people who own these companies are wealthy. How can they live knowing there are senior citizens on fixed incomes and young people working 243 minimum wage jobs who can't afford the present rates? The owners could live the rest of their lives on the money they have made - let them cut the cost or take the loss!

6. PROTECTION FROM ABUSE

Answer the following question if your complaint is against a natural gas distribution company, an electric distribution company or a water company AND your complaint is about a billing problem, an application for service problem, a termination of service problem or a request for a payment agreement.

Has a court granted a "Protection from Abuse" order for your personal safety?

YES

NO

7. PRIOR UTILITY CONTACT

Answer the following question only if you are a residential customer and your complaint is against an electric distribution utility, natural gas distribution utility or a water distribution utility.

Have you spoken to a utility company representative about this complaint?

YES (includes appeals of BCS determinations)

NO

If you tried to, but could not speak to a utility company representative about your complaint, please explain why.

They had no comments.

8. VERIFICATION AND SIGNATURE

You must print or type your name below on the line provided for the verification paragraph, and you must sign and date (in ink) this form on the lines provided.

Verification:

I NANCY L. MCKEE, hereby state that the facts above set forth are true and correct (or are true and correct to the best of my knowledge, information and belief) and that I expect to be able to prove the same at a hearing held in this matter. I understand that the statements herein are made subject to the penalties of 18 Pa. C.S. § 4904 (relating to unsworn falsification to authorities).

Nancy L. McKee
(Signature)

7/15/06
(Date)

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

JULY 17, 2006

JOHN H ISOM
POST & SCHELL
17 NORTH SECOND STREET 12TH FLOOR
HARRISBURG PA 17101-1601

DOCUMENT
FOLDER

RE: PA PUC vs NATIONAL FUEL GAS DIST
Docket Number R-00061493C0019

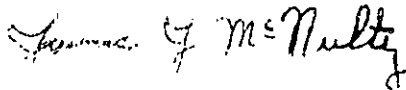
Dear Sir/Madam:

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

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

DOCKETED
JUL 31 2006

ddi

ORIGINAL

PENNSYLVANIA PUBLIC UTILITY COMMISSION

Formal Complaint Form

Please print or type.

R-00061493C0020

1. CUSTOMER NAME (COMPLAINANT)

Your name, mailing address, county, telephone number, utility account number and service address:

Name HARRY F. CLARK

Street/P.O. Box 11065 FREEPORT LN Apt #

City NORTH EAST State PA Zip 16428

County ERIE

Area Code/HOME Phone 814-725-1297

Area Code/WORK Phone

Utility Account Number # 5921552-06 (from your bill)

DOCUMENT FOLDER

If your complaint involves utility service provided to a different address than your mailing address, please list this information below.

Name

Street/P.O. Box

City State Zip

2. UTILITY NAME (RESPONDENT)

Name of utility company your complaint concerns: NATIONAL FUEL

3. TYPE OF UTILITY (check one)

ELECTRIC

STEAM HEAT

GAS

WASTE WATER

WATER

MOTOR CARRIER (taxi, moving company, limousine)

TELEPHONE (local, long distance)

RECEIVED SECRETARY'S BUREAU 2006 JUL 17 AM 9:08

DOCKETED JUL 31 2006

12

4. **COMPLAINT** (check one)

A. **In general, what is your complaint?**

- I want to oppose the company's proposed rate increase.
- There are incorrect charges on my bill.
- There is a reliability, safety or quality problem with my utility service.
- I received a notice that my utility service is being terminated.
- I would like a payment agreement.
- Other.
(explain)

B. **State the facts of your complaint.**

Include any specific dates, times or places that are important. If the complaint is about a bill, tell us about any charges that you believe are not correct. Use additional paper if you need more space. Provide copies of all relevant documents you believe will support your complaint.

I oppose NATIONAL FUEL'S proposed rate increase
(supplement 61 to tariff Gas and PUC's #9 filed for
National Fuel)

5. **RELIEF**

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

I'd like the PUC to investigate and disallow
the proposed surcharge and hold an evening
meeting/hearing in Erie, PA.

6. PROTECTION FROM ABUSE

Answer the following question if your complaint is against a natural gas distribution company, an electric distribution company or a water company **AND** your complaint is about a billing problem, an application for service problem, a termination of service problem or a request for a payment agreement.

Has a court granted a "Protection from Abuse" order for your personal safety?

YES

NO

7. PRIOR UTILITY CONTACT

Answer the following question only if you are a residential customer and your complaint is against an electric distribution utility, natural gas distribution utility or a water distribution utility.

Have you spoken to a utility company representative about this complaint?

YES

(includes appeals of BCS determinations)

NO

If you tried to, but could not speak to a utility company representative about your complaint, please explain why.

8. VERIFICATION AND SIGNATURE

You must print or type your name below on the line provided for the verification paragraph, and you must sign and date (in ink) this form on the lines provided.

Verification:

I HARRY F. CLARK, hereby state that the facts above set forth are true and correct (or are true and correct to the best of my knowledge, information and belief) and that I expect to be able to prove the same at a hearing held in this matter. I understand that the statements herein are made subject to the penalties of 18 Pa. C.S. § 4904 (relating to unsworn falsification to authorities).

Harry F. Clark
(Signature)

7-13-06
(Date)

9. LEGAL REPRESENTATION (IF ANY)

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

Lawyer's Name _____
Street _____
City _____ State _____ Zip _____
Area Code/Phone Number _____

10. FILING

Please return the completed form to one of the addresses listed below:

If using U.S. Postal Service:

If using overnight delivery service:

| | |
|--|--|
| Secretary Pennsylvania Public Utility Commission P.O. Box 3265 Harrisburg, PA 17105 | Secretary Pennsylvania Public Utility Commission 400 North Street Commonwealth Keystone Building, 2 nd Floor Harrisburg, Pennsylvania 17120 |
|--|--|

Facsimiles and/or electronic filings of the complaint form will not be accepted.

If you have any questions about filling out this form, please contact the Secretary's Bureau at 717-772-7777.

Keep a copy of your complaint for your records.

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

JULY 17, 2006

JOHN H ISOM
POST & SCHELL
17 NORTH SECOND STREET 12TH FLOOR
HARRISBURG PA 17101-1601

DOCUMENT
FOLDER

RE: PA PUC vs NATIONAL FUEL GAS DIST
Docket Number R-00061493C0020

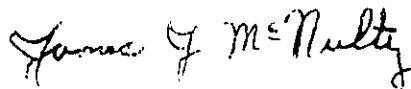
Dear Sir/Madam:

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

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

ddi

DOCKETED
JUL 31 2006

ORIGIN

PENNSYLVANIA PUBLIC UTILITY COMMISSION

Formal Complaint Form

RECEIVED
2006 JUL 17 AM 9:09
Penn. P.U.C.
SECRETARY'S BUREAU

R-0006/493C0021

Please print or type.

1. CUSTOMER NAME (COMPLAINANT)

Your name, mailing address, county, telephone number, utility account number and service address:

Name Clyde W. Camp

Street/P.O. Box 360 Keller Rd Apt # _____

City Warren State Pa. Zip 16365

County Warren

Area Code/HOME Phone 814-563-9616

Area Code/WORK Phone Retired

Utility Account Number 3664609-01
(from your bill)

DOCUMENT
FOLDER

If your complaint involves utility service provided to a different address than your mailing address, please list this information below.

Name _____

Street/P.O. Box _____

City _____ State _____ Zip _____

2. UTILITY NAME (RESPONDENT)

Name of utility company your complaint concerns: National Fuel

3. TYPE OF UTILITY (check one)

- | | |
|--|---|
| <input type="checkbox"/> ELECTRIC | <input type="checkbox"/> STEAM HEAT |
| <input checked="" type="checkbox"/> GAS | <input type="checkbox"/> WASTE WATER |
| <input type="checkbox"/> WATER | <input type="checkbox"/> MOTOR CARRIER (taxi, moving company, limousine) |
| <input type="checkbox"/> TELEPHONE (local, long distance) | |

DOCKETED
JUL 21 2006

4. COMPLAINT (check one)

A. In general, what is your complaint?

- I want to oppose the company's proposed rate increase.
- There are incorrect charges on my bill.
- There is a reliability, safety or quality problem with my utility service.
- I received a notice that my utility service is being terminated.
- I would like a payment agreement.
- Other.
(explain)

B. State the facts of your complaint.

Include any specific dates, times or places that are important. If the complaint is about a bill, tell us about any charges that you believe are not correct. Use additional paper if you need more space. Provide copies of all relevant documents you believe will support your complaint.

I am objecting to the new charges that are to be levied against people who are trying to conserve natural gas by using less. If there is a shortage of natural gas we should not be penalized but commended.

5. RELIEF

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

I would think that if there is to be an additional charge it should be levied on those patrons, private and commercial, that are using the same amount or more gas than in prior years. Taking allowance for changes in average yearly temperatures. I suppose this is too simplistic and makes too much common sense.

6. PROTECTION FROM ABUSE

Answer the following question if your complaint is against a natural gas distribution company, an electric distribution company or a water company **AND** your complaint is about a billing problem, an application for service problem, a termination of service problem or a request for a payment agreement.

Has a court granted a "Protection from Abuse" order for your personal safety?

YES

NO

7. PRIOR UTILITY CONTACT

Answer the following question only if you are a residential customer and your complaint is against an electric distribution utility, natural gas distribution utility or a water distribution utility.

Have you spoken to a utility company representative about this complaint?

YES

(includes appeals of BCS determinations)

NO

If you tried to, but could not speak to a utility company representative about your complaint, please explain why.

8. VERIFICATION AND SIGNATURE

You must print or type your name below on the line provided for the verification paragraph, and you must sign and date (in ink) this form on the lines provided.

Verification:

I Clyde W. Camp, hereby state that the facts above set forth are true and correct (or are true and correct to the best of my knowledge, information and belief) and that I expect to be able to prove the same at a hearing held in this matter. I understand that the statements herein are made subject to the penalties of 18 Pa. C.S. § 4904 (relating to unsworn falsification to authorities).

Clyde W. Camp
(Signature)

7/3/06
(Date)

You do not need to contact the company if your complaint is against a proposed utility rate increase or if you are not a residential service account customer. You do not need to contact the company again if you are filing an appeal from a Bureau of Consumer Services (BCS) determination on an informal complaint.

If you tried to, but could not speak to a utility company representative, please explain why.

8. You must sign your complaint.

In Section Eight (8) of the formal complaint, you **must** print or type your name in the space provided in the verification paragraph and you **must** sign and date your formal complaint form on the lines in this Section. If you do not sign the formal complaint form the Commission will not accept it.

9. If you are represented by a lawyer in this matter, you must provide your lawyer's name, address and telephone number.

If your complaint is about your residential service, you do not need a lawyer. You may represent yourself at the hearing. If naming a lawyer, please make sure the lawyer is aware of your complaint and is representing you in this matter. If you have a lawyer representing you in this matter, you and your lawyer must be present at your hearing.

The Commission requires corporations, associations, partnerships and political subdivisions to have a lawyer at hearing and to file any motions, answers, briefs or other legal pleadings.

10. Please return the completed form to one of the addresses listed below:

If using U.S. Postal Service:

If using overnight delivery service:

| | |
|---|--|
| Secretary Pennsylvania Public Utility Commission P. O. Box 3265 Harrisburg, PA 17105 | Secretary Pennsylvania Public Utility Commission 400 North Street Commonwealth Keystone Building, 2 nd Floor Harrisburg, Pennsylvania 17120 |
|---|--|

Keep a copy of your complaint for your records.

Facsimiles and/or electronic filings of the complaint form will not be accepted.

9. LEGAL REPRESENTATION (IF ANY)

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

Lawyer's Name _____

Street _____

City _____ State _____ Zip _____

Area Code/Phone Number _____

10. FILING

Please return the completed form to one of the addresses listed below:

If using U.S. Postal Service:

If using overnight delivery service:

| | |
|--|--|
| Secretary Pennsylvania Public Utility Commission P.O. Box 3285 Harrisburg, PA 17105 | Secretary Pennsylvania Public Utility Commission 400 North Street Commonwealth Keystone Building, 2 nd Floor Harrisburg, Pennsylvania 17120 |
|--|--|

Facsimiles and/or electronic filings of the complaint form will not be accepted.

If you have any questions about filling out this form, please contact the Secretary's Bureau at 717-772-7777.

Keep a copy of your complaint for your records.

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

JULY 17, 2006

JOHN H ISOM
POST & SCHELL
17 NORTH SECOND STREET 12TH FLOOR
HARRISBURG PA 17101-1601

DOCUMENT
FOLDER

RE: PA PUC vs NATIONAL FUEL GAS DIST
Docket Number R-00061493C0021

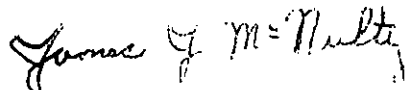
Dear Sir/Madam:

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

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

ddi

DOCKETED
JUL 31 2006

ORIGINAL

PENNSYLVANIA PUBLIC UTILITY COMMISSION

Formal Complaint Form

RECEIVED
2005 JUL 17 AM 9:19
SECRETARY'S BUREAU

Please print or type.

R-00061493C0022

1. CUSTOMER NAME (COMPLAINANT)

Your name, mailing address, county, telephone number, utility account number and service address:

Name Judy Thompson-Froess

Street/P.O. Box 16 Victor Ave Apt # _____

City Warren State PA Zip 16365

County Warren

Area Code/HOME Phone 814-723-2106

Area Code/WORK Phone _____

Utility Account Number 5928439-11
(from your bill)

DOCUMENT
FOLDER

If your complaint involves utility service provided to a different address than your mailing address, please list this information below.

Name _____

Street/P.O. Box _____

City _____ State _____ Zip _____

2. UTILITY NAME (RESPONDENT)

Name of utility company your complaint concerns: _____

3. TYPE OF UTILITY (check one)

ELECTRIC

GAS

WATER

TELEPHONE
(local, long distance)

STEAM HEAT

WASTE WATER

MOTOR CARRIER
(taxi, moving company, limousine)

DOCKETED
JUL 31 2006

4. **COMPLAINT** (check one)

A. **In general, what is your complaint?**

- I want to oppose the company's proposed rate increase.
- There are incorrect charges on my bill.
- There is a reliability, safety or quality problem with my utility service.
- I received a notice that my utility service is being terminated.
- I would like a payment agreement.

Other. **Proposed Surcharges for low gas usage**
(explain)

B. **State the facts of your complaint.**

Include any specific dates, times or places that are important. If the complaint is about a bill, tell us about any charges that you believe are not correct. Use additional paper if you need more space. Provide copies of all relevant documents you believe will support your complaint.

N/A

5. **RELIEF**

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

Refuse National Fuel Co. the right to
Charge a Surcharge fee for low gas
Consumption

6. PROTECTION FROM ABUSE

Answer the following question if your complaint is against a natural gas distribution company, an electric distribution company or a water company **AND** your complaint is about a billing problem, an application for service problem, a termination of service problem or a request for a payment agreement.

Has a court granted a "Protection from Abuse" order for your personal safety?

YES

NO

7. PRIOR UTILITY CONTACT

Answer the following question only if you are a residential customer and your complaint is against an electric distribution utility, natural gas distribution utility or a water distribution utility.

Have you spoken to a utility company representative about this complaint?

YES

(includes appeals of BCS determinations)

NO

If you tried to, but could not speak to a utility company representative about your complaint, please explain why.

8. VERIFICATION AND SIGNATURE

You must print or type your name below on the line provided for the verification paragraph, and you must sign and date (in ink) this form on the lines provided.

Verification:

I Judy Thompson-Froess, hereby state that the facts above set forth are true and correct (or are true and correct to the best of my knowledge, information and belief) and that I expect to be able to prove the same at a hearing held in this matter. I understand that the statements herein are made subject to the penalties of 18 Pa. C.S. § 4904 (relating to unsworn falsification to authorities).

Judy Thompson-Froess
(Signature)

July 14, 2006
(Date)

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

JULY 17, 2006

JOHN H ISOM
POST & SCHELL
17 NORTH SECOND STREET 12TH FLOOR
HARRISBURG PA 17101-1601

DOCUMENT
FOLDER

RE: PA PUC vs NATIONAL FUEL GAS DIST
Docket Number R-00061493C0022

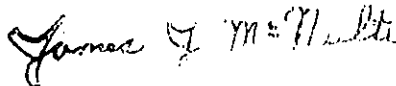
Dear Sir/Madam:

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

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

ddi

DOCKETED
JUL 31 2006

PENNSYLVANIA PUBLIC UTILITY COMMISSION

Formal Complaint Form

ORIGINAL

Please print or type.

R-00061493C0023

1. CUSTOMER NAME (COMPLAINANT)

Your name, mailing address, county, telephone number, utility account number and service address:

Name JOHN SABAT JR

Street/P.O. Box 14 SHERWOOD DR. Apt #

City CLAREMONT State PA Zip 16313

County WARREN

Area Code/HOME Phone (814) 723-8489

Area Code/WORK Phone

Utility Account Number 3224283-02 (from your bill)

DOCUMENT FOLDER

If your complaint involves utility service provided to a different address than your mailing address, please list this information below.

Name

Street/P.O. Box

City State Zip

2. UTILITY NAME (RESPONDENT)

Name of utility company your complaint concerns: NATIONAL FUEL

3. TYPE OF UTILITY (check one)

- ELECTRIC
- GAS
- WATER
- TELEPHONE (local, long distance)
- STEAM HEAT
- WASTE WATER
- MOTOR CARRIER (taxi, moving company, limousine)

SECRETARY'S OFFICE

2006 JUL 17 AM 9:25

RECEIVED

DOCKETED JUL 31 2006

17

4. **COMPLAINT** (check one)

A. **In general, what is your complaint?**

- I want to oppose the company's proposed rate increase.
- There are incorrect charges on my bill.
- There is a reliability, safety or quality problem with my utility service.
- I received a notice that my utility service is being terminated.
- I would like a payment agreement.
- Other.
(explain)

B. **State the facts of your complaint.**

Include any specific dates, times or places that are important. If the complaint is about a bill, tell us about any charges that you believe are not correct. Use additional paper if you need more space. Provide copies of all relevant documents you believe will support your complaint.

5. **RELIEF**

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

STOP THE PROPOSED RATE INCREASE

6. PROTECTION FROM ABUSE

Answer the following question if your complaint is against a natural gas distribution company, an electric distribution company or a water company AND your complaint is about a billing problem, an application for service problem, a termination of service problem or a request for a payment agreement.

Has a court granted a "Protection from Abuse" order for your personal safety?

YES

NO

7. PRIOR UTILITY CONTACT

Answer the following question only if you are a residential customer and your complaint is against an electric distribution utility, natural gas distribution utility or a water distribution utility.

Have you spoken to a utility company representative about this complaint?

YES

(includes appeals of BCS determinations)

NO

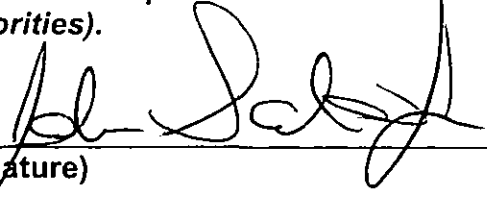
If you tried to, but could not speak to a utility company representative about your complaint, please explain why.

8. VERIFICATION AND SIGNATURE

You must print or type your name below on the line provided for the verification paragraph, and you must sign and date (in ink) this form on the lines provided.

Verification:

I JOHN SABAT JR, hereby state that the facts above set forth are true and correct (or are true and correct to the best of my knowledge, information and belief) and that I expect to be able to prove the same at a hearing held in this matter. I understand that the statements herein are made subject to the penalties of 18 Pa. C.S. § 4904 (relating to unsworn falsification to authorities).


(Signature)

7-12-06
(Date)

9. LEGAL REPRESENTATION (IF ANY)

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

Lawyer's Name _____

Street _____

City _____ State _____ Zip _____

Area Code/Phone Number _____

10. FILING

Please return the completed form to one of the addresses listed below:

If using U.S. Postal Service:

If using overnight delivery service:

| | |
|--|--|
| Secretary Pennsylvania Public Utility Commission P.O. Box 3265 Harrisburg, PA 17105 | Secretary Pennsylvania Public Utility Commission 400 North Street Commonwealth Keystone Building, 2 nd Floor Harrisburg, Pennsylvania 17120 |
|--|--|

Facsimiles and/or electronic filings of the complaint form will not be accepted.

If you have any questions about filling out this form, please contact the Secretary's Bureau at 717-772-7777.

Keep a copy of your complaint for your records.

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

JULY 17, 2006

JOHN H ISOM
POST & SCHELL
17 NORTH SECOND STREET 12TH FLOOR
HARRISBURG PA 17101-1601

DOCUMENT
FOLDER

RE: PA PUC vs NATIONAL FUEL GAS DIST
Docket Number R-00061493C0023

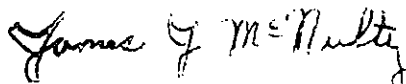
Dear Sir/Madam:

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

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

ddi

DOCKETED
JUL 31 2006

ORIGINAL

PENNSYLVANIA PUBLIC UTILITY COMMISSION

Formal Complaint Form

RECEIVED
2005 JUL 17 AM 9:28
SECRETARY OF REVENUE

Please print or type.

R-00061493C0024

1. CUSTOMER NAME (COMPLAINANT)

Your name, mailing address, county, telephone number, utility account number and service address:

Name RALPH E PETERSON

Street/P.O. Box 698 KINZUA RD Apt # _____

City WARREN State PA Zip 16365

County WARREN

Area Code/HOME Phone (814) 726-0541

Area Code/WORK Phone RETIRED

Utility Account Number 322 4361-08
(from your bill) METER LOCATION # 0209108-09 (02 BRSS26 1400)

DOCUMENT
FOLDER

If your complaint involves utility service provided to a different address than your mailing address, please list this information below.

Name _____

Street/P.O. Box _____

City _____ State _____ Zip _____

2. UTILITY NAME (RESPONDENT)

Name of utility company your complaint concerns: NATIONAL FUEL

3. TYPE OF UTILITY (check one)

ELECTRIC

STEAM HEAT

GAS

WASTE WATER

WATER

MOTOR CARRIER
(taxi, moving company, limousine)

TELEPHONE
(local, long distance)

PO Box 2081
ERIE PA 16512-9888

DOCKETED
JUL 31 2006

4. COMPLAINT (check one)

A. In general, what is your complaint?

- I want to oppose the company's proposed rate increase.
- There are incorrect charges on my bill.
- There is a reliability, safety or quality problem with my utility service.
- I received a notice that my utility service is being terminated.
- I would like a payment agreement.
- Other.
(explain)

B. State the facts of your complaint.

Include any specific dates, times or places that are important. If the complaint is about a bill, tell us about any charges that you believe are not correct. Use additional paper if you need more space. Provide copies of all relevant documents you believe will support your complaint.

5. RELIEF

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

I would like to see the P.U.C hold the greedy gas company accountable! They preach conserve, conserve! When we do, they want a bill passed so they can charge us for nothing! I wished I owned a company that could charge my customers for nothing. when in reality they are already

*Raising us. Thank you for hearing my Complaint
Laksh C. Peterson*

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

JULY 17, 2006

JOHN H ISOM
POST & SCHELL
17 NORTH SECOND STREET 12TH FLOOR
HARRISBURG PA 17101-1601

DOCUMENT
FOLDER

RE: PA PUC vs NATIONAL FUEL GAS DIST
Docket Number R-00061493C0024

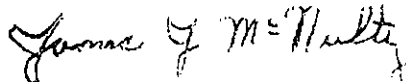
Dear Sir/Madam:

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

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

ddi

DOCKETED
JUL 31 2006

ORIGINAL

PENNSYLVANIA PUBLIC UTILITY COMMISSION

Formal Complaint Form

RECEIVED
2006 JUL 17 AM 9:05
SECRETARY'S BUREAU

Please print or type.

R-00061493C0025

1. CUSTOMER NAME (COMPLAINANT)

Your name, mailing address, county, telephone number, utility account number and service address:

Name THEODORE E. & JILL D. DORRION

Street/P.O. Box 105 Apt # _____

City TIONA State PA Zip 16352-0105

County WARREN

Area Code/HOME Phone (814) 723-9589

Area Code/WORK Phone N/A

Utility Account Number 3258784-08
(from your bill)

DOCUMENT
FOLDER

If your complaint involves utility service provided to a different address than your mailing address, please list this information below.

Name THEODORE E. & JILL D. DORRION

Street/P.O. Box 7 HANLEY ST. (SERVICE ADDRESS)

City TIONA State PA Zip 16352-0105

2. UTILITY NAME (RESPONDENT)

Name of utility company your complaint concerns: NATIONAL FUEL

3. TYPE OF UTILITY (check one)

ELECTRIC

STEAM HEAT

GAS

WASTE WATER

WATER

MOTOR CARRIER

(taxi, moving company, limousine)

TELEPHONE

(local, long distance)

DOCKETED
JUL 31 2006

4. COMPLAINT (check one)

A. In general, what is your complaint?

I want to oppose the company's proposed rate increase.

There are incorrect charges on my bill.

There is a reliability, safety or quality problem with my utility service.

I received a notice that my utility service is being terminated.

I would like a payment agreement.

Other.
(explain)

B. State the facts of your complaint.

Include any specific dates, times or places that are important. If the complaint is about a bill, tell us about any charges that you believe are not correct. Use additional paper if you need more space. Provide copies of all relevant documents you believe will support your complaint.

WE ARE OPPOSED TO RATE INCREASE & SURCHARGE. RATES WERE INCREASED LAST YEAR AT A VERY HIGH RATE, AND WE WERE ASKED TO CONSERVE. AFTER LOWERING OUR THERMOSTAT & INVESTING SEVERAL THOUSAND DOLLARS IN ALTERNATIVE HEAT, NATIONAL FUEL NOW WANTS TO PENALIZE US FOR OUR CONSERVATION. COMPLAINT - Supplement No. 61 to tariff gas - PA P.U.C. No. 4 filed by National Fuel Gas Distribution Corporation (NFGD) on 5/31/06 to become effective 7/30/06 would increase NFGD's annual revenues by approximately \$25,892,000 per year.

5. RELIEF

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

DENY THIS INCREASE AND SURCHARGE!

Hold evening hearing in Warren, PA.

6. PROTECTION FROM ABUSE

Answer the following question if your complaint is against a natural gas distribution company, an electric distribution company or a water company AND your complaint is about a billing problem, an application for service problem, a termination of service problem or a request for a payment agreement.

Has a court granted a "Protection from Abuse" order for your personal safety?

YES

NO

7. PRIOR UTILITY CONTACT

Answer the following question only if you are a residential customer and your complaint is against an electric distribution utility, natural gas distribution utility or a water distribution utility.

Have you spoken to a utility company representative about this complaint?

YES
(includes appeals of BCS determinations)

NO

If you tried to, but could not speak to a utility company representative about your complaint, please explain why.

8. VERIFICATION AND SIGNATURE

You must print or type your name below on the line provided for the verification paragraph, and you must sign and date (in ink) this form on the lines provided.

Verification:

I THEODORE E. DORRION / JILL D. DORRION, hereby state that the facts above set forth are true and correct (or are true and correct to the best of my knowledge, information and belief) and that I expect to be able to prove the same at a hearing held in this matter. I understand that the statements herein are made subject to the penalties of 18 Pa. C.S. § 4904 (relating to unsworn falsification to authorities).

Theodore E. Dorrien
Jill D. Dorrien

(Signature)

7-13-06
(Date)

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

JULY 17, 2006

JOHN H ISOM
POST & SCHELL
17 NORTH SECOND STREET 12TH FLOOR
HARRISBURG PA 17101-1601

DOCUMENT
FOLDER

RE: PA PUC vs NATIONAL FUEL GAS DIST
Docket Number R-00061493C0025

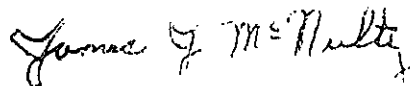
Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by THEODORE E & JILL D DORRION.

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

ddi

DOCKETED
JUL 31 2006

PENNSYLVANIA PUBLIC UTILITY COMMISSION

Formal Complaint Form

ORIGINAL

Please print or type.

R-00061493C0026

1. CUSTOMER NAME (COMPLAINANT)

Your name, mailing address, county, telephone number, utility account number and service address:

Name HOWARD STEWART

Street/P.O. Box 10287 KRIDER RD Apt #

City MEADVILLE State PA Zip 16335

County CRAWFORD

Area Code/HOME Phone 814-724 6161

Area Code/WORK Phone RETIRED

Utility Account Number 3103092-11 (from your bill)

RECEIVED
2006 JUL 18 AM 9:23
SECRETARY'S BUREAU

If your complaint involves utility service provided to a different address than your mailing address, please list this information below.

Name

Street/P.O. Box

City State Zip

DOCUMENT FOLDER

2. UTILITY NAME (RESPONDENT)

Name of utility company your complaint concerns: NATIONAL FUEL GAS

3. TYPE OF UTILITY (check one)

ELECTRIC

STEAM HEAT

GAS

WASTE WATER

WATER

MOTOR CARRIER

(taxi, moving company, limousine)

TELEPHONE (local, long distance)

DOCKETED JUL 3 1 2006

4. COMPLAINT (check one)

A. In general, what is your complaint?

- I want to oppose the company's proposed rate increase. & SURCHARGE
- There are incorrect charges on my bill.
- There is a reliability, safety or quality problem with my utility service.
- I received a notice that my utility service is being terminated.
- I would like a payment agreement.
- Other.
(explain)

B. State the facts of your complaint.

Include any specific dates, times or places that are important. If the complaint is about a bill, tell us about any charges that you believe are not correct. Use additional paper if you need more space. Provide copies of all relevant documents you believe will support your complaint.

WE ARE TOLD TO CONSERVE, INSULATE YOUR HOME TO SAVE ENERGY, NOW THE GAS COMPANY WANTS TO CHARGE YOU FOR NOT USEING ENOUGH GAS. THIS DOES NOT MAKE ANY SENSE AT ALL.

THEY ALREADY HAVE A CUSTOMER CHARGE, IT DOESN'T SAY WHAT THAT IS FOR. (\$12.00) AND A DELICERY CHARGE, THEY HAVE NOT TOUCHED OUR LINE IN 12 YEARS. I STRONGLY OBJECT TO ANY INCREASE.

WE HAVE NOT GOT AN INCREASE IN OUR PENSION IN TEN YEARS.

5. RELIEF REJECT THE PREPOSAL

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

6. PROTECTION FROM ABUSE

Answer the following question if your complaint is against a natural gas distribution company, an electric distribution company or a water company **AND** your complaint is about a billing problem, an application for service problem, a termination of service problem or a request for a payment agreement.

Has a court granted a "Protection from Abuse" order for your personal safety?

YES

NO

7. PRIOR UTILITY CONTACT

Answer the following question only if you are a residential customer and your complaint is against an electric distribution utility, natural gas distribution utility or a water distribution utility.

Have you spoken to a utility company representative about this complaint?

YES

(includes appeals of BCS determinations)

NO

If you tried to, but could not speak to a utility company representative about your complaint, please explain why.

8. VERIFICATION AND SIGNATURE

You must print or type your name below on the line provided for the verification paragraph, and you must sign and date (in ink) this form on the lines provided.

Verification:

I _____, hereby state that the facts above set forth are true and correct (or are true and correct to the best of my knowledge, information and belief) and that I expect to be able to prove the same at a hearing held in this matter. I understand that the statements herein are made subject to the penalties of 18 Pa. C.S. § 4904 (relating to unsworn falsification to authorities).

Howard Stewart
(Signature)

7-12-06
(Date)

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

JULY 18, 2006

JOHN H ISOM
POST & SCHELL
17 NORTH SECOND STREET 12TH FLOOR
HARRISBURG PA 17101-1601

DOCUMENT
FOLDER

RE: PA PUC vs National Fuel Gas
Docket Number R-00061493C0026

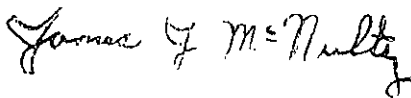
Dear Sir/Madam:

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

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

ddi

DOCKETED
JUL 31 2006

ORIGINAL

PENNSYLVANIA PUBLIC UTILITY COMMISSION

Formal Complaint Form

RECEIVED

JUL 14 2006

Please print or type.

R-00061493C0027

PA PUBLIC UTILITY COMMISSION
SECRETARY'S BUREAU

1. CUSTOMER NAME (COMPLAINANT)

Your name, mailing address, county, telephone number, utility account number and service address:

Name Raymond A. Wesolowski

Street/P.O. Box 345 Shorehaven Dr Apt #

City ERIE State Pa. Zip 16505

County ERIE

Area Code/HOME Phone 814-838-7288

Area Code/WORK Phone _____

Utility Account Number 3367728-10
(from your bill)

DOCUMENT
FOLDER

If your complaint involves utility service provided to a different address than your mailing address, please list this information below.

Name _____

Street/P.O. Box _____

City _____ State _____ Zip _____

2. UTILITY NAME (RESPONDENT)

Name of utility company your complaint concerns: National Fuel Gas Dist. Corp.

3. TYPE OF UTILITY (check one)

ELECTRIC

STEAM HEAT

GAS

WASTE WATER

WATER

MOTOR CARRIER
(taxi, moving company, limousine)

TELEPHONE
(local, long distance)

DOCKETED
JUL 31 2006

4. COMPLAINT (check one)

A. In general, what is your complaint?

- I want to oppose the company's proposed rate increase.
- There are incorrect charges on my bill.
- There is a reliability, safety or quality problem with my utility service.
- I received a notice that my utility service is being terminated.
- I would like a payment agreement.
- Other.
(explain)

B. State the facts of your complaint.

Include any specific dates, times or places that are important. If the complaint is about a bill, tell us about any charges that you believe are not correct. Use additional paper if you need more space. Provide copies of all relevant documents you believe will support your complaint.

This complaint is for the increase in price of home heating gas. The answer 2003 and before was condense and freeze to keep my heating bill down - Now we are told we will pay more because we took N.F.D. advice and condense!

5. RELIEF

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

P.U.C. - What a joke. A while back ^{July 1997} we went after the greed in the gas co. We proofed it and a credit for it remembers correctly was 14.00 per gas user (one time credit) - Guess what! The people never got it. So! what good is the P.U.C.! Nationalize the utilities and give the gas ⁵ co. back to the stock holders.

6. PROTECTION FROM ABUSE

Answer the following question if your complaint is against a natural gas distribution company, an electric distribution company or a water company AND your complaint is about a billing problem, an application for service problem, a termination of service problem or a request for a payment agreement.

Has a court granted a "Protection from Abuse" order for your personal safety?

YES

NO

7. PRIOR UTILITY CONTACT

Answer the following question only if you are a residential customer and your complaint is against an electric distribution utility, natural gas distribution utility or a water distribution utility.

Have you spoken to a utility company representative about this complaint?

YES
(includes appeals of BCS determinations)

NO

If you tried to, but could not speak to a utility company representative about your complaint, please explain why.

8. VERIFICATION AND SIGNATURE

You must print or type your name below on the line provided for the verification paragraph, and you must sign and date (in ink) this form on the lines provided.

Verification: Raymond A. Wesołowski, hereby state that the facts above set forth are true and correct (or are true and correct to the best of my knowledge, information and belief) and that I expect to be able to prove the same at a hearing held in this matter. I understand that the statements herein are made subject to the penalties of 18 Pa. C.S. § 4904 (relating to unsworn falsification to authorities).

Raymond A. Wesołowski
(Signature)

7-14-06
(Date)

9. LEGAL REPRESENTATION (IF ANY)

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

Lawyer's Name _____

Street _____

City _____ State _____ Zip _____

Area Code/Phone Number _____

10. FILING

Please return the completed form to one of the addresses listed below:

If using U.S. Postal Service:

If using overnight delivery service:

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

| |
|--|
| Secretary Pennsylvania Public Utility Commission 400 North Street Commonwealth Keystone Building, 2 nd Floor Harrisburg, Pennsylvania 17120 |
|--|

Facsimiles and/or electronic filings of the complaint form will not be accepted.

If you have any questions about filling out this form, please contact the Secretary's Bureau at 717-772-7777.

Keep a copy of your complaint for your records.

Sutis 7-14-06

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

JULY 18, 2006

JOHN H ISOM
POST & SCHELL
17 NORTH SECOND STREET 12TH FLOOR
HARRISBURG PA 17101-1601

DOCUMENT
FOLDER

RE: PA PUC vs National Fuel Gas
Docket Number R-00061493C0027

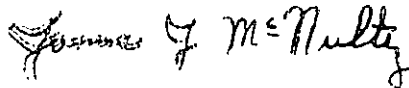
Dear Sir/Madam:

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

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

ddi

DOCKETED
JUL 31 2006

ORIGINAL

PENNSYLVANIA PUBLIC UTILITY COMMISSION

Formal Complaint Form

Please print or type.

R-00061493 C0028

1. CUSTOMER NAME (COMPLAINANT)

Your name, mailing address, county, telephone number, utility account number and service address:

Name Mike + Michelle Sirota

Street/P.O. Box 3345 Alpine Dr. Apt #

City Erie State PA Zip 16506

County Erie

Area Code/HOME Phone 814-835-7706

Area Code/WORK Phone 814-397-9687

Utility Account Number 5568167-11
(from your bill)

**DOCUMENT
FOLDER**

If your complaint involves utility service provided to a different address than your mailing address, please list this information below.

Name

Street/F.O. Box

City State Zip

DOCKETED
JUL 31 2006

2. UTILITY NAME (RESPONDENT)

Name of utility company your complaint concerns: "NFG"

3. TYPE OF UTILITY (check one)

ELECTRIC

STEAM HEAT

GAS

WASTE WATER

WATER

MOTOR CARRIER

(taxi, moving company, limousine)

TELEPHONE
(local, long distance)

RECEIVED
2006 JUL 14 AM 9:16
SECRETARY'S BUREAU

Handwritten initials

4. COMPLAINT (check one)

A. In general, what is your complaint?

- I want to oppose the company's proposed rate increase.
- There are incorrect charges on my bill.
- There is a reliability, safety or quality problem with my utility service.
- I received a notice that my utility service is being terminated.
- I would like a payment agreement.
- Other.
(explain)

B. State the facts of your complaint.

Include any specific dates, times or places that are important. If the complaint is about a bill, tell us about any charges that you believe are not correct. Use additional paper if you need more space. Provide copies of all relevant documents you believe will support your complaint.

It is outrageous that NFG wants to charge a surcharge on your bill if you conserve gas, and use less! Why in the world should we have to pay for them overspending. They should be made to live like ~~the~~ rest of us. Within our means!

5. RELIEF

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

Not let them continue to RIP-OFF the customers!

6. PROTECTION FROM ABUSE

Answer the following question if your complaint is against a natural gas distribution company, an electric distribution company or a water company AND your complaint is about a billing problem, an application for service problem, a termination of service problem or a request for a payment agreement.

Has a court granted a "Protection from Abuse" order for your personal safety?

YES

NO

7. PRIOR UTILITY CONTACT

Answer the following question only if you are a residential customer and your complaint is against an electric distribution utility; natural gas distribution utility or a water distribution utility.

Have you spoken to a utility company representative about this complaint?

YES
(includes appeals of BCS determinations)

NO

If you tried to, but could not speak to a utility company representative about your complaint, please explain why.

8. VERIFICATION AND SIGNATURE

You must print or type your name below on the line provided for the verification paragraph, and you must sign and date (in ink) this form on the lines provided.

Verification:

I Mike & Michelle Sirota, hereby state that the facts above set forth are true and correct (or are true and correct to the best of my knowledge, information and belief) and that I expect to be able to prove the same at a hearing held in this matter. I understand that the statements herein are made subject to the penalties of 18 Pa. C.S. § 4904 (relating to unsworn falsification to authorities).

Michelle Sirota
(Signature)

[Handwritten signature]

7/12/06
(Date)

[Handwritten date]

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

JULY 21, 2006

JOHN H. ISOM
POST & SCHELL
17 NORTH SECOND STREET
12TH FLOOR
HARRISBURG PA 17101-1601

DOCUMENT
FOLDER

RE: PA PUC vs. NATIONAL FUEL GAS DISTRIBUTION CORPORATION
Docket Number R-00061493C0028

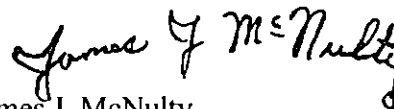
Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by MIKE & MICHELLE SIROTA.

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

jih

DOCKETED
JUL 31 2006

ORIGINAL

PENNSYLVANIA PUBLIC UTILITY COMMISSION

Formal Complaint Form

RECEIVED
2005 JUL 14 AM 9:31
SECRETARY'S BUREAU

Please print or type.

R-0006149300029

1. CUSTOMER NAME (COMPLAINANT)

Your name, mailing address, county, telephone number, utility account number and service address:

Name Bonnie Benzie

Street/P.O. Box RD #1 Box 109 Apt # _____

City Tidioute State PA Zip 16351

County Warren

Area Code/HOME Phone 814-484-3230

Area Code/WORK Phone _____

Utility Account Number 3515346-06
(from your bill)

DOCUMENT
FOLDER

If your complaint involves utility service provided to a different address than your mailing address, please list this information below.

Name _____

Street/P.O. Box _____

City _____ State _____ Zip _____

2. UTILITY NAME (RESPONDENT)

Name of utility company your complaint concerns: NATIONAL fuel

3. TYPE OF UTILITY (check one)

- ELECTRIC
- GAS
- WATER
- TELEPHONE
(local, long distance)
- STEAM HEAT
- WASTE WATER
- MOTOR CARRIER
(taxi, moving company, limousine)

DOCKETED
JUL 31 2006

13

4. COMPLAINT (check one)

A. In general, what is your complaint?

- I want to oppose the company's proposed rate increase.
- There are incorrect charges on my bill.
- There is a reliability, safety or quality problem with my utility service.
- I received a notice that my utility service is being terminated.
- I would like a payment agreement.
- Other.
(explain)

B. State the facts of your complaint.

Include any specific dates, times or places that are important. If the complaint is about a bill, tell us about any charges that you believe are not correct. Use additional paper if you need more space. Provide copies of all relevant documents you believe will support your complaint.

5. RELIEF

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

6. PROTECTION FROM ABUSE

Answer the following question if your complaint is against a natural gas distribution company, an electric distribution company or a water company **AND** your complaint is about a billing problem, an application for service problem, a termination of service problem or a request for a payment agreement.

Has a court granted a "Protection from Abuse" order for your personal safety?

YES

NO

7. PRIOR UTILITY CONTACT

Answer the following question only if you are a residential customer and your complaint is against an electric distribution utility, natural gas distribution utility or a water distribution utility.

Have you spoken to a utility company representative about this complaint?

YES

(includes appeals of BCS determinations)

NO

If you tried to, but could not speak to a utility company representative about your complaint, please explain why.

8. VERIFICATION AND SIGNATURE

You must print or type your name below on the line provided for the verification paragraph, and you must sign and date (in ink) this form on the lines provided.

Verification: I Bonnie Benzie, hereby state that the facts above set forth are true and correct (or are true and correct to the best of my knowledge, information and belief) and that I expect to be able to prove the same at a hearing held in this matter. I understand that the statements herein are made subject to the penalties of 18 Pa. C.S. § 4904 (relating to unsworn falsification to authorities).

Bonnie Benzie (Signature) 7-5-06 (Date)

9. LEGAL REPRESENTATION (IF ANY)

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

Lawyer's Name _____

Street _____

City _____ State _____ Zip _____

Area Code/Phone Number _____

10. FILING

Please return the completed form to one of the addresses listed below:

If using U.S. Postal Service:

If using overnight delivery service:

| | |
|--|--|
| Secretary Pennsylvania Public Utility Commission P.O. Box 3265 Harrisburg, PA 17105 | Secretary Pennsylvania Public Utility Commission 400 North Street Commonwealth Keystone Building, 2 nd Floor Harrisburg, Pennsylvania 17120 |
|--|--|

Facsimiles and/or electronic filings of the complaint form will not be accepted.

If you have any questions about filling out this form, please contact the Secretary's Bureau at 717-772-7777.

Keep a copy of your complaint for your records.

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

JULY 21, 2006

JOHN H. ISOM
POST & SCHELL
17 NORTH SECOND STREET
12TH FLOOR
HARRISBURG PA 17101-1601

DOCUMENT
FOLDER

RE: PA PUC vs. NATIONAL FUEL GAS DISTRIBUTION CORPORATION
Docket Number R-00061493C0029

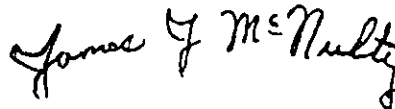
Dear Sir/Madam:

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

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

jih

DOCKETED
JUL 31 2006

PENNSYLVANIA PUBLIC UTILITY COMMISSION

Formal Complaint Form

R-00061493C0030

Please print or type.

1. CUSTOMER NAME (COMPLAINANT)

Your name, mailing address, county, telephone number, utility account number and service address:

Name PATRICIA MOWERY

Street/P.O. Box 4493 STEGER RD Apt #

City ERIE State PA Zip 16510

County ERIE

Area Code/HOME Phone 814-825-7767

Area Code/WORK Phone 814-8777078

Utility Account Number 3484091-05 (from your bill)

ORIGINAL

DOCUMENT FOLDER

If your complaint involves utility service provided to a different address than your mailing address, please list this information below.

Name

Street/P.O. Box

City State Zip

2. UTILITY NAME (RESPONDENT)

Name of utility company your complaint concerns: NATIONAL FUEL GAS

3. TYPE OF UTILITY (check one)

ELECTRIC

STEAM HEAT

X GAS

WASTE WATER

WATER

MOTOR CARRIER (taxi, moving company, limousine)

TELEPHONE (local, long distance)

Deleted: 0

DOCKETED JUL 31 2006

RECEIVED 2006 JUL 14 AM 9:10 SECRETARY'S BUREAU

Handwritten initials/signature

4. **COMPLAINT** (check one)

A. **In general, what is your complaint?**

I want to oppose the company's proposed rate increase.

Deleted: □

- There are incorrect charges on my bill.
- There is a reliability, safety or quality problem with my utility service.
- I received a notice that my utility service is being terminated.
- I would like a payment agreement.

Other. I WANT TO OPPOSE THE MONTHLY SURCHARGE
(explain)

B. **State the facts of your complaint.**

Include any specific dates, times or places that are important. If the complaint is about a bill, tell us about any charges that you believe are not correct. Use additional paper if you need more space. Provide copies of all relevant documents you believe will support your complaint.

NO SURCHARGE FOR CONSERVING!!!!!! THIS SHOULD BE DENIED!!!!!!

LISTEN TO YOUR PENNSYLVANIA CONSUMERS/CUSTOMERS

5. **RELIEF**

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

DENY NATIONAL FUEL GAS REQUEST FOR SURCHARGE!!!

6. PROTECTION FROM ABUSE

Answer the following question if your complaint is against a natural gas distribution company, an electric distribution company or a water company AND your complaint is about a billing problem, an application for service problem, a termination of service problem or a request for a payment agreement.

Has a court granted a "Protection from Abuse" order for your personal safety?

YES

NO

7. PRIOR UTILITY CONTACT

Answer the following question only if you are a residential customer and your complaint is against an electric distribution utility, natural gas distribution utility or a water distribution utility.

Have you spoken to a utility company representative about this complaint?

YES
(includes appeals of BCS determinations)

NO

If you tried to, but could not speak to a utility company representative about your complaint, please explain why.

8. VERIFICATION AND SIGNATURE

You must print or type your name below on the line provided for the verification paragraph, and you must sign and date (in ink) this form on the lines provided.

Verification:
I PATRICIA A. MOWERY, hereby state that the facts above set forth are true and correct (or are true and correct to the best of my knowledge, information and belief) and that I expect to be able to prove the same at a hearing held in this matter. I understand that the statements herein are made subject to the penalties of 18 Pa. C.S. § 4904 (relating to unsworn falsification to authorities).

Patricia G. Mowery 7/3/06
(Signature) (Date)

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

JULY 21, 2006

JOHN H. ISOM
POST & SCHELL
17 NORTH SECOND STREET
12TH FLOOR
HARRISBURG PA 17101-1601

DOCUMENT
FOLDER

RE: PA PUC vs. NATIONAL FUEL GAS DISTRIBUTION CORPORATION
Docket Number R-00061493C0030

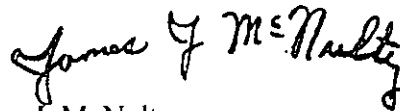
Dear Sir/Madam:

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

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

jih

DOCKETED
JUL 31 2006

ORIGINAL

PENNSYLVANIA PUBLIC UTILITY COMMISSION

Formal Complaint Form

RECEIVED
2005 JUL 20 AM 9:02
SECRETARY'S BUREAU

Please print or type. R-00061493C0031

1. CUSTOMER NAME (COMPLAINANT)

Your name, mailing address, county, telephone number, utility account number and service address:

Name Maxine R. Young

Street/P.O. Box 309 EAST MAIN ST. Apt # _____

City Youngsville State PA Zip 16371

County WARREN

Area Code/HOME Phone 814 563-7641

Area Code/WORK Phone —

Utility Account Number _____
(from your bill)

DOCUMENT
FOLDER

If your complaint involves utility service provided to a different address than your mailing address, please list this information below.

Name _____

Street/P.O. Box _____

City _____ State _____ Zip _____

2. UTILITY NAME (RESPONDENT)

Name of utility company your complaint concerns: National Fuel Gas Dist. Corp.

3. TYPE OF UTILITY (check one)

ELECTRIC

STEAM HEAT

GAS

WASTE WATER

WATER

MOTOR CARRIER

(taxi, moving company, limousine)

TELEPHONE
(local, long distance)

DOCKETED
JUL 31 2006

4. **COMPLAINT** (check one)

A. **In general, what is your complaint?**

- I want to oppose the company's proposed rate increase.
- There are incorrect charges on my bill.
- There is a reliability, safety or quality problem with my utility service.
- I received a notice that my utility service is being terminated.
- I would like a payment agreement.
- Other.
(explain)

B. **State the facts of your complaint.**

Include any specific dates, times or places that are important. If the complaint is about a bill, tell us about any charges that you believe are not correct. Use additional paper if you need more space. Provide copies of all relevant documents you believe will support your complaint.

*Supplement No. 61 to Tariff Gas - PA PUC.
No 9 filed by National Fuel Gas Distribution Corporat.
(NFGD) on May 31, 2006, and proposed to become
effective July 30, 2006. Would increase NFGD's
annual revenues by approximately \$25,892,000 p/yr.*

5. **RELIEF**

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

*PUC must suspend, investigate, & deny
proposed tariffs. A public hearing should
be held in Warren PA*

PROTECTION FROM ABUSE

Answer the following question if your complaint is against a natural gas distribution company, an electric distribution company or a water company **AND** your complaint is about a billing problem, an application for service problem, a termination of service problem or a request for a payment agreement.

Has a court granted a "Protection from Abuse" order for your personal safety?

YES

NO

7. PRIOR UTILITY CONTACT

Answer the following question only if you are a residential customer and your complaint is against an electric distribution utility, natural gas distribution utility or a water distribution utility.

Have you spoken to a utility company representative about this complaint?

YES

(includes appeals of BCS determinations)

NO

If you tried to, but could not speak to a utility company representative about your complaint, please explain why.

8. VERIFICATION AND SIGNATURE

You must print or type your name below on the line provided for the verification paragraph, and you must sign and date (in ink) this form on the lines provided.

Verification: I MAXINE B. YOUNG, hereby state that the facts above set forth are true and correct (or are true and correct to the best of my knowledge, information and belief) and that I expect to be able to prove the same at a hearing held in this matter. I understand that the statements herein are made subject to the penalties of 18 Pa. C.S. § 4904 (relating to unsworn falsification to authorities).

Maxine B. Young
(Signature)

07-16-06
(Date)

9. LEGAL REPRESENTATION (IF ANY)

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

Lawyer's Name _____

Street _____

City _____ State _____ Zip _____

Area Code/Phone Number _____

10. FILING

Please return the completed form to one of the addresses listed below:

If using U.S. Postal Service:

If using overnight delivery service:

| | |
|--|--|
| Secretary Pennsylvania Public Utility Commission P.O. Box 3265 Harrisburg, PA 17105 | Secretary Pennsylvania Public Utility Commission 400 North Street Commonwealth Keystone Building, 2 nd Floor Harrisburg, Pennsylvania 17120 |
|--|--|

Facsimiles and/or electronic filings of the complaint form will not be accepted.

If you have any questions about filling out this form, please contact the Secretary's Bureau at 717-772-7777.

Keep a copy of your complaint for your records.

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

JULY 21, 2006

JOHN H. ISOM
POST & SCHELL
17 NORTH SECOND STREET
12TH FLOOR
HARRISBURG PA 17101-1601

DOCUMENT
FOLDER

RE: PA PUC vs. NATIONAL FUEL GAS DISTRIBUTION CORPORATION
Docket Number R-00061493C0031

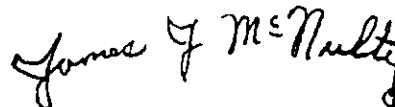
Dear Sir/Madam:

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

jih

DOCKETED
JUL 31 2006

ORIGINAL

PENNSYLVANIA PUBLIC UTILITY COMMISSION

Formal Complaint Form

R-00061493C0032

Please print or type.

1. CUSTOMER NAME (COMPLAINANT)

Your name, mailing address, county, telephone number, utility account number and service address:

Name Debra S Norcross

Street/P.O. Box 406 Wiley Ave Apt # _____

City Franklin State PA Zip 16323

County Venango

Area Code/HOME Phone (814) 432-7915

Area Code/WORK Phone _____

X Utility Account Number 35 487 48 -08
(from your bill)

DOCUMENT FOLDER

If your complaint involves utility service provided to a different address than your mailing address, please list this information below.

Name _____

Street/P.O. Box _____

City _____ State _____ Zip _____

DOCKETED
JUL 31 2006

2. UTILITY NAME (RESPONDENT)

Name of utility company your complaint concerns: National Fuel

3. TYPE OF UTILITY (check one)

ELECTRIC

STEAM HEAT

GAS

WASTE WATER

WATER

MOTOR CARRIER

(taxi, moving company, limousine)

TELEPHONE
(local, long distance)

RECEIVED
2006 JUL 20 AM 8:55
SECRETARY'S OFFICE

4. **COMPLAINT** (check one)

A. **In general, what is your complaint?**

- I want to oppose the company's proposed rate increase.
- There are incorrect charges on my bill.
- There is a reliability, safety or quality problem with my utility service.
- I received a notice that my utility service is being terminated.
- I would like a payment agreement.
- Other.
(explain)

B. **State the facts of your complaint.**

Include any specific dates, times or places that are important. If the complaint is about a bill, tell us about any charges that you believe are not correct. Use additional paper if you need more space. Provide copies of all relevant documents you believe will support your complaint.

Went on Budget Plan approx. 8 to 9 years ago, due to not being able to pay a 1 month bill in winter of over \$300 w/ my monthly payment has gone from around \$4 a month up to \$284 a month, in the last year.

5. **RELIEF**

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

Do Not grant any rate increase.
It's my understanding they want the increase to offset us not using as much gas because we can't afford it and they want to bring it back up for us not using as much. Outrageous

6. PROTECTION FROM ABUSE

Answer the following question if your complaint is against a natural gas distribution company, an electric distribution company or a water company **AND** your complaint is about a billing problem, an application for service problem, a termination of service problem or a request for a payment agreement.

Has a court granted a "Protection from Abuse" order for your personal safety?

YES

NO

7. PRIOR UTILITY CONTACT

Answer the following question only if you are a residential customer and your complaint is against an electric distribution utility, natural gas distribution utility or a water distribution utility.

Have you spoken to a utility company representative about this complaint?

YES
(includes appeals of BCS determinations)

NO

If you tried to, but could not speak to a utility company representative about your complaint, please explain why.

8. VERIFICATION AND SIGNATURE

You must print or type your name below on the line provided for the verification paragraph, and you must sign and date (in ink) this form on the lines provided.

Verification:

I Debra S Norcross, hereby state that the facts above set forth are true and correct (or are true and correct to the best of my knowledge, information and belief) and that I expect to be able to prove the same at a hearing held in this matter. I understand that the statements herein are made subject to the penalties of 18 Pa. C.S. § 4904 (relating to unsworn falsification to authorities).

Debra S Norcross
(Signature)

7/10/06
(Date)

9. LEGAL REPRESENTATION (IF ANY)

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

Lawyer's Name _____

Street _____

City _____ State _____ Zip _____

Area Code/Phone Number _____

10. FILING

Please return the completed form to one of the addresses listed below:

If using U.S. Postal Service:

If using overnight delivery service:

X

| | |
|--|--|
| Secretary Pennsylvania Public Utility Commission P.O. Box 3265 Harrisburg, PA 17105 | Secretary Pennsylvania Public Utility Commission 400 North Street Commonwealth Keystone Building, 2 nd Floor Harrisburg, Pennsylvania 17120 |
|--|--|

Facsimiles and/or electronic filings of the complaint form will not be accepted.

If you have any questions about filling out this form, please contact the Secretary's Bureau at 717-772-7777.

Keep a copy of your complaint for your records.

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

JULY 21, 2006

JOHN H. ISOM
POST & SCHELL
17 NORTH SECOND STREET
12TH FLOOR
HARRISBURG PA 17101-1601

DOCUMENT
FOLDER

RE: PA PUC vs. NATIONAL FUEL GAS DISTRIBUTION CORPORATION
Docket Number R-00061493C0032

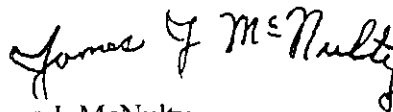
Dear Sir/Madam:

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

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

jih

DOCKETED
JUL 31 2006

ORIGINAL

PENNSYLVANIA PUBLIC UTILITY COMMISSION

Formal Complaint Form

RECEIVED
2005 JUL 20 AM 8:54
SECRETARY'S BUREAU

Please print or type.

R-00061493C0033

1. CUSTOMER NAME (COMPLAINANT)

Your name, mailing address, county, telephone number, utility account number and service address:

Name Florence C. Stewart

Street/P.O. Box 558 Crescent Pl Apt # _____

City Warren State PA Zip 16365

County Warren

Area Code/HOME Phone 814-723-4378

Area Code/WORK Phone retired

Utility Account Number 3297548-01
(from your bill)

DOCUMENT
FOLDER

If your complaint involves utility service provided to a different address than your mailing address, please list this information below.

Name _____

Street/P.O. Box _____

City _____ State _____ Zip _____

DOCKETED
JUL 21 2005

2. UTILITY NAME (RESPONDENT)

Name of utility company your complaint concerns: National Fuel

3. TYPE OF UTILITY (check one)

- | | |
|--|---|
| <input type="checkbox"/> ELECTRIC | <input type="checkbox"/> STEAM HEAT |
| <input checked="" type="checkbox"/> GAS | <input type="checkbox"/> WASTE WATER |
| <input type="checkbox"/> WATER | <input type="checkbox"/> MOTOR CARRIER (taxi, moving company, limousine) |
| <input type="checkbox"/> TELEPHONE (local, long distance) | |

12

4. **COMPLAINT** (check one)

A. In general, what is your complaint?

- I want to oppose the company's proposed rate increase.
- There are incorrect charges on my bill.
- There is a reliability, safety or quality problem with my utility service.
- I received a notice that my utility service is being terminated.
- I would like a payment agreement.
- Other.
(explain)

B. State the facts of your complaint.

Include any specific dates, times or places that are important. If the complaint is about a bill, tell us about any charges that you believe are not correct. Use additional paper if you need more space. Provide copies of all relevant documents you believe will support your complaint.

I do NOT Agree to the INCREASE IN GAS PRICES...
for gas we don't use. LAST YEAR they WANTED us
to conserve gas. This year they WANT us to PAY
for the gas we conserve. IT ISN'T right to CHARGE
the public for gas we don't use.

5. **RELIEF**

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

I WANT the Public Utility Commission to
deny the increase. People on fixed income
have a hard enough time paying for what
they use. We don't need to pay for what
we don't use.

6. PROTECTION FROM ABUSE

Answer the following question if your complaint is against a natural gas distribution company, an electric distribution company or a water company AND your complaint is about a billing problem, an application for service problem, a termination of service problem or a request for a payment agreement.

Has a court granted a "Protection from Abuse" order for your personal safety?

YES

NO

7. PRIOR UTILITY CONTACT

Answer the following question only if you are a residential customer and your complaint is against an electric distribution utility, natural gas distribution utility or a water distribution utility.

Have you spoken to a utility company representative about this complaint?

YES

(includes appeals of BCS determinations)

NO

If you tried to, but could not speak to a utility company representative about your complaint, please explain why.

8. VERIFICATION AND SIGNATURE

You must print or type your name below on the line provided for the verification paragraph, and you must sign and date (in ink) this form on the lines provided.

Verification:

I Florence C. Stewart, hereby state that the facts above set forth are true and correct (or are true and correct to the best of my knowledge, information and belief) and that I expect to be able to prove the same at a hearing held in this matter. I understand that the statements herein are made subject to the penalties of 18 Pa. C.S. § 4904 (relating to unsworn falsification to authorities).

Florence C. Stewart
(Signature)

July 18, 2006
(Date)

9. LEGAL REPRESENTATION (IF ANY)

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

Lawyer's Name _____

Street _____

City _____ State _____ Zip _____

Area Code/Phone Number _____

10. FILING

Please return the completed form to one of the addresses listed below:

If using U.S. Postal Service:

If using overnight delivery service:

| | |
|--|--|
| Secretary Pennsylvania Public Utility Commission P.O. Box 3265 Harrisburg, PA 17105 | Secretary Pennsylvania Public Utility Commission 400 North Street Commonwealth Keystone Building, 2 nd Floor Harrisburg, Pennsylvania 17120 |
|--|--|

Facsimiles and/or electronic filings of the complaint form will not be accepted.

If you have any questions about filling out this form, please contact the Secretary's Bureau at 717-772-7777.

Keep a copy of your complaint for your records.

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

JULY 21, 2006

JOHN H. ISOM
POST & SCHELL
17 NORTH SECOND STREET
12TH FLOOR
HARRISBURG PA 17101-1601

DOCUMENT
FOLDER

RE: PA PUC vs. NATIONAL FUEL GAS DISTRIBUTION CORPORATION
Docket Number R-00061493C0033

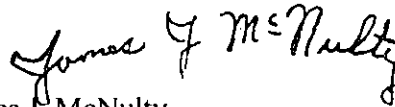
Dear Sir/Madam:

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

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

DOCKETED
JUL 31 2006

jih

ORIGINAL

PENNSYLVANIA PUBLIC UTILITY COMMISSION

Formal Complaint Form

RECEIVED
2006 JUL 19 AM 9:30
SECRETARY'S BUREAU

Please print or type. R-000614930034

1. CUSTOMER NAME (COMPLAINANT)

Your name, mailing address, county, telephone number, utility account number and service address:

Name Robert Armstrong

Street/P.O. Box RD #1 Box 197 Apt # _____

City Youngsville State Pa. Zip 16371-9637

County Warren

Area Code/HOME Phone 814-563-4269

Area Code/WORK Phone _____

Utility Account Number 3334273-03
(from your bill)

DOCUMENT
FOLDER

If your complaint involves utility service provided to a different address than your mailing address, please list this information below.

Name _____

Street/P.O. Box _____

City _____ State _____ Zip _____

2. UTILITY NAME (RESPONDENT)

Name of utility company your complaint concerns: UFGD

National Fuel
Gas Dist. Corp.

3. TYPE OF UTILITY (check one)

ELECTRIC

GAS

WATER

TELEPHONE
(local, long distance)

STEAM HEAT

WASTE WATER

MOTOR CARRIER
(taxi, moving company, limousine)

DOCKETED
JUL 31 2006

21

4. COMPLAINT (check one)

A. In general, what is your complaint?

- I want to oppose the company's proposed rate increase.
- There are incorrect charges on my bill.
- There is a reliability, safety or quality problem with my utility service.
- I received a notice that my utility service is being terminated.
- I would like a payment agreement.
- Other.
(explain)

B. State the facts of your complaint.

Include any specific dates, times or places that are important. If the complaint is about a bill, tell us about any charges that you believe are not correct. Use additional paper if you need more space. Provide copies of all relevant documents you believe will support your complaint. *Supplement No. 61 To Terriff Gas - P. U. C. 9 Filed By National Fuel Gas Distribution Corp. (NFGD) on May 31, 2006 and Proposed to Become Effective July 30, 2006 would increase NFGD's annual revenues by approximately \$25,895,000 per year.*

5. RELIEF

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

The P. U. C. should deny and investigate the proposed Terriff.

6. PROTECTION FROM ABUSE

Answer the following question if your complaint is against a natural gas distribution company, an electric distribution company or a water company **AND** your complaint is about a billing problem, an application for service problem, a termination of service problem or a request for a payment agreement.

Has a court granted a "Protection from Abuse" order for your personal safety?

YES

NO

7. PRIOR UTILITY CONTACT

Answer the following question only if you are a residential customer and your complaint is against an electric distribution utility, natural gas distribution utility or a water distribution utility.

Have you spoken to a utility company representative about this complaint?

YES

(includes appeals of BCS determinations)

NO

If you tried to, but could not speak to a utility company representative about your complaint, please explain why.

8. VERIFICATION AND SIGNATURE

You must print or type your name below on the line provided for the verification paragraph, and you must sign and date (in ink) this form on the lines provided.

Verification:

I Robert Armstrong, hereby state that the facts above set forth are true and correct (or are true and correct to the best of my knowledge, information and belief) and that I expect to be able to prove the same at a hearing held in this matter. I understand that the statements herein are made subject to the penalties of 18 Pa. C.S. § 4904 (relating to unsworn falsification to authorities).

Robert Armstrong
(Signature)

July 17, 2006
(Date)

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

JULY 21, 2006

JOHN H. ISOM
POST & SCHELL
17 NORTH SECOND STREET
12TH FLOOR
HARRISBURG PA 17101-1601

DOCUMENT
FOLDER

RE: PA PUC vs. NATIONAL FUEL GAS DISTRIBUTION CORPORATION
Docket Number R-00061493C0034

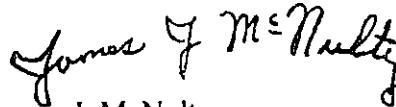
Dear Sir/Madam:

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

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

jih

DOCKETED
JUL 31 2006

ORIGINAL

PENNSYLVANIA PUBLIC UTILITY COMMISSION

Formal Complaint Form

Please print or type.

R-00061493 C0035

RECEIVED
2006 JUL 19 AM 9:11
SECRETARY'S OFFICE

1. CUSTOMER NAME (COMPLAINANT)

Your name, mailing address, county, telephone number, utility account number, and service address:

Name Linda Wiley

Street/P.O. Box Box 389 Star Rte Apt # _____

City Sheffield State PA Zip 16347

County Forest

Area Code/HOME Phone 814-968-4424

Area Code/WORK Phone _____

Utility Account Number 3736001-09
(from your bill)

DOCUMENT
FOLDER

If your complaint involves utility service provided to a different address than your mailing address, please list this information below.

Name _____

Street/P.O. Box _____

City _____ State _____ Zip _____

2. UTILITY NAME (RESPONDENT)

Name of utility company your complaint concerns: National Fuel Gas

3. TYPE OF UTILITY (check one)

- ELECTRIC
- GAS
- WATER
- TELEPHONE
(local, long distance)
- STEAM HEAT
- WASTE WATER
- MOTOR CARRIER
(taxi, moving company, limousine)

DOCKETED
JUL 31 2006

4. COMPLAINT (check one)

A. In general, what is your complaint?

- I want to oppose the company's proposed rate increase.
- There are incorrect charges on my bill.
- There is a reliability, safety or quality problem with my utility service.
- I received a notice that my utility service is being terminated.
- I would like a payment agreement.
- Other.
(explain)

B. State the facts of your complaint.

Include any specific dates, times or places that are important. If the complaint is about a bill, tell us about any charges that you believe are not correct. Use additional paper if you need more space. Provide copies of all relevant documents you believe will support your complaint.

I froze last winter trying to conserve gas and keep my costs down. Now NFG wants to have a surcharge for gas. I don't think they need this surcharge. With the high price of gas they get enough of our money.

5. RELIEF

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

Deny NFG their latest request for this surcharge.

6. PROTECTION FROM ABUSE

Answer the following question if your complaint is against a natural gas distribution company, an electric distribution company or a water company **AND** your complaint is about a billing problem, an application for service problem, a termination of service problem or a request for a payment agreement.

Has a court granted a "Protection from Abuse" order for your personal safety?

YES

NO

7. PRIOR UTILITY CONTACT

Answer the following question only if you are a residential customer and your complaint is against an electric distribution utility, natural gas distribution utility or a water distribution utility.

Have you spoken to a utility company representative about this complaint?

YES
(includes appeals of BCS determinations)

NO

If you tried to, but could not speak to a utility company representative about your complaint, please explain why.

8. VERIFICATION AND SIGNATURE

You must print or type your name below on the line provided for the verification paragraph, and you must sign and date (in ink) this form on the lines provided.

Verification: I Linda Hilyer, hereby state that the facts above set forth are true and correct (or are true and correct to the best of my knowledge, information and belief) and that I expect to be able to prove the same at a hearing held in this matter. I understand that the statements herein are made subject to the penalties of 18 Pa. C.S. § 4904 (relating to unsworn falsification to authorities).

Linda Hilyer
(Signature)

7/17/06
(Date)

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

JULY 21, 2006

JOHN H. ISOM
POST & SCHELL
17 NORTH SECOND STREET
12TH FLOOR
HARRISBURG PA 17101-1601

DOCUMENT
FOLDER

RE: PA PUC vs. NATIONAL FUEL GAS DISTRIBUTION CORPORATION
Docket Number R-00061493C0035

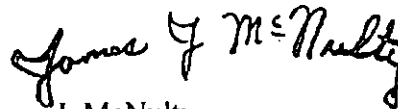
Dear Sir/Madam:

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

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

jih

DOCKETED
JUL 31 2006

PENNSYLVANIA PUBLIC UTILITY COMMISSION

Formal Complaint Form

RECEIVED
2006 JUL 19 AM 9:28
SECRETARY'S BUREAU

Please print or type.

R-00061493C0036

1. CUSTOMER NAME (COMPLAINANT)

Your name, mailing address, county, telephone number, utility account number and service address:

Name Spurgeon Witherow

Street/P.O. Box 57 Mill St Apt # _____

City Youngsville State Pa Zip 16371

County WARREN

Area Code/HOME Phone 814-563-7979

Area Code/WORK Phone _____

Utility Account Number 3224036-08
(from your bill)

DOCUMENT
FOLDER

If your complaint involves utility service provided to a different address than your mailing address, please list this information below.

Name _____

Street/P.O. Box _____

City _____ State _____ Zip _____

2. UTILITY NAME (RESPONDENT)

Name of utility company your complaint concerns: National Fuel Gas

3. TYPE OF UTILITY (check one)

ELECTRIC

STEAM HEAT

GAS

WASTE WATER

WATER

MOTOR CARRIER

(taxi, moving company, limousine)

TELEPHONE

(local, long distance)

DOCKETED

JUL 31 2006

4 ORIGINAL

26

4. COMPLAINT (check one)

A. In general, what is your complaint?

- I want to oppose the company's proposed rate increase.
- There are incorrect charges on my bill.
- There is a reliability, safety or quality problem with my utility service.
- I received a notice that my utility service is being terminated.
- I would like a payment agreement.
- Other.
(explain)

B. State the facts of your complaint.

Include any specific dates, times or places that are important. If the complaint is about a bill, tell us about any charges that you believe are not correct. Use additional paper if you need more space. Provide copies of all relevant documents you believe will support your complaint.

- I oppose
- ① Raising the Residential Customer charge from \$12 to \$20.64
 - ② Proposed surcharge for gas not used
 - ③ Absorbant compensation for executives
 - ④ Gas company compensation for business

5. RELIEF expenses

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

I would urge the PUC to take action on the above issue to give monetary relief to National Fuel Gas Customers by refusing these increases

6. PROTECTION FROM ABUSE

Answer the following question if your complaint is against a natural gas distribution company, an electric distribution company or a water company **AND** your complaint is about a billing problem, an application for service problem, a termination of service problem or a request for a payment agreement.

Has a court granted a "Protection from Abuse" order for your personal safety?

YES

NO

7. PRIOR UTILITY CONTACT

Answer the following question only if you are a residential customer and your complaint is against an electric distribution utility, natural gas distribution utility or a water distribution utility.

Have you spoken to a utility company representative about this complaint?

YES

(includes appeals of BCS determinations)

NO

If you tried to, but could not speak to a utility company representative about your complaint, please explain why.

8. VERIFICATION AND SIGNATURE

You must print or type your name below on the line provided for the verification paragraph, and you must sign and date (in ink) this form on the lines provided.

Verification:

I Spurgeon Witherow, hereby state that the facts above set forth are true and correct (or are true and correct to the best of my knowledge, information and belief) and that I expect to be able to prove the same at a hearing held in this matter. I understand that the statements herein are made subject to the penalties of 18 Pa. C.S. § 4904 (relating to unsworn falsification to authorities).

Spurgeon Witherow
(Signature)

7-17-06
(Date)

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

JULY 24, 2006

JOHN H ISOM
POST & SCHELL
17 NORTH SECOND STREET 12TH FLOOR
HARRISBURG PA 17101-1601

DOCUMENT
FOLDER

RE: PA PUC vs National Fuel Gas
Docket Number R-00061493C0036

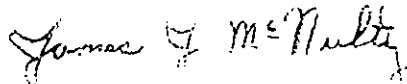
Dear Sir/Madam:

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

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

ddi

DOCKETED
JUL 31 2006

PENNSYLVANIA PUBLIC UTILITY COMMISSION

Formal Complaint Form

RECEIVED
2005 JUL 19 AM 9:28
SECRETARY'S BUREAU

Please print or type.

R-00061493C0037

1. CUSTOMER NAME (COMPLAINANT)

Your name, mailing address, county, telephone number, utility account number and service address:

Name JACK W. PATTERSON

Street/P.O. Box 11 BECKENWOOD DR. Apt # _____

City YOUNGSTOWN State PA Zip 16371

County WARREN

Area Code/HOME Phone 814 563-4788

Area Code/WORK Phone _____

Utility Account Number 4820453-06
(from your bill)

DOCUMENT
FOLDER

If your complaint involves utility service provided to a different address than your mailing address, please list this information below.

Name _____

Street/P.O. Box _____

City _____ State _____ Zip _____

2. UTILITY NAME (RESPONDENT)

Name of utility company your complaint concerns: _____

3. TYPE OF UTILITY (check one)

ELECTRIC

STEAM HEAT

GAS

WASTE WATER

WATER

MOTOR CARRIER
(taxi, moving company, limousine)

TELEPHONE
(local, long distance)

DOCKETED
JUL 31 2006

ORIGINAL

27

4. COMPLAINT (check one)

A. In general, what is your complaint?

- I want to oppose the company's proposed rate increase.
- There are incorrect charges on my bill.
- There is a reliability, safety or quality problem with my utility service.
- I received a notice that my utility service is being terminated.
- I would like a payment agreement.
- Other.
(explain)

B. State the facts of your complaint.

Include any specific dates, times or places that are important. If the complaint is about a bill, tell us about any charges that you believe are not correct. Use additional paper if you need more space. Provide copies of all relevant documents you believe will support your complaint.

- SUPPLEMENT NO. 61 TO TARIFF GAS - PA. P.U.C. NO 9*
- A. *FILED BY NATIONAL FUEL GAS DISTRIBUTION CORP. (NFGD) ON MAY 31, 2006 + PROPOSED TO BECOME EFFECTIVE JULY 30, 2006 WOULD INCREASE NFGD ANNUAL REVENUES BY @ 25,892,000 PER YEAR*
 - B. *FOR RESIDENTIAL CLASS NFGD IS PROPOSING A 70% INCREASE FROM \$12.00 TO 20.64/MONTH*
 - C. *NFGD FILING VOL I EXHIBIT 2 SCHEDULE 2, PG.1 SHOWS 7.18% RATE OF RETURN UNDER PRESENT RATES & 9.48% UNDER PROPOSED RATES*

5. RELIEF

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

- A. *THE PA. P.U.C. SHOULD DENY & INVESTIGATE THE PROPOSED TARIFF*
- B. *DENY NFGD. THE FOLLOWING EXPENSES SHOWN IN VOL III EXHIBIT 4 SCHEDULE 3 PG.1 FORECAST FOR THE YEAR ENDING JAN. 31, 2007 AND ANY OTHER EXPENSES THAT ARE NOT USEFUL TO CUSTOMERS*
- C. *DISALLOW THE PROPOSED RIDER ENHANCED ENERGY EFFICIENCY PROGRAM COST RECOVERY RIDER UNDER WHICH ANY DECLINE IN AVERAGE USAGE PER ACCOUNT FOR THE SMALL VOLUME CUSTOMER CLASSES WOULD BE RECOVERED THROUGH AN ANNUAL CHARGE. THE FEE SURCHARGE RATE IS A COMPLICATED CALCULATION THAT WOULD MAKE IT MORE DIFFICULT TO FIGURE OUT THEIR BILL AND GAS CUSTOMERS WOULD BE PENALIZED FOR CONSERVING AND USING LESS NATURAL GAS.*

6. PROTECTION FROM ABUSE

Answer the following question if your complaint is against a natural gas distribution company, an electric distribution company or a water company **AND** your complaint is about a billing problem, an application for service problem, a termination of service problem or a request for a payment agreement.

Has a court granted a "Protection from Abuse" order for your personal safety?

YES

NO

7. PRIOR UTILITY CONTACT

Answer the following question only if you are a residential customer and your complaint is against an electric distribution utility, natural gas distribution utility or a water distribution utility.

Have you spoken to a utility company representative about this complaint?

YES
(includes appeals of BCS determinations)

NO

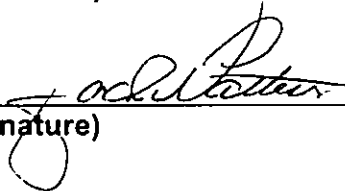
If you tried to, but could not speak to a utility company representative about your complaint, please explain why.

8. VERIFICATION AND SIGNATURE

You must print or type your name below on the line provided for the verification paragraph, and you must sign and date (in ink) this form on the lines provided.

Verification:

I JACK W. PATTERSON, hereby state that the facts above set forth are true and correct (or are true and correct to the best of my knowledge, information and belief) and that I expect to be able to prove the same at a hearing held in this matter. I understand that the statements herein are made subject to the penalties of 18 Pa. C.S. § 4904 (relating to unsworn falsification to authorities).



(Signature)

7/16/06

(Date)

9. LEGAL REPRESENTATION (IF ANY)

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

Lawyer's Name _____

Street _____

City _____ State _____ Zip _____

Area Code/Phone Number _____

10. FILING

Please return the completed form to one of the addresses listed below:

If using U.S. Postal Service:

If using overnight delivery service:

| | |
|--|--|
| Secretary Pennsylvania Public Utility Commission P.O. Box 3265 Harrisburg, PA 17105 | Secretary Pennsylvania Public Utility Commission 400 North Street Commonwealth Keystone Building, 2 nd Floor Harrisburg, Pennsylvania 17120 |
|--|--|

Facsimiles and/or electronic filings of the complaint form will not be accepted.

If you have any questions about filling out this form, please contact the Secretary's Bureau at 717-772-7777.

Keep a copy of your complaint for your records.

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

JULY 24, 2006

JOHN H ISOM
POST & SCHELL
17 NORTH SECOND STREET 12TH FLOOR
HARRISBURG PA 17101-1601

DOCUMENT
FOLDER

RE: PA PUC vs National Fuel Gas
Docket Number R-00061493C0037

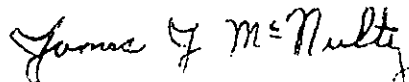
Dear Sir/Madam:

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

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

ddi

DOCKETED
JUL 31 2006

PENNSYLVANIA PUBLIC UTILITY COMMISSION

Formal Complaint Form

Please print or type.

R-00061493C0038

1. CUSTOMER NAME (COMPLAINANT)

Your name, mailing address, county, telephone number, utility account number and service address:

Name James Franklin

Street/P.O. Box 248 East Main Apt # A

City YOUNGSVILLE State PA Zip 16371

County WARREN

Area Code/HOME Phone 814-563-9788

Area Code/WORK Phone

Utility Account Number (from your bill)

DOCUMENT FOLDER

If your complaint involves utility service provided to a different address than your mailing address, please list this information below.

Name

Street/P.O. Box

City State Zip

DOCKETED JUL 31 2006

2. UTILITY NAME (RESPONDENT)

Name of utility company your complaint concerns: National Fuel Gas Distribution Corporation

3. TYPE OF UTILITY (check one)

- ELECTRIC, GAS, WATER, TELEPHONE, STEAM HEAT, WASTE WATER, MOTOR CARRIER (taxi, moving company, limousine)

SECRETARY'S BUREAU 2006 JUL 19 AM 9:28

ORIGINAL

4. **COMPLAINT** (check one)

A. **In general, what is your complaint?**

- I want to oppose the company's proposed rate increase.
- There are incorrect charges on my bill.
- There is a reliability, safety or quality problem with my utility service.
- I received a notice that my utility service is being terminated.
- I would like a payment agreement.
- Other.
(explain)

B. **State the facts of your complaint.**

Include any specific dates, times or places that are important. If the complaint is about a bill, tell us about any charges that you believe are not correct. Use additional paper if you need more space. Provide copies of all relevant documents you believe will support your complaint.

Supplement NO 61 TO Tarriff Gas - PA P.U.C.
NO 9. Filed by National Fuel Gas Distribution Corporation (NFGD) on May 31, 2006. and proposed to become effective July 30, 2006. Would increase NFGD's Annual Revenues by approx. \$25,892,000 - Per yr

5. **RELIEF**

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

PUC must suspend, investigate and deny proposed Tarriff. A public hearing should be held in Warren PA

6. PROTECTION FROM ABUSE

Answer the following question if your complaint is against a natural gas distribution company, an electric distribution company or a water company **AND** your complaint is about a billing problem, an application for service problem, a termination of service problem or a request for a payment agreement.

Has a court granted a "Protection from Abuse" order for your personal safety?

YES

NO

7. PRIOR UTILITY CONTACT

Answer the following question only if you are a residential customer and your complaint is against an electric distribution utility, natural gas distribution utility or a water distribution utility.

Have you spoken to a utility company representative about this complaint?

YES
(includes appeals of BCS determinations)

NO

If you tried to, but could not speak to a utility company representative about your complaint, please explain why.

8. VERIFICATION AND SIGNATURE

You must print or type your name below on the line provided for the verification paragraph, and you must sign and date (in ink) this form on the lines provided.

Verification:

I, James Franklin, hereby state that the facts above set forth are true and correct (or are true and correct to the best of my knowledge, information and belief) and that I expect to be able to prove the same at a hearing held in this matter. I understand that the statements herein are made subject to the penalties of 18 Pa. C.S. § 4904 (relating to unsworn falsification to authorities).

James Franklin
(Signature)

7-17-06
(Date)

9. LEGAL REPRESENTATION (IF ANY)

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

Lawyer's Name _____

Street _____

City _____ State _____ Zip _____

Area Code/Phone Number _____

10. FILING

Please return the completed form to one of the addresses listed below:

If using U.S. Postal Service:

If using overnight delivery service:

| | |
|--|--|
| Secretary Pennsylvania Public Utility Commission P.O. Box 3265 Harrisburg, PA 17105 | Secretary Pennsylvania Public Utility Commission 400 North Street Commonwealth Keystone Building, 2 nd Floor Harrisburg, Pennsylvania 17120 |
|--|--|

Facsimiles and/or electronic filings of the complaint form will not be accepted.

If you have any questions about filling out this form, please contact the Secretary's Bureau at 717-772-7777.

Keep a copy of your complaint for your records.

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

JULY 24, 2006

JOHN H ISOM
POST & SCHELL
17 NORTH SECOND STREET 12TH FLOOR
HARRISBURG PA 17101-1601

DOCUMENT
FOLDER

RE: PA PUC vs National Fuel Gas
Docket Number R-00061493C0038

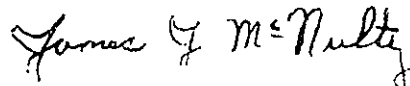
Dear Sir/Madam:

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

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

ddi

DOCKETED
JUL 31 2006

PENNSYLVANIA PUBLIC UTILITY COMMISSION

Formal Complaint Form

RECEIVED
2006 JUL 19 AM 9:28
SECRETARY'S BUREAU

R-0006149300039

Please print or type.

1. CUSTOMER NAME (COMPLAINANT)

Your name, mailing address, county, telephone number, utility account number and service address:

Name Robert Murphy

Street/P.O. Box 248 East Main St Apt # _____

City Youngsville State PA Zip 16371

County Warren

Area Code/HOME Phone 814-563-~~4294~~ 4294

Area Code/WORK Phone _____

Utility Account Number _____
(from your bill)

DOCUMENT
FOLDER

If your complaint involves utility service provided to a different address than your mailing address, please list this information below.

Name _____

Street/P.O. Box _____

City _____ State _____ Zip _____

DOCKETED
AUG 1 2006

2. UTILITY NAME (RESPONDENT)

Name of utility company your complaint concerns: National Fuel Gas
Distribution Corporation

3. TYPE OF UTILITY (check one)

- ELECTRIC
- GAS
- WATER
- TELEPHONE
(local, long distance)
- STEAM HEAT
- WASTE WATER
- MOTOR CARRIER
(taxi, moving company, limousine)

ORIGINAL

29

4. **COMPLAINT** (check one)

A. **In general, what is your complaint?**

- I want to oppose the company's proposed rate increase.
- There are incorrect charges on my bill.
- There is a reliability, safety or quality problem with my utility service.
- I received a notice that my utility service is being terminated.
- I would like a payment agreement.
- Other.
(explain)

B. **State the facts of your complaint.**

Include any specific dates, times or places that are important. If the complaint is about a bill, tell us about any charges that you believe are not correct. Use additional paper if you need more space. Provide copies of all relevant documents you believe will support your complaint. Supplement No. 61 TO Tariff Gas - PA .P.U.C. No 9. Filed by National Fuel Gas Distribution Corporation (NFGD) on May 31, 2006. And proposed to become effective July 30, 2006. Would increase NFGD's annual revenues by approximately \$ 25,892,000 per year

5. **RELIEF**

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

PUC must suspend, investigate & Deny Proposed Tariff. A public Hearing should be held in Warren PA.

6. PROTECTION FROM ABUSE

Answer the following question if your complaint is against a natural gas distribution company, an electric distribution company or a water company **AND** your complaint is about a billing problem, an application for service problem, a termination of service problem or a request for a payment agreement.

Has a court granted a "Protection from Abuse" order for your personal safety?

YES
NO

7. PRIOR UTILITY CONTACT

Answer the following question only if you are a residential customer and your complaint is against an electric distribution utility, natural gas distribution utility or a water distribution utility.

Have you spoken to a utility company representative about this complaint?

YES
(includes appeals of BCS determinations)
NO

If you tried to, but could not speak to a utility company representative about your complaint, please explain why.

8. VERIFICATION AND SIGNATURE

You must print or type your name below on the line provided for the verification paragraph, and you must sign and date (in ink) this form on the lines provided.

Verification:

I Robert Murphy, hereby state that the facts above set forth are true and correct (or are true and correct to the best of my knowledge, information and belief) and that I expect to be able to prove the same at a hearing held in this matter. I understand that the statements herein are made subject to the penalties of 18 Pa. C.S. § 4904 (relating to unsworn falsification to authorities).

Robert Murphy
(Signature) 7/17/06
(Date)

9. LEGAL REPRESENTATION (IF ANY)

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

Lawyer's Name _____

Street _____

City _____ State _____ Zip _____

Area Code/Phone Number _____

10. FILING

Please return the completed form to one of the addresses listed below:

If using U.S. Postal Service:

If using overnight delivery service:

| | |
|--|--|
| Secretary Pennsylvania Public Utility Commission P.O. Box 3265 Harrisburg, PA 17105 | Secretary Pennsylvania Public Utility Commission 400 North Street Commonwealth Keystone Building, 2 nd Floor Harrisburg, Pennsylvania 17120 |
|--|--|

Facsimiles and/or electronic filings of the complaint form will not be accepted.

If you have any questions about filling out this form, please contact the Secretary's Bureau at 717-772-7777.

Keep a copy of your complaint for your records.

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

JULY 24, 2006

JOHN H ISOM
POST & SCHELL
17 NORTH SECOND STREET 12TH FLOOR
HARRISBURG PA 17101-1601

DOCUMENT
FOLDER

RE: PA PUC vs National Fuel Gas
Docket Number R-00061493C0039

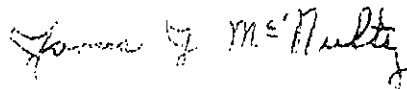
Dear Sir/Madam:

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

Certified Mail
Return Receipt Requested

ddi

DOCKETED
AUG 1 2006