

PENNSYLVANIA PUBLIC UTILITY COMMISSION

Complaint Form

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PA PUC  
SECRETARY'S BUREAU

Please print or type.

R-00061493C0501

1. CUSTOMER NAME (COM)

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

Name Karla J. Paris

Street/P.O. Box 1201 Amy Avenue Apt # \_\_\_\_\_

City Erie State PA Zip 16504

County Erie

Area Code/HOME Phone (814) 825-7909

Area Code/WORK Phone \_\_\_\_\_

Utility Account Number \_\_\_\_\_  
(from your bill)

ORIGINAL

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)

DOCUMENT  
FOLDER

DOCKETED

AUG 16 2006

200

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 don't want to pay a surcharge!

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.A. P.U.C. should suspend and investigate the proposed tariff.

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 Karla J. Paris, 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).

Karla J. Paris  
(Signature)

7/28/06  
(Date)

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

AUGUST 15, 2006

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

RE: PA PUC vs NATIONAL FUEL GAS DISTRI CORP

Docket Number R-00061493C0501

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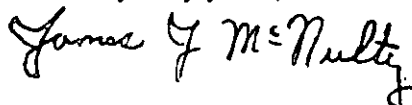
Dear Sir/Madam:

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

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

SS

**DOCKETED**

AUG 16 2006

**DOCUMENT  
FOLDER**

PENNSYLVANIA PUBLIC UTILITY COMMISSION

Formal Complaint Form

RECEIVED  
2006 AUG -1 PM 2:04  
PA PUC  
SECRETARY'S BUREAU

Please print or type.

R-00061493C0502

1. CUSTOMER NAME (C)

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

Name Rebecca Lindley

Street/P.O. Box 605 Strathmore Ave Apt # \_\_\_\_\_

City Erie State PA Zip 16515

County Erie

Area Code/HOME Phone 814 836-0014

Area Code/WORK Phone 814-871-6871

Utility Account Number \_\_\_\_\_  
(from your bill)

ORIGINAL

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)

DOCUMENT  
FOLDER

DOCKETED

AUG 16 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.

The PA PUC should suspend and investigate the utility

**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 Rebecca Lindau, 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).

Rebecca Lindau  
(Signature) 7/08/06  
(Date)

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

AUGUST 15, 2006

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

RE: PA PUC vs NATIONAL FUEL GAS DISTRI CORP

Docket Number R-00061493C0502

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Dear Sir/Madam:

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

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

SS

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PENNSYLVANIA PUBLIC UTILITY COMMISSION

Formal Complaint Form

RECEIVED  
2006 AUG -1 PM 2:04  
PA PUC  
SECRETARY'S BUREAU

Please print or type.

R-00061493C0503

1. CUSTOMER NAME (C)

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

Name Brenda L. Arndt

Street/P.O. Box 1310 Wayne St Apt # 1

City Eric State PA Zip 16509

County \_\_\_\_\_

Area Code/HOME Phone (814) 459-8226

Area Code/WORK Phone (814) 452-5221

Utility Account Number \_\_\_\_\_  
(from your bill)

ORIGINAL

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)

DOCUMENT FOLDER

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AUG 16 2006

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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 NO61 to tariff gas - PA P.V.C. No. 9 Filed  
By National Fuel Gas Distribution Corporation (NFGD) on  
May 31 2006 and proposed to become July 30th 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.

1. The PA. PUC Should Suspend And Investigate  
The proposed Tariff.
2. Hold an Evening Public Hearing in Erie, PA
3. Disallow Proposed "Enhanced Energy Efficiency  
Program Cost Recovery<sup>5</sup> Rider".

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 Brenda L. Arndt, 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)

7/28/06  
(Date)

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

AUGUST 15, 2006

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

RE: PA PUC vs NATIONAL FUEL GAS DISTRI CORP

Docket Number R-00061493C0503

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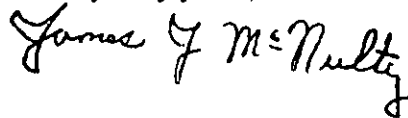
Dear Sir/Madam:

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

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

SS

**DOCKETED**

AUG 16 2006

**DOCUMENT  
FOLDER**

PENNSYLVANIA PUBLIC UTILITY COMMISSION

R-00061493C0504

RECEIVED  
2006 AUG -1 PM 2:04  
PA PUC  
SECRETARY'S BUREAU

Please print or type.

1. CUSTOMER NAME (COMPLAINANT)

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

Name Eric Nyberg

Street/P.O. Box 3429 W 43rd St Apt # \_\_\_\_\_

City Eric State Pa Zip 16506

County Eric

Area Code/HOME Phone \_\_\_\_\_

Area Code/WORK Phone \_\_\_\_\_

Utility Account Number \_\_\_\_\_  
(from your bill)

ORIGINAL

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)

DOCUMENT  
FOLDER

DOCKETED

AUG 16 2006

197

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 shouldn't be charged extra for conserving energy*

5. **RELIEF**

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

*No 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 Eric Nyberg, 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).

Eric Nyberg  
(Signature)

7/27/06  
(Date)

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

AUGUST 15, 2006

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

RE: PA PUC vs NATIONAL FUEL GAS DISTRI CORP

Docket Number R-00061493C0504

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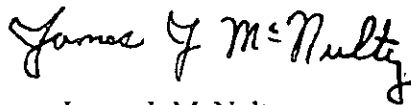
Dear Sir/Madam:

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

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

SS

DOCUMENT  
FOLDER

DOCKETED

AUG 16 2006

PENNSYLVANIA PUBLIC UTILITY COMMISSION

RECEIVED  
2006 AUG -1 PM 2:05  
PA PUC  
SECRETARY'S BUREAU

Please print or type.

R-00061493C0505

1. CUSTOMER NAME (CC)

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

Name Kristine Dombkowski

Street/P.O. Box 1417 East 35<sup>th</sup> St Apt # \_\_\_\_\_

City Erie State PA Zip 16504

County Erie

Area Code/HOME Phone 814-397-1564

Area Code/WORK Phone 814-451-6619

Utility Account Number unknown @ this time  
(from your bill)

ORIGINAL

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: AF60

3. TYPE OF UTILITY (check one)

ELECTRIC

GAS

WATER

TELEPHONE  
(local, long distance)

STEAM HEAT

WASTE WATER

MOTOR CARRIER  
(taxi, moving company, limousine)

DOCUMENT  
FOLDER

DOCKETED

AUG. 16 2006

196

69

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 6 to tariff GAS-PA PUC. no. 9 filed by NATIONAL Fuel GAS Distribution Corporation (NFGD) on May 31, 2006 & proposed to become effective July 30, 2006 would increase NFGD's ANNUAL REVENUES by approximately \$125,892,000 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.

- A.) The PA. PUC should suspend & investigate the proposed tariff.
- B.) Hold an evening public hearing in Erie, PA.
- C.) Disallow proposed "enhanced energy efficiency program cost recovery rider".

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: Kristina Ambkanski, 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).

[Handwritten Signature]  
(Signature)

7/28/06  
(Date)

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

AUGUST 15, 2006

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

RE: PA PUC vs NATIONAL FUEL GAS DISTRI CORP

Docket Number R-00061493C0505

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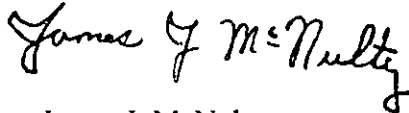
Dear Sir/Madam:

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

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

SS

**DOCKETED** **DOCUMENT**  
**FOLDER**  
AUG 16 2006

PENNSYLVANIA PUBLIC UTILITY COMMISSION

Formal Complaint Form

RECEIVED  
2006 AUG -1 PA 2:05  
PA PUC  
SECRETARY'S BUREAU

Please print or type.

R-00061493C0506

1. CUSTOMER NAME

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

Name FRANCIS GAMBRIESE

Street/P.O. Box 1676 DAVIS AVE Apt # \_\_\_\_\_

City ERIE State PA Zip 16509

County ERIE

Area Code/HOME Phone \_\_\_\_\_

Area Code/WORK Phone \_\_\_\_\_

Utility Account Number \_\_\_\_\_  
(from your bill)

ORIGINAL

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)

DOCUMENT  
FOLDER

DOCKETED

4 AUG 16 2006

195

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 NFG.  
The Surcharge is Wrong. We have been trying  
to conserve energy and the moment we save energy,  
the National Fuel Gas Company Wants to charge us more  
Tell them NO!!

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 Allow the 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 Francis Gambateke, 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).

Francis Gambateke  
(Signature)

7-28-06  
(Date)

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

AUGUST 15, 2006

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

RE: PA PUC vs NATIONAL FUEL GAS DISTRI CORP

Docket Number R-00061493C0506

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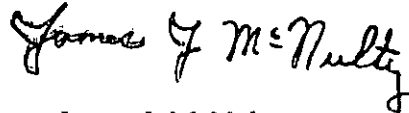
Dear Sir/Madam:

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

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

SS

**DOCKETED**

AUG 16 2006

**DOCUMENT  
FOLDER**

PENNSYLVANIA PUBLIC UTILITY COMMISSION

Complaint Form

RECEIVED  
2006 AUG -1 PM 2:05  
PA PUC  
SECRETARY'S BUREAU

Please print or type.

R-00061493C0507

1. CUSTOMER NAME (C)

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

Name RICHARD DINGER

Street/P.O. Box 2226 DINWIDIE AVE Apt # \_\_\_\_\_

City ERIE State PA Zip 16510

County ERIE

Area Code/HOME Phone 814-899-7452

Area Code/WORK Phone \_\_\_\_\_

Utility Account Number \_\_\_\_\_  
(from your bill)

ORIGINAL

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)

DOCUMENT  
FOLDER

DOCKETED

4 AUG 16 2006

194

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 CORP (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 YEAR

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 PUC SHOULD SUSPEND AND INVESTIGATE THE PROPOSED TARIFF
- B. HOLD AN EVENING PUBLIC HEARING IN ERIE, PA,
- C. DISALLOW PROPOSED "ENHANCED ENERGY EFFICIENCY PROGRAM COST RECOVERY RIDER"

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 RICHARD LEE DINGER, 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).

Richard Lee Dinger  
(Signature)

7/28/06  
(Date)

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

AUGUST 15, 2006

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

RE: PA PUC vs NATIONAL FUEL GAS DISTRI CORP

Docket Number R-00061493C0507

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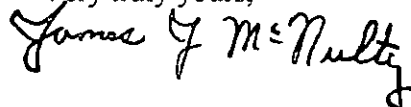
Dear Sir/Madam:

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

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

SS

**DOCKETED** **DOCUMENT**  
**FOLDER**  
AUG 16 2006

PENNSYLVANIA PUBLIC UTILITY COMMISSION

R-00061493C0508

RECEIVED  
2006 AUG -1 PM 2:05  
PA-PUC  
SECRETARY'S BUREAU

Please print or type.

1. CUSTOMER NAME (COMPLAINANT)

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

Name CATHY PACLEY

Street/P.O. Box 2658 COCHRAN ST Apt #           

City ERIE State PA Zip 16508

County erie

Area Code/HOME Phone 814-454-7043

Area Code/WORK Phone 814-451-5610

Utility Account Number \_\_\_\_\_  
(from your bill)

ORIGINAL

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)

DOCUMENT  
FOLDER

DOCKETED

4 AUG 16 2006

193

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.  
PUC 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.

- A. THE PA PUC SHOULD SUSPEND AND INVESTIGATE THE PROPOSED TARRIFF
- B. HOLD AN EVENING PUBLIC HEARING IN ERIE PA
- C. DISALLOW PROPOSED "ENHANCED ENERGY EFFICIENCY PROGRAM COST RECOVERY RIDER."

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 CATHY L. PACLEY, 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).

Cathy L. Pacley  
(Signature)

7-28-06  
(Date)

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

AUGUST 15, 2006

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

RE: PA PUC vs NATIONAL FUEL GAS DISTRI CORP

Docket Number R-00061493C0508

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Dear Sir/Madam:

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

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*

James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

SS

**DOCKETED**

AUG 16 2006

**DOCUMENT  
FOLDER**

PENNSYLVANIA PUBLIC UTILITY COMMISSION

RECEIVED  
2006 AUG -1 PM 2:05  
PA PUC  
SECRETARY'S BUREAU

R-00061493C0509

Please print or type.

1. CUSTOMER NAME (C)

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

Name Autumn McLellan

Street/P.O. Box 4003 Old French Rd Apt # \_\_\_\_\_

City Erie State Pa Zip 16504

County Erie

Area Code/HOME Phone 814-864-9158

Area Code/WORK Phone 814-459-3706

Utility Account Number \_\_\_\_\_  
(from your bill)

ORIGINAL

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)

DOCUMENT  
FOLDER

DOCKETED

AUG 16 2006

192

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. G1 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 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.

- A. The P.A. P.U.C. should suspend and investigate the proposed tariff.
- B. Hold an evening public hearing in Erie, PA
- C. Disallow proposed "Enhanced energy efficiency program cost recovery rider"

**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).

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

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

AUGUST 15, 2006

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

RE: PA PUC vs NATIONAL FUEL GAS DISTRI CORP

Docket Number R-00061493C0509

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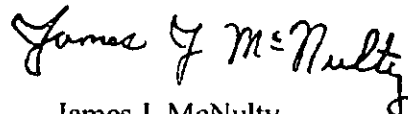
Dear Sir/Madam:

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

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

SS

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AUG 16 2006

PENNSYLVANIA PUBLIC UTILITY COMMISSION

R-00061493C0510

RECEIVED  
2006 AUG -1 PM 2:05  
PA PUC  
SECRETARY'S BUREAU

Please print or type.

1. CUSTOMER NAME (Customer)

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

Name Audrey M. Hertel  
Street/P.O. Box 4297 AARON Rd Apt # —  
City ERIE State PA Zip 16511-1309  
County ERIE  
Area Code/HOME Phone 814-899-6469  
Area Code/WORK Phone \_\_\_\_\_  
Utility Account Number \_\_\_\_\_  
(from your bill)

ORIGINAL

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)

DOCUMENT FOLDER

DOCKETED

AUG 16 2006

191

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 64 to Tariff Gas-PA  
 PVC 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  
 \$25,802 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.

- A. The PA PVC should suspend and investigate the proposed tariff
- B. Hold an evening public hearing in ERIE, PA.
- C. Disallow proposed "Enhanced Energy Efficiency Program Cost Recovery Rider"

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 Audrey Hertel 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).

Audrey Hertel  
(Signature)

July 28, 2006  
(Date)

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

AUGUST 15, 2006

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

RE: PA PUC vs NATIONAL FUEL GAS DISTRI CORP

Docket Number R-00061493C0510

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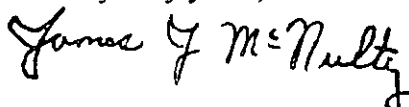
Dear Sir/Madam:

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

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

DOCUMENT  
FOLDER

SS

**DOCKETED**  
AUG 16 2006

PENNSYLVANIA PUBLIC UTILITY COMMISSION

Complaint Form

RECEIVED  
2006 AUG -1 PM 2:05  
PA PUC  
SECRETARY'S BUREAU

Please print or type.

R-00061493C0511

1. CUSTOMER NAME (CC)

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

Name Rich ANGELOTT,

Street/P.O. Box 3929 KESSEX Apt # \_\_\_\_\_

City ERIE State PA Zip 16504

County ERIE

Area Code/HOME Phone (814) 825-2630

Area Code/WORK Phone \_\_\_\_\_

Utility Account Number \_\_\_\_\_  
(from your bill)

ORIGINAL

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)

DOCUMENT  
FOLDER

DOCKETED

AUG 16 2006

190

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.

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 Rich Amosetti, 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).

Rich Amosetti  
(Signature)

7/28/06  
(Date)

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

AUGUST 15, 2006

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

RE: PA PUC vs NATIONAL FUEL GAS DISTRI CORP

Docket Number R-00061493C0511

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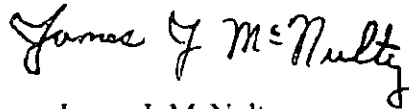
Dear Sir/Madam:

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

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

SS

**DOCKETED** **DOCUMENT**  
**FOLDER**  
AUG 16 2006

PENNSYLVANIA PUBLIC UTILITY COMMISSION

R-00061493C0512

RECEIVED  
2006 AUG -1 PH 2:05  
PA PUC  
SECRETARY'S BUREAU

Please print or type.

1. CUSTOMER NAME (COMPLAINANT)

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

Name Raymond C. Gdubleski

Street/P.O. Box 1214 Silver Drive Apt # \_\_\_\_\_

City Erie State PA Zip 16509

County Erie

Area Code/HOME Phone 814 824 6666

Area Code/WORK Phone 814 434 3674

Utility Account Number \_\_\_\_\_  
(from your bill)

ORIGINAL

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)

DOCUMENT  
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AUG 16 2006

189

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 G-05 - PA  
PUC No. 9 filed by National Fuel Gas distribution Corporation (NFGD) on May 31, 2006 and proposed to become effective July 31, 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.

- A. The PA. PUC. should suspend and investigate the proposed tariff.
- B. Hold an evening public hearing in Erie, PA.
- C. Disallow proposed "enhanced energy efficiency program cost recovery rider"

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 Raymond C. Golubieski, 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) 7/28/2006  
(Date)

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

AUGUST 15, 2006

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

RE: PA PUC vs NATIONAL FUEL GAS DISTRI CORP

Docket Number R-00061493C0512

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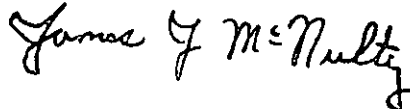
Dear Sir/Madam:

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

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

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

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

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FOLDER

DOCKETED  
AUG 16 2006

PENNSYLVANIA PUBLIC UTILITY COMMISSION

R-00061493C0513

RECEIVED  
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PA PUC  
SECRETARY'S BUREAU

Please print or type.

1. CUSTOMER NAME (Consumer)

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

Name Michael Graham

Street/P.O. Box 613 West 26<sup>th</sup> St Apt # \_\_\_\_\_

City Erie State PA Zip 16508

County Erie

Area Code/HOME Phone (814) 454-3055

Area Code/WORK Phone (814) 455-5396

Utility Account Number \_\_\_\_\_  
(from your bill)

ORIGINAL

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)

DOCUMENT  
FOLDER

DOCKETED

AUG 16 2006

188

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. G1 To Tariff gas. PA PUC No. 9 filed by National Fuel gas distribution corp (NFGD) on 5/31/06 & proposed to become effective 7/30/06 would increase NFGD's annual revenues by approx \$25,097,000 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.

- A. The PA PUC should suspend & investigate the proposed tariff
- B. Hold an evening public hearing in Erie, PA
- C. Disallow proposed "enhanced energy efficiency program cost recovery rider"

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 Graham, 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).

Michael Graham  
(Signature) 7/28/06  
(Date)

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

AUGUST 15, 2006

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

RE: PA PUC vs NATIONAL FUEL GAS DISTRI CORP

Docket Number R-00061493C0513

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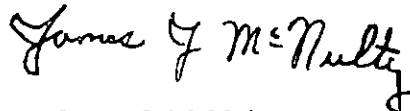
Dear Sir/Madam:

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

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

SS

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AUG 16 2006

PENNSYLVANIA PUBLIC UTILITY COMMISSION

R-00061493C0514

RECEIVED  
2006 AUG -1 PM 2:05  
PA PUC  
SECRETARY'S BUREAU

Please print or type.

1. CUSTOMER NAME (COMPLAINANT)

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

Name NORMA DINGER

Street/P.O. Box 2226 UNION AVE Apt # \_\_\_\_\_

City ERIE State PA Zip 16510

County ERIE

Area Code/HOME Phone 814/899-7452

Area Code/WORK Phone \_\_\_\_\_

Utility Account Number \_\_\_\_\_  
(from your bill)

ORIGINAL

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 CORP.

3. TYPE OF UTILITY (check one)

ELECTRIC

GAS

WATER

TELEPHONE  
(local, long distance)

STEAM HEAT

WASTE WATER

MOTOR CARRIER  
(taxi, moving company, limousine)

DOCUMENT  
FOLDER

DOCKETED

AUG 16 2006

187

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.

- A. The Pa. P.U.C. should suspend and investigate the proposed tariff.
- B. Hold an evening public hearing in Erie, Pa.
- C. Disallow proposed "Enhanced energy efficiency program cost recovery rider"

**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 NORMA J. DINGER, 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).

Norma J. Dinger 7/28/2006  
(Signature) (Date)

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

AUGUST 15, 2006

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

RE: PA PUC vs NATIONAL FUEL GAS DISTRI CORP

Docket Number R-00061493C0514

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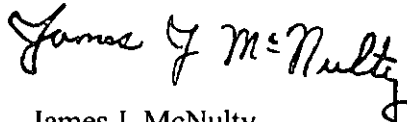
Dear Sir/Madam:

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

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

SS

**DOCKETED**

AUG 16 2006

**DOCUMENT  
FOLDER**



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.

THE SURCHARGE INCREASE FOR PEOPLE WHO ARE CONSERVING ON USING GAS.

5. RELIEF

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

PREVENT THE SURCHARGE FROM OCCURRING.

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

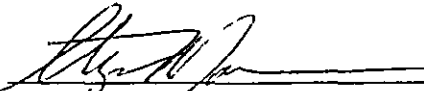
If you tried to, but could not speak to a utility company representative about your complaint, please explain why.

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 MANKS, 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)

7/25/06  
(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 <sup>nd</sup> 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

AUGUST 15, 2006

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

RE: PA PUC vs NATIONAL FUEL GAS DISTRI CORP

Docket Number R-00061493C0515

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Dear Sir/Madam:

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

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

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

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

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AUG 16 2006

**DOCUMENT  
FOLDER**

PENNSYLVANIA PUBLIC UTILITY COMMISSION

Formal Complaint Form

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PA PUC  
SECRETARY'S BUREAU

Please print or type.

R-00061493C0516

1. CUSTOMER NAME

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

Name KIMBERLY J. OVERTON

Street/P.O. Box 206 MYRTLE STREET Apt #       

City ERIE State PA Zip 16507

County ERIE

Area Code/HOME Phone (814) 5721061

Area Code/WORK Phone (814) 4592761 ext 241

Utility Account Number \_\_\_\_\_  
(from your bill)

ORIGINAL

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)

DOCUMENT  
FOLDER

DOCKETED

AUG 16 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.

*How would we be able to save money by making our home more gas efficient, when that saving is being taken away.*

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 Kimberly Overton, KIMBERLY OVERTON, 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).

Kimberly Overton  
(Signature)

7/30/04  
(Date)

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

AUGUST 15, 2006

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

RE: PA PUC vs NATIONAL FUEL GAS DISTRI CORP

Docket Number R-00061493C0516

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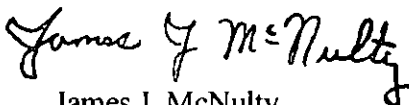
Dear Sir/Madam:

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

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

SS

**DOCKETED**

AUG 16 2006

**DOCUMENT  
FOLDER**

PENNSYLVANIA PUBLIC UTILITY COMMISSION

Formal Complaint Form

RECEIVED  
2006 AUG -1 PM 2:05  
PA PUC  
SECRETARY'S BUREAU

Please print or type. R-00061493C0517

1. CUSTOMER NAME

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

Name PERTINA Z HAMILTON

Street/P.O. Box 1823 Linwood Apt # ---

City ERIE State PA Zip 16578

County ERIE

Area Code/HOME Phone \_\_\_\_\_

Area Code/WORK Phone \_\_\_\_\_

Utility Account Number \_\_\_\_\_  
(from your bill)

ORIGINAL

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)

DOCUMENT FOLDER

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AUG 16 2006

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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. GF to tariff gas - P.A.  
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 \$125,892,000 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.

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 Bertine Z. Hamilton, 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).

Bertine Z. Hamilton  
(Signature)

07-29-06  
(Date)

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

AUGUST 15, 2006

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

RE: PA PUC vs NATIONAL FUEL GAS DISTRI CORP

Docket Number R-00061493C0517

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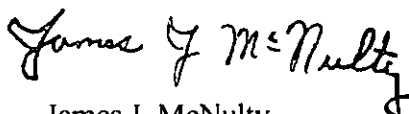
Dear Sir/Madam:

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

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

SS

DOCUMENT  
FOLDER

DOCKETED  
AUG 16 2006

PENNSYLVANIA PUBLIC UTILITY COMMISSION

RECEIVED

R-00061493C0518

rm

2006 AUG -1 PM 2:05

PA PUC SECRETARY'S BUREAU

Please print or type.

1. CUSTOMER NAME (COMPLAINANT)

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

Name Robert J. Miller

Street/P.O. Box 2203 Linwood Ave Apt#

City Erie State Pa Zip 16510

County Erie

Area Code/HOME Phone (814) 998-2215

Area Code/WORK Phone

Utility Account Number (from your bill)

ORIGINAL

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)

DOCUMENT FOLDER

DOCKETED

4 AUG 16 2006

183

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. 6E to tariff gas - PA,  
Distribution 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.

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: Robert J. Miller 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. Miller  
(Signature)

7/30/06  
(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 <sup>nd</sup> 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

AUGUST 15, 2006

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

RE: PA PUC vs NATIONAL FUEL GAS DISTRI CORP

Docket Number R-00061493C0518

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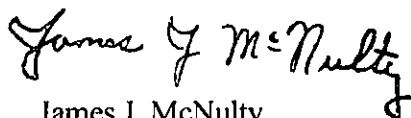
Dear Sir/Madam:

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

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

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

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

SS

**DOCKETED**

AUG 16 2006

**DOCUMENT  
FOLDER**

PENNSYLVANIA PUBLIC UTILITY COMMISSION

R-00061493C0519

RECEIVED  
2006 AUG -1 PM 2:05  
PA PUC  
SECRETARY'S BUREAU

Please print or type.

1. CUSTOMER NAME (COMPLAINANT)

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

Name AGNEA A. POGUE

Street/P.O. Box ~~3908~~ 4002 PAGE Apt # \_\_\_\_\_

City ERIE State PA Zip 16504

County ERIE

Area Code/HOME Phone 814 825 7586

Area Code/WORK Phone \_\_\_\_\_

Utility Account Number \_\_\_\_\_  
(from your bill)

ORIGINAL

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 CORP.

3. TYPE OF UTILITY (check one)

ELECTRIC

STEAM HEAT

GAS

WASTE WATER

WATER

MOTOR CARRIER

(taxi, moving company, limousine)

TELEPHONE  
(local, long distance)

DOCUMENT  
FOLDER

DOCKETED

4 AUG 16 2006

182

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

5. RELIEF \$25,892,000 PER YEAR

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 SUSPEND AND INVESTIGATE THE PROPOSED TARIFF.

B. HOLD AN EVENING PUBLIC HEARING IN ERIE, PA.

C. DISALLOW PROPOSED "ENHANCED ENERGY EFFICIENCY PROGRAM COST RECOVERY RIDER".

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 AGNES A. POGUE, 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).

Agnes A. Pogue (Signature) 7/27/06 (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 <sup>nd</sup> Floor Harrisburg, Pennsylvania 17120
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**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

AUGUST 15, 2006

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

RE: PA PUC vs NATIONAL FUEL GAS DISTRI CORP

Docket Number R-00061493C0519

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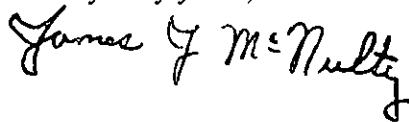
Dear Sir/Madam:

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

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

SS

**DOCKETED**  
AUG 16 2006

**DOCUMENT  
FOLDER**

PENNSYLVANIA PUBLIC UTILITY COMMISSION

R-00061493C0520

RECEIVED  
2006 AUG -1 PM 2:05  
PA PUC  
SECRETARY'S BUREAU

Please print or type.

1. CUSTOMER NAME (COMPLAINANT)

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

Name David Mingoy

Street/P.O. Box 320 Ross St. Apt # \_\_\_\_\_

City Erie State PA Zip 16507

County Erie

Area Code/HOME Phone 814) 874-3414

Area Code/WORK Phone N/A

Utility Account Number \_\_\_\_\_  
(from your bill)

ORIGINAL

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)

DOCUMENT  
FOLDER

DOCKETED

AUG 16 2006

181

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'm a person with fixed income  
AND CAN'T afford the gas rate as of now  
rather than any raise in the rate in the  
future

5. RELIEF

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

They should raise the relief rate  
as to how much household income you  
need to receive help on gas. My  
household was just over the amount  
for any help.

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 David Mingo, 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).

David M. Mingo  
(Signature)

7-27-06  
(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 <sup>nd</sup> 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

AUGUST 15, 2006

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

RE: PA PUC vs NATIONAL FUEL GAS DISTRI CORP

Docket Number R-00061493C0520

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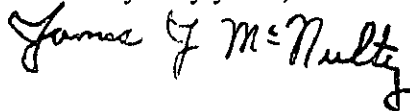
Dear Sir/Madam:

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

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

SS

**DOCKETED**

AUG 16 2006

**DOCUMENT  
FOLDER**

PENNSYLVANIA PUBLIC UTILITY COMMISSION

Formal Complaint Form

RECEIVED  
2005 AUG -1 PM 2:04  
PA PUC  
SECRETARY'S BUREAU

Please print or type.

R-00061493C0521

1. CUSTOMER NAME (COMPLAINANT)

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

Name Dennis Randolph

Street/P.O. Box 264 East 30<sup>th</sup> Apt # \_\_\_\_\_

City Cire State Pa Zip 16504

County Cire

Area Code/HOME Phone 1-814-4522687

Area Code/WORK Phone 1-814-4558696

Utility Account Number \_\_\_\_\_  
(from your bill)

ORIGINAL

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)

DOCUMENT  
FOLDER

DOCKETED

AUG 16 2006

180

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 31, 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.

- A. *The Pa P.U.C. should suspend and investigate the proposed tariff.*
- B. *Hold an evening public hearing in Erie, Pa.*
- C. *Disallow proposed "enchanbed energy efficiency program cost recovery rates"*

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 DENAE RANDOLF 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).

Denae Randolph  
(Signature)

7-28-06  
(Date)

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

AUGUST 15, 2006

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

RE: PA PUC vs NATIONAL FUEL GAS DISTRI CORP

Docket Number R-00061493C0521

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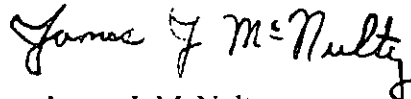
Dear Sir/Madam:

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

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

SS

DOCUMENT  
FOLDER

DOCKETED  
AUG 16 2006

PENNSYLVANIA PUBLIC UTILITY COMMISSION

R-00061493C0522

Raymond & Viola Brown

Please print or type.

RECEIVED  
2006 AUG -1 PM 1:51  
PA PUC  
SECRETARY'S BUREAU

1. CUSTOMER NAME (COMPLAINANT)

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

Name RAYMOND BROWN - MRS VIOLA BROWN

Street/P.O. Box 310 EAST 23 ST Apt # 2

City  Erie  State  Pa  Zip  16502

County  Erie

Area Code/HOME Phone  814 / 4566357

Area Code/WORK Phone \_\_\_\_\_

Utility Account Number \_\_\_\_\_  
(from your bill)

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)

DOCUMENT  
FOLDER

DOCKETED  
AUG 16 2006

415

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 #61 to Tariffs Gas - PA PUC #9 filed  
by NY G.D. in May 31, 2006*

5. RELIEF

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

- A. no rate increase, bills are high enough  
or surcharge*
- B. Hold Evening meeting in June PA*
- C. Disallow proposed Enhanced Energy Efficiency Program  
Cost Recovery Rates.*

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 Viola Brown, 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).

Viola Brown  
(Signature)

7/30/2006  
(Date)

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

AUGUST 15, 2006

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

RE: PA PUC vs National Fuel Gas  
Docket Number R-00061493C0522

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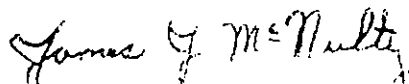
Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by Raymond & Viola Brown.

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

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

Very truly yours,

  
James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

ddi

**DOCKETED**  
AUG 16 2006

**DOCUMENT  
FOLDER**

PENNSYLVANIA PUBLIC UTILITY COMMISSION

R-00061493C0523

Bertha Phillips

RECEIVED  
2006 AUG -1 PM 1:51  
PA PUC  
SECRETARY'S BUREAU

Please print or type.

1. CUSTOMER NAME (COMPLAINANT)

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

Name Bertha L. Phillips

Street/P.O. Box 215 E 24th st Apt # \_\_\_\_\_

City Enid State Pa Zip 19503

County Enid

Area Code/HOME Phone 814-455-9856

Area Code/WORK Phone \_\_\_\_\_

Utility Account Number \_\_\_\_\_  
(from your bill)

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

DOCUMENT  
FOLDER

GAS

WASTE WATER

WATER

MOTOR CARRIER

(taxi, moving company, limousine)

TELEPHONE  
(local, long distance)

DOCKETED

AUG 16 2006

413

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 #61 to Tariff Jan - PA P.U.C. NY filed  
by NPG Dilution Corp.*

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 suspend + investigate the proposed tariff.*
- B. Holding a public hearing meeting in Erie PA.*
- C. Disallow proposed enhanced Energy Efficiency Program for recovery of rates.*

### 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 Bertha L. Phillips, 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).

Bertha L. Phillips  
(Signature)

7/30/04  
(Date)

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

AUGUST 15, 2006

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

RE: PA PUC vs National Fuel Gas  
Docket Number R-00061493C0523

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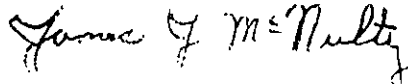
Dear Sir/Madam:

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

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

**DOCUMENT  
FOLDER**

(SEAL)

Certified Mail  
Return Receipt Requested

ddi

**DOCKETED**  
AUG 16 2006

PENNSYLVANIA PUBLIC UTILITY COMMISSION

R-00061493C0524

Emily L Johnson

RECEIVED  
2006 AUG -1 PM 1:51  
PA PUC  
SECRETARY'S BUREAU

Please print or type.

1. CUSTOMER NAME (COMPLAINANT)

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

Name EMILY L. JOHNSON

Street/P.O. Box 912 WALLACE ST Apt # 1<sup>st</sup> F1

City ERIE State PA Zip 16503

County ERIE

Area Code/HOME Phone \_\_\_\_\_

Area Code/WORK Phone \_\_\_\_\_

Utility Account Number \_\_\_\_\_  
(from your bill)

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)

DOCUMENT  
FOLDER

DOCKETED

4 AUG 16 2006

412

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, AS INDIVIDUAL, ABIDED WHAT NATIONAL FUEL REQUESTED SO WHY SHOULD WE BE CHARGED FOR BEING OBIDENT. I HAVE LOW BLOOD AND I FROZE MANY A NIGHTS, WHY SHOULD CUSTOMER PAY A SECOND TIME AROUND FOR A PROFIT THEY CAUSED THEMSELVE TO LOOSE RELIEF OUT ON

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

TELL OR GIVE JUST REASON FOR PASSAGE. STOP THE 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 EMILY L. JOHNSON, 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).

Emily L. Johnson  
(Signature)

7-30-06  
(Date)

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

AUGUST 15, 2006

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

RE: PA PUC vs National Fuel Gas  
Docket Number R-00061493C0524

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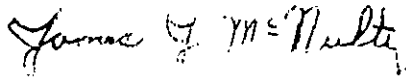
Dear Sir/Madam:

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

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

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

Very truly yours,



James J. McNulty  
Secretary

DOCUMENT  
FOLDER

(SEAL)

Certified Mail  
Return Receipt Requested

ddi

**DOCKETED**

AUG 16 2006

PENNSYLVANIA PUBLIC UTILITY COMMISSION

R-00061493C0525

Barbara Gates & Thomas Chulick

RECEIVED  
2006 AUG -1 PM 1:51  
PA PUC  
SECRETARY'S BUREAU

Please print or type.

1. CUSTOMER NAME (COMPLAINANT)

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

Name Barbara Gates (Thomas Chulick) <sup>two names</sup> on bill

Street/P.O. Box 109 Smyth St Apt# House

City Greer State Pa Zip 16507

County Cole

Area Code/HOME Phone 814-455-7220

Area Code/WORK Phone \_\_\_\_\_

Utility Account Number \_\_\_\_\_  
(from your bill)

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: AKG Distribution Corp.

3. TYPE OF UTILITY (check one)

ELECTRIC

GAS

WATER

TELEPHONE  
(local, long distance)

STEAM HEAT

WASTE WATER

MOTOR CARRIER  
(taxi, moving company, limousine)

DOCUMENT  
FOLDER

DOCKETED

AUG 16 2006

411

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.

*The Gas Co. continues to over-charge my bill when I requested to be taken off balanced billing and I am being charged extraordinarily large amounts for service during winter and summer months.*

5. RELIEF

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

A. *Stop increasing the gas rate.*

B. *Holding or public hearing meetings in Erie PA*

C. *Disallow the proposed Federal Energy Efficiency Program and Recovery Rider.*

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 BARBARA GATES, 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).

Barbara Gates  
(Signature)

July 30, 2006  
(Date)

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

AUGUST 15, 2006

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

RE: PA PUC vs National Fuel Gas  
Docket Number R-00061493C0525

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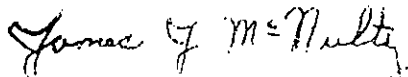
Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by Barbara Gates & Thomas Chulick.

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 16 2006

**DOCUMENT  
FOLDER**

PENNSYLVANIA PUBLIC UTILITY COMMISSION

R-00061493C0526

Earlean Lomax

RECEIVED  
2006 AUG -1 PH 1:51  
PA PUC  
SECRETARY'S BUREAU

Please print or type.

1. CUSTOMER NAME (COMPLAINANT)

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

Name EARLEAN LOMAX

Street/P.O. Box 2028 WOODLAWN AVE Apt # \_\_\_\_\_

City ERIE State PA Zip 16510

County ERIE

Area Code/HOME Phone 814-8982172

Area Code/WORK Phone \_\_\_\_\_

Utility Account Number \_\_\_\_\_  
(from your bill)

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)

DOCUMENT  
FOLDER

DOCKETED

AUG 16 2006

409

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.

*As a customer, I did what National Fuel requested so why pay a second time?*

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 PUC should suspend & investigate the proposed tariff*
- B. Holding an evening public meeting in Emerald City*
- C. Disallow proposed Enhanced Energy Efficiency Program for recovery rides*

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: EARLEAN LOMAX  
Earlean Lomax, 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).

Earlean Lomax 7-30-06  
(Signature) (Date)

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

AUGUST 15, 2006

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

RE: PA PUC vs National Fuel Gas  
Docket Number R-00061493C0526

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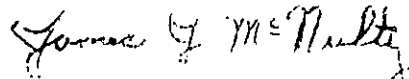
Dear Sir/Madam:

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

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

DOCUMENT  
FOLDER  
DOCKETED  
AUG 16 2006

PENNSYLVANIA PUBLIC UTILITY COMMISSION

R-00061493C0527

Monica Evans

RECEIVED  
2006 AUG -1 PM 1:51  
PA PUC  
SECRETARY'S BUREAU

Please print or type.

1. CUSTOMER NAME (COMPLAINANT)

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

Name Monica Evans

Street/P.O. Box 1601 Prospect Ave Apt # \_\_\_\_\_

City ERIC State Pa Zip 16510

County ERIC

Area Code/HOME Phone 814-455-6165

Area Code/WORK Phone 814-453-7661

Utility Account Number \_\_\_\_\_  
(from your bill)

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)

DOCUMENT  
FOLDER

DOCKETED

AUG 16 2006

408

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.

GAS IS TOO HIGH  
WE NEED TO BE ABLE TO  
SURVIVE.

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 PUC should suspend & investigate the proposed tariff
- B. Holding and query public meeting in Erie Dist
- C. Disallow the proposed Island Energy Efficiency Program for Recovery Rates

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 Monica Evans, 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).

Monica Evans  
(Signature)

7-30-06  
(Date)

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

AUGUST 15, 2006

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

RE: PA PUC vs National Fuel Gas  
Docket Number R-00061493C0527

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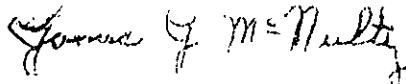
Dear Sir/Madam:

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

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

DOCUMENT  
FOLDER

(SEAL)

Certified Mail  
Return Receipt Requested

ddi

DOCKETED  
AUG 16 2006

PENNSYLVANIA PUBLIC UTILITY COMMISSION

R-00061493C0528

Beverly Ann Doboc

RECEIVED  
2006 AUG -1 PM 1:51  
PA PUC  
SECRETARY'S BUREAU

Please print or type.

1. CUSTOMER NAME (COMPLAINANT)

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

Name BEVERLY ANN DOBOC

Street/P.O. Box 418 E. 24ST. Apt # \_\_\_\_\_

City ERIE State PA Zip 16503

County \_\_\_\_\_

Area Code/HOME Phone (814) 403-9318

Area Code/WORK Phone \_\_\_\_\_

Utility Account Number \_\_\_\_\_  
(from your bill)

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 Corp.

3. TYPE OF UTILITY (check one)

ELECTRIC

STEAM HEAT

GAS

WASTE WATER

WATER

MOTOR CARRIER

(taxi, moving company, limousine)

TELEPHONE  
(local, long distance)

DOCUMENT  
FOLDER

DOCKETED

AUG 16 2006

4

4060

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. *just lost my job have no income*  
(explain) *need gas budget plan lowered*

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.

*lower my budget plan / help people who have no income due to losing job. Do not give rate increase / people on fix or no income can't pay now, but if they have to 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 Beverly DeBoe, 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).

Beverly DeBoe  
(Signature)

7/30/06  
(Date)

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

AUGUST 15, 2006

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

RE: PA PUC vs National Fuel Gas  
Docket Number R-00061493C0528

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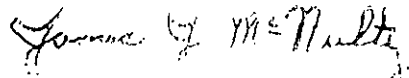
Dear Sir/Madam:

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

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

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

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

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**FOLDER**  
AUG 16 2006

PENNSYLVANIA PUBLIC UTILITY COMMISSION

R-00061493C0529

Alvin Bannetz

Please print or type.

1. CUSTOMER NAME (COMPLAINANT)

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

Name Alvin Bannetz

Street/P.O. Box 336 E 22 St Apt # \_\_\_\_\_

City Erie State Pg Zip 16503

County Erie

Area Code/HOME Phone 814-4560536

Area Code/WORK Phone \_\_\_\_\_

Utility Account Number Did not have bill with me.  
(from your bill)

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

Name Alvin Bannetz

Street/P.O. Box 336 E 22 St

City Erie State Pg Zip 16563

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)

DOCUMENT FOLDER

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404

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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.

(explain) *Bill to High PH 814-4560536*

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 #61 to Tariff Gas - PH P.U.C. #9 filed by  
NFG Gas Distribution Corporation on May 31, 2006  
and proposed to become effective July 30, 2006 would  
increase NFG's annual revenues by approx.  
\$25,000,000 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.

*I would like National Fuel Company to  
be more understanding with Senior citizens  
who are on fixed income. Who have to  
buy medicine and have to make a choice as  
to what buy medicine or Pay Gas bill*

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 Alvin Bando, 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).

Alvin Bando 4-30-06  
(Signature) (Date)

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

AUGUST 15, 2006

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

RE: PA PUC vs National Fuel Gas  
Docket Number R-00061493C0529

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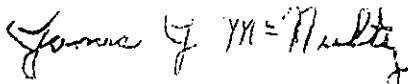
Dear Sir/Madam:

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

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

**DOCUMENT  
FOLDER**

(SEAL)

Certified Mail  
Return Receipt Requested

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**DOCKETED**  
AUG 16 2006

PENNSYLVANIA PUBLIC UTILITY COMMISSION

R-00061493C0530

Anna Clanton Jerfress

RECEIVED  
2006 AUG -1 PM 1:51  
PA PUC  
SECRETARY'S BUREAU

Please print or type.

1. CUSTOMER NAME (COMPLAINANT)

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

Name Anna Clanton-Jeffress

Street/P.O. Box 1329 East 37 St. Apt # \_\_\_\_\_

City erie State Pa. Zip 16504

County erie 25

Area Code/HOME Phone 814 459-0916

Area Code/WORK Phone \_\_\_\_\_

Utility Account Number \_\_\_\_\_  
(from your bill)

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)

DOCUMENT  
FOLDER

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AUG 16 2006

401

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 paying monies for unused services

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 P.U.C. should suspend & investigate the proposed tariff.
- B. Holding an evening meeting for EUCI @ P.A.
- C. Disallow the proposed Enhanced Energy Efficiency Program and recovery rides.

**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 Anna Clanton-Jeffress, 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).

Anna Jeffress  
(Signature)

7-30-06  
(Date)

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

AUGUST 15, 2006

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

RE: PA PUC vs National Fuel Gas  
Docket Number R-00061493C0530

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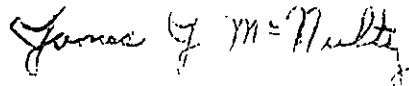
Dear Sir/Madam:

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

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

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AUG 16 2006

PENNSYLVANIA PUBLIC UTILITY COMMISSION

R-00061493C0531

Henrietta Gorz

Please print or type.

1. CUSTOMER NAME (COMPLAINANT)

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

Name HENRIETTA GORZ

Street/P.O. Box 2219 HARRISON Apt # \_\_\_\_\_

City ERIC State PA Zip 16510

County ERIC

Area Code/HOME Phone 814 899 4568

Area Code/WORK Phone 814 ~~899~~ 844 5793

Utility Account Number \_\_\_\_\_  
(from your bill)

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)

DOCUMENT FOLDER

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AUG 16 2006

399

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PA PUC  
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.  
(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.

*Paying too much money for what I already have.  
Abusive costs of <sup>annual</sup> money say \$25,000,000 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.

- A. The PA P.U.C. should suspend + investigate the proposed tariff*
- B. Holding an evening public meeting in Erie PA.*
- C. Disallow proposed enhanced Energy Efficient Program post recovery period.*

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 Henrietta Gore, 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).

Henrietta Gore  
(Signature)

7-30-01  
(Date)

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

AUGUST 15, 2006

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

RE: PA PUC vs National Fuel Gas  
Docket Number R-00061493C0531

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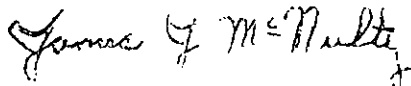
Dear Sir/Madam:

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

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

**DOCUMENT  
FOLDER**

**DOCKETED**  
AUG 16 2006

PENNSYLVANIA PUBLIC UTILITY COMMISSION

R-00061493C0532

Dora B Smith

Please print or type.

RECEIVED  
2006 AUG -1 PM 1:51  
PA PUC  
SECRETARY'S BUREAU

1. CUSTOMER NAME (COMPLAINANT)

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

Name Dora B. Smith

Street/P.O. Box 405 Reed St Apt # \_\_\_\_\_

City ERIE State PA Zip 16507-1735

County ERIE

Area Code/HOME Phone 814 (459-2375

Area Code/WORK Phone \_\_\_\_\_

Utility Account Number \_\_\_\_\_  
(from your bill)

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: AKG Distribution Corp

3. TYPE OF UTILITY (check one)

ELECTRIC

STEAM HEAT

GAS

WASTE WATER

WATER

MOTOR CARRIER

(taxi, moving company, limousine)

TELEPHONE  
(local, long distance)

DOCUMENT  
FOLDER

DOCKETED

AUG 16 2006

397

**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 DORA B. SMITH, 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).

Dora B. Smith  
(Signature)

07/30/06  
(Date)

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

AUGUST 15, 2006

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

RE: PA PUC vs National Fuel Gas  
Docket Number R-00061493C0532

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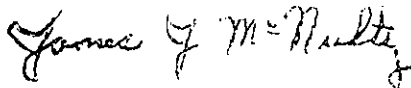
Dear Sir/Madam:

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

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

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

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

ddi

**DOCKETED**

AUG 16 2006

**DOCUMENT  
FOLDER**

PENNSYLVANIA PUBLIC UTILITY COMMISSION

R-00061493C0533

Joni M Jackson

Please print or type.

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2006 AUG -1 11:51  
PA PUC  
SECRETARY'S BUREAU

1. CUSTOMER NAME (COMPLAINANT)

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

Name Joni M. Jackson

Street/P.O. Box 2908 Germania 1st floor Apt # \_\_\_\_\_

City Erie State Pa Zip 16503

County Erie

Area Code/HOME Phone (814) 454-8402

Area Code/WORK Phone \_\_\_\_\_

Utility Account Number \_\_\_\_\_  
(from your bill)

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)

DOCUMENT  
FOLDER

DOCKETED

AUG 16 2006

395

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.

Look into this proposed rate increased, people on fixed income can no longer afford to pay their bill

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 Janivan Jackson, 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).

Janivan Jackson  
(Signature)

7-30-2006  
(Date)

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

AUGUST 15, 2006

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

RE: PA PUC vs National Fuel Gas  
Docket Number R-00061493C0533

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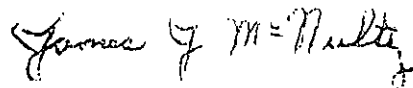
Dear Sir/Madam:

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

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 16 2006

**DOCUMENT  
FOLDER**

PENNSYLVANIA PUBLIC UTILITY COMMISSION

R-00061493C0534

Maryann Mitchell

RECEIVED  
2006 AUG -1 PM 1:51  
PA PUC  
SECRETARY'S BUREAU

Please print or type.

1. CUSTOMER NAME (COMPLAINANT)

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

Name Maryann Mitchell

Street/P.O. Box 4236 Blvd Dr Apt # \_\_\_\_\_

City Exton State Pa Zip 16518

County Blue

Area Code/HOME Phone 814 824-9101

Area Code/WORK Phone \_\_\_\_\_

Utility Account Number \_\_\_\_\_  
(from your bill)

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 Distributor Corp

3. TYPE OF UTILITY (check one)

ELECTRIC

STEAM HEAT

GAS

WASTE WATER

WATER

MOTOR CARRIER  
(taxi, moving company, limousine)

TELEPHONE  
(local, long distance)

DOCUMENT FOLDER

DOCKETED

AUG 16 2006

393

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: Maryann Mitchell, 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).

Maryann Mitchell  
(Signature)

7-30-06  
(Date)

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

AUGUST 15, 2006

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

RE: PA PUC vs National Fuel Gas  
Docket Number R-00061493C0534

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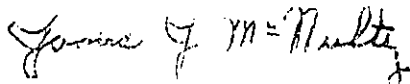
Dear Sir/Madam:

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

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 16 2006

**DOCUMENT  
FOLDER**

PENNSYLVANIA PUBLIC UTILITY COMMISSION

R-00061493C0535

Nadine Noble

Please print or type.

RECEIVED  
2005 AUG -1 PM 1:51  
PA PUC  
SECRETARY'S BUREAU

1. CUSTOMER NAME (COMPLAINANT)

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

Name NADINE NOBLE

Street/P.O. Box 260 WEST 3RD Apt # \_\_\_\_\_

City ERIE State PA Zip 16507

County \_\_\_\_\_

Area Code/HOME Phone (814) 459-3048

Area Code/WORK Phone \_\_\_\_\_

Utility Account Number \_\_\_\_\_  
(from your bill)

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)

DOCUMENT  
FOLDER

DOCKETED

AUG 16 2006

4

391

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.

every thing in my house is ran by electric even my water tank and I have a \$1,7.00 dollar gas (low?)

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 Am NADINE NOBLE 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).

Nadine Noble  
(Signature)

July 30, 2006  
(Date)

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

AUGUST 15, 2006

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

RE: PA PUC vs National Fuel Gas  
Docket Number R-00061493C0535

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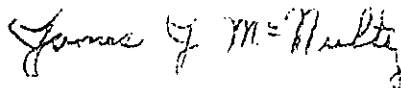
Dear Sir/Madam:

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

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

**DOCUMENT  
FOLDER**

(SEAL)

Certified Mail  
Return Receipt Requested

ddi

**DOCKETED**

AUG 16 2006

PENNSYLVANIA PUBLIC UTILITY COMMISSION

R-00061493C0536

Ryan Morewood

Please print or type.

RECEIVED  
2005 AUG -1 PM 1:52  
PA PUC  
RETARY'S BUREAU

1. CUSTOMER NAME (COMPLAINANT)

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

Name Ryan Morewood

Street/P.O. Box 449 West Front St Apt# 2

City Erie State PA Zip 16507

County Erie

Area Code/HOME Phone (814) 434-2787

Area Code/WORK Phone (814) 434-2787

Utility Account Number \_\_\_\_\_  
(from your bill)

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)

DOCUMENT  
FOLDER

DOCKETED

4 AUG 16 2006

390

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. G-1 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 \$25,592,000  
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.

- A. The PA. P.U.C. should suspend and investigate the proposed tariff.
- B. Hold an evening public hearing in Erie, PA.
- C. Disallow proposed "enhanced energy efficiency program cost recovery rider"

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 Ryan Morewood, 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).

Ryan Morewood  
(Signature)

07 / 30 / 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 <sup>nd</sup> 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

AUGUST 15, 2006

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

RE: PA PUC vs National Fuel Gas  
Docket Number R-00061493C0536

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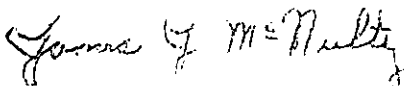
Dear Sir/Madam:

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

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

DOCUMENT  
FOLDER  
DOCKETED  
AUG 16 2006

PENNSYLVANIA PUBLIC UTILITY COMMISSION

R-00061493C0537

Denice A Manus

Please print or type.

RECEIVED  
2006 AUG -1 PM 1:52  
PA PUC  
SECRETARY'S BUREAU

1. CUSTOMER NAME (COMPLAINANT)

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

Name Denice A. Manus  
Street/P.O. Box 4326 Craney Ave Apt# And 2401 French Street  
City ERIC State Pa Zip 16510/16503  
County ERIC  
Area Code/HOME Phone 814-825-5392  
Area Code/WORK Phone \_\_\_\_\_  
Utility Account Number \_\_\_\_\_  
(from your bill)

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)

DOCUMENT FOLDER

DOCKETED  
AUG 16 2006

388

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.

*Ask them to take out their meters  
a year ago! Being charged for fee  
meter monthly \$123.00*

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: Denice A. Manus 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).

Ms. Denice A. Manus  
(Signature)

July 30, 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 <sup>nd</sup> 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

AUGUST 15, 2006

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

RE: PA PUC vs National Fuel Gas  
Docket Number R-00061493C0537

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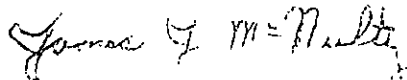
Dear Sir/Madam:

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

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

**DOCUMENT  
FOLDER**

(SEAL)

Certified Mail  
Return Receipt Requested

ddi

**DOCKETED**  
AUG 16 2006

PENNSYLVANIA PUBLIC UTILITY COMMISSION

R-00061493C0538

Manus Enterprises Sunoco A Plus

RECEIVED  
2006 AUG -1 PM 1:52  
PA PUC  
SECRETARY'S BUREAU

Please print or type.

1. CUSTOMER NAME (COMPLAINANT)

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

Name MANUS ENTERPRISES SUNOCO A-Plus

Street/P.O. Box 26 EAST 12th Apt # \_\_\_\_\_

City ERIE State Pa Zip 16501

County ERIE

Area Code/HOME Phone 814-456-7647

Area Code/WORK Phone 814-456-7647

Utility Account Number \_\_\_\_\_  
(from your bill)

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)

DOCUMENT FOLDER

DOCKETED  
AUG 16 2006

305

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.

*Over charging our business.*

5. **RELIEF**

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

*Reimburse our business for their mistakes!*

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: Denise Mennas - Partner  
Stephanie Mennas - Partner, 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).

Denise G. Mennas  
(Signature)

7/30/06  
(Date)

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

AUGUST 15, 2006

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

RE: PA PUC vs National Fuel Gas  
Docket Number R-00061493C0538

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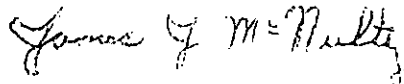
Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by Manus Enterprises Sunoco A Plus.

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

DOCUMENT  
FOLDER

DOCKETED  
AUG 16 2006

PENNSYLVANIA PUBLIC UTILITY COMMISSION

R-00061493C0539

Brenda Abreu-Baker

RECEIVED  
2006 AUG -1 PM 1:52  
PA PUC  
SECRETARY'S BUREAU

Please print or type.

1. CUSTOMER NAME (COMPLAINANT)

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

Name Brenda Abreu-Baker

Street/P.O. Box 440 E 17th St Apt # \_\_\_\_\_

City Erie State PA Zip 16503

County Erie

Area Code/HOME Phone 814-453-25/35

Area Code/WORK Phone \_\_\_\_\_

Utility Account Number \_\_\_\_\_  
(from your bill)

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)

DOCUMENT  
FOLDER

DOCKETED

AUG 16 2006

383

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-<sub>2</sub> 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.

- A. The P<sub>2</sub>-P.U.C. should suspend and investigate the proposed tariff.
- B. Hold an evening public hearing in Erie Pa
- C. Disallow proposed "Enhanced Energy Efficiency Program Cost Recovery Rider"

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 Brenda Abreu-Baker, 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).

Brenda Abreu Baker  
(Signature)

7/30/06  
(Date)

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

AUGUST 15, 2006

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

RE: PA PUC vs National Fuel Gas  
Docket Number R-00061493C0539

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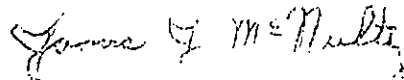
Dear Sir/Madam:

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

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 16 2006

**DOCUMENT  
FOLDER**

PENNSYLVANIA PUBLIC UTILITY COMMISSION

R-00061493C0540

Yolanda Hopkins

RECEIVED  
2006 AUG -1 PM 1:52  
PA PUC  
SECRETARY'S BUREAU

Please print or type.

1. CUSTOMER NAME (COMPLAINANT)

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

Name Yolanda Hopkins

Street/P.O. Box 2610 JACKSON AVE Apt # \_\_\_\_\_

City ERIE State PA Zip 16504

County ERIE

Area Code/HOME Phone 814-459-9376

Area Code/WORK Phone \_\_\_\_\_

Utility Account Number \_\_\_\_\_  
(from your bill)

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)

DOCUMENT  
FOLDER

DOCKETED

AUG 16 2006

301

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.

~~1. to~~ Do not allow this company to get an increase. This request from National Fuel is ridiculous.

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 Yolanda Thornton-Hopkins, 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).*

Yolanda Hopkins  
(Signature)

7-30-06  
(Date)

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

AUGUST 15, 2006

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

RE: PA PUC vs National Fuel Gas  
Docket Number R-00061493C0540

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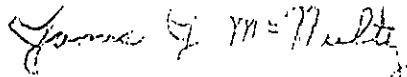
Dear Sir/Madam:

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

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

DOCUMENT  
FOLDER

DOCKETED  
AUG 16 2006

PENNSYLVANIA PUBLIC UTILITY COMMISSION

R-00061493C0541

Edward & Aline Calvin

RECEIVED  
2006 AUG -1 PM 1:52  
PA PUC  
SECRETARY'S BUREAU

Please print or type.

1. CUSTOMER NAME (COMPLAINANT)

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

Name Edward & Aline Calvin

Street/P.O. Box 2058 E 20th St Apt # \_\_\_\_\_

City Erie State PA Zip 16510

County Erie

Area Code/HOME Phone 814-898-4246

Area Code/WORK Phone \_\_\_\_\_

Utility Account Number \_\_\_\_\_  
(from your bill)

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

STEAM HEAT

GAS

WASTE WATER

WATER

MOTOR CARRIER  
(taxi, moving company, limousine)

TELEPHONE  
(local, long distance)

DOCUMENT FOLDER

DOCKETED

AUG 16 2006

379

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  
5. RELIEF \$25,892,000 per year.

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 suspend and  
investigate the proposed tariff.

B. Hold an evening public hearing in  
Erie, Pa.

C. Disallow proposed "Enhanced  
Efficiency Program Cost Recovery Rider"

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: Edward-Aline Colvin

I Edward Aline Colvin, 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).

Edward Aline Colvin 7-30-06  
(Signature) (Date)

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

AUGUST 15, 2006

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

RE: PA PUC vs National Fuel Gas  
Docket Number R-00061493C0541

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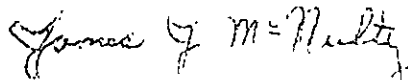
Dear Sir/Madam:

A Complaint has been filed against you in the above-captioned matter before the Pennsylvania Public Utility Commission by Edward & Aline Calvin.

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

**DOCUMENT  
FOLDER**

(SEAL)

Certified Mail  
Return Receipt Requested

ddi

**DOCKETED**  
AUG 16 2006

PENNSYLVANIA PUBLIC UTILITY COMMISSION

R-00061493C0542

Bill Palmer

RECEIVED  
2006 AUG -1 PH 1:52  
PA PUC  
SECRETARY'S BUREAU

Please print or type.

1. CUSTOMER NAME (COMPLAINANT)

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

Name Bill Palmer

Street/P.O. Box 308 West 10th Apt # \_\_\_\_\_

City Erie State PA Zip 16502

County Erie

Area Code/HOME Phone \_\_\_\_\_

Area Code/WORK Phone \_\_\_\_\_

Utility Account Number \_\_\_\_\_  
(from your bill)

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

GAS

WATER

TELEPHONE  
(local, long distance)

STEAM HEAT

WASTE WATER

MOTOR CARRIER  
(taxi, moving company, limousine)

DOCUMENT  
FOLDER

DOCKETED

AUG 16 2006

376

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-P<sub>2</sub> P.U.C. No. 9 filed by National Fuel Gas Dist. Corp. (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.

- A. The P<sub>2</sub> P.U.C. should suspend and investigate the proposed tariff.
- B. Hold an evening public hearing in P<sub>2</sub> - ERIE
- C. Disallow proposed "Enhanced Energy Efficiency Program Cost Recovery Rider"

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 Bill Palmer, 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).

Bill Palmer  
(Signature)

7/30/06  
(Date)

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

AUGUST 15, 2006

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

RE: PA PUC vs National Fuel Gas  
Docket Number R-00061493C0542

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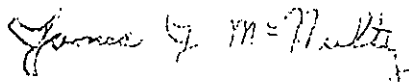
Dear Sir/Madam:

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

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

**DOCUMENT  
FOLDER**

(SEAL)

Certified Mail  
Return Receipt Requested

ddi

**DOCKETED**  
AUG 16 2006

PENNSYLVANIA PUBLIC UTILITY COMMISSION

R-00061493C0543

John R Matz

Please print or type.

RECEIVED  
2005 AUG -1 PM 1:52  
PA PUC  
SECRETARY'S BUREAU

1. CUSTOMER NAME (COMPLAINANT)

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

Name JOHN R MATZ

Street/P.O. Box 838 SHENLEY DR. Apt # \_\_\_\_\_

City ERIE State PA Zip 16505

County ERIE

Area Code/HOME Phone \_\_\_\_\_

Area Code/WORK Phone \_\_\_\_\_

Utility Account Number \_\_\_\_\_  
(from your bill)

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)

DOCUMENT  
FOLDER

DOCKETED

AUG 16 2006

375

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 Corporation (NFGD) on May  
31, 2006 and proposed to become effective  
July 30, 2006 would increase NFGD's annual  
Revenues RELIEF by approximately 25,892,000 per year

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

(A) The PA PUC, should suspend and investigate  
the proposed tariff

(B) Hold an evening Public Hearing in  
Orie, Pa.

(C) Do not allow proposed "Enhanced energy  
Efficiency program cost Recovery Rider

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 R Matz, 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).

John R Matz  
(Signature)

July 28, 06  
(Date)

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

AUGUST 15, 2006

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

RE: PA PUC vs National Fuel Gas  
Docket Number R-00061493C0543

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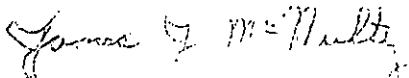
Dear Sir/Madam:

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

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

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

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

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AUG 16 2006

PENNSYLVANIA PUBLIC UTILITY COMMISSION

R-00061493C0544

Linda Hurlbert

Please print or type.

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2006 AUG -1 PM 1:52  
PA PUC  
SECRETARY'S BUREAU

1. CUSTOMER NAME (COMPLAINANT)

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

Name Linda Hurlbert

Street/P.O. Box 5149 Henderson Rd Apt # 110

City Erie State Pa Zip 16509

County Erie

Area Code/HOME Phone \_\_\_\_\_

Area Code/WORK Phone \_\_\_\_\_

Utility Account Number \_\_\_\_\_  
(from your bill)

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 Corp

3. TYPE OF UTILITY (check one)

ELECTRIC

STEAM HEAT

**DOCUMENT  
FOLDER**

GAS

WASTE WATER

WATER

MOTOR CARRIER  
(taxi, moving company, limousine)

TELEPHONE  
(local, long distance)

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AUG 16 2006

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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 Corp  
(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.

- A. The Pa P.U.C. should suspend & investigate the proposed Tariff.
- B. Hold an evening public hearing in Erie, Pa.
- C. Disallow proposed "Enhanced energy efficiency program cost recovery rider"

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 Hurlbert, 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 Hurlbert  
(Signature)

7-28-06  
(Date)

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

AUGUST 15, 2006

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

RE: PA PUC vs National Fuel Gas  
Docket Number R-00061493C0544

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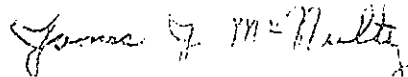
Dear Sir/Madam:

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

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

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AUG 16 2006

PENNSYLVANIA PUBLIC UTILITY COMMISSION

R-00061493C0545

Marian Magee

RECEIVED  
2006 AUG -1 PM 1:52  
PA PUC  
SECRETARY'S BUREAU

Please print or type.

1. CUSTOMER NAME (COMPLAINANT)

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

Name MARIAN MAGEE

Street/P.O. Box 249 EAST 31 Apt # \_\_\_\_\_

City ERIC State PA Zip 16504

County ERIC

Area Code/HOME Phone 814/455-6475

Area Code/WORK Phone \_\_\_\_\_

Utility Account Number \_\_\_\_\_  
(from your bill)

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

STEAM HEAT

GAS

WASTE WATER

WATER

MOTOR CARRIER

(taxi, moving company, limousine)

TELEPHONE  
(local, long distance)

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AUG 16 2006

370

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.

**A. THE PA. P.U.C. SHOULD SUSPEND AND  
INVESTIGATE THE PROPOSED TARIFF,**

**B. HOLD AN EVENING PUBLIC HEARING  
IN ERIE, PA.**

**C. DISALLOW PROPOSED "ENHANCED ENERGY  
EFFICIENCY PROGRAM COST RECOVERY RIDER"**

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 Marcos Maga, 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).

Marcos Maga 7-28-06  
(Signature) (Date)

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

AUGUST 15, 2006

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

RE: PA PUC vs National Fuel Gas  
Docket Number R-00061493C0545

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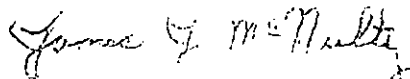
Dear Sir/Madam:

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

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**

AUG 16 2006

(SEAL)

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PENNSYLVANIA PUBLIC UTILITY COMMISSION

R-00061493C0546

Jack Zeitler

Please print or type.

RECEIVED  
2006 AUG -1 PM 1:52  
PA PUC  
SECRETARY'S BUREAU

1. CUSTOMER NAME (COMPLAINANT)

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

Name JACK ZEITLER

Street/P.O. Box 3906 RIDGELWOOD DR. Apt #

City ERIE State PA. Zip 16506

County

Area Code/HOME Phone

Area Code/WORK Phone

Utility Account Number   
(from your bill)

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)

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AUG 16 2006

368

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 # 61 TO TARIFF GAS PA.  
PUC No. 9 FILLED BY NATIONAL FUEL GAS  
MAY 31, 2006 AND PROPOSED TO BECOME  
EFFECTIVE JULY 2006 WOULD INCREASE  
NEWD'S ANNUAL REVENUES BY APPROX. \$25,897  
PER YEAR  
RELIEF

5.

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

- A. THE PA PUC SHOULD SUSPEND & INVESTIGATE THE PROPOSED TARIFF.
- B. HOLD AN EVENING PUBLIC HEARING IN ERIE, PA.
- C. DISALLOW PROPOSED "ENHANCED ENERGY EFFICIENCY PROGRAM COST RECOVERED RIDER"

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 MR J R ZEPHER, 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).

MR J R ZEPHER  
(Signature)

2/28/02  
(Date)

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

AUGUST 15, 2006

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

RE: PA PUC vs National Fuel Gas  
Docket Number R-00061493C0546

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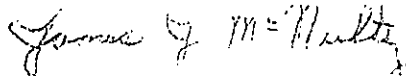
Dear Sir/Madam:

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

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

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

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

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AUG 16 2006

**ORIGINAL**

Formal Complaint Form

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PA PUC  
SECRETARY'S BUREAU

Please print or type.

R-00061493C0547

1. CUSTOMER NAME (C)

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

Name Dinah Durr

Street/P.O. Box 2219 French St Apt # \_\_\_\_\_

City ERIE State PA Zip 16503

County ERIE

Area Code/HOME Phone 814-455-2052

Area Code/WORK Phone \_\_\_\_\_

Utility Account Number \_\_\_\_\_  
(from your bill)

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: NATION Fuel

3. TYPE OF UTILITY (check one)

ELECTRIC

STEAM HEAT

GAS

WASTE WATER

WATER

MOTOR CARRIER

(taxi, moving company, limousine)

TELEPHONE  
(local, long distance)

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AUG 16 2006

322

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.

present income not supporting  
increase of GAS.

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 Dinah Durr, 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).

Dinah Durr  
(Signature)

7-30-06  
(Date)

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

AUGUST 16, 2006

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

RE: PA PUC vs. NATIONAL FUEL GAS DISTRIBUTION CORPORATION  
Docket Number R-00061493C0547

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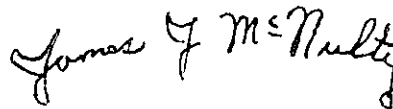
Dear Sir/Madam:

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

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

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

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

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Return Receipt Requested

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AUG 16 2006

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OLDER

**ORIGINAL**

Formal Complaint Form

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PA PUC  
SECRETARY'S BUREAU

Please print or type.

R-00061493C0548

1. CUSTOMER NAME (COM)

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

Name Julia Williams

Street/P.O. Box 965 E. 31st Apt # \_\_\_\_\_

City Eric State Pa Zip 16504

County Erie

Area Code/HOME Phone (814) 454-3430

Area Code/WORK Phone (412) 396-6098

Utility Account Number \_\_\_\_\_  
(from your bill)

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

Name National Fuel Gas

Street/P.O. Box \_\_\_\_\_

City Erie State Pa Zip \_\_\_\_\_

2. UTILITY NAME (RESPONDENT)

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

3. TYPE OF UTILITY (check one)

ELECTRIC

STEAM HEAT

GAS

WASTE WATER

WATER

MOTOR CARRIER

(taxi, moving company, limousine)

TELEPHONE  
(local, long distance)

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AUG 16 2006  
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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.

*Do not provide the 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 Julia Williams, 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).

Julia Williams (Signature) 4/31/06 (Date)

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

AUGUST 16, 2006

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

RE: PA PUC vs. NATIONAL FUEL GAS DISTRIBUTION CORPORATION  
Docket Number R-00061493C0548

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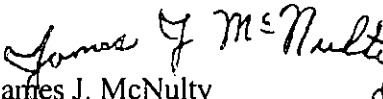
Dear Sir/Madam:

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

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

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

Very truly yours,

  
James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

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AUG 16 2006

# ORIGINAL

## PENNSYLVANIA PUBLIC UTILITY COMMISSION

### Formal Complaint Form

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2006 AUG -1 PM 1:50  
PA PUC  
SECRETARY'S BUREAU  
account number and

Please print or type.

R-00061493C0549

#### 1. CUSTOMER NAME (COMPLAINANT)

Your name, mailing address, service address:

Name Nettie Smith

Street/P.O. Box 446 Wilson St Apt # \_\_\_\_\_

City Erie State PA Zip 16507

County Erie

Area Code/HOME Phone 454-3584-814

Area Code/WORK Phone \_\_\_\_\_

Utility Account Number \_\_\_\_\_  
(from your bill)

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: Natural Gas Distribution 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  
AUG 16 2006

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FOLDER

319

**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 Nettie Smith, 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).

Nettie Smith  
(Signature)

6-30-06  
(Date)

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

AUGUST 16, 2006

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

RE: PA PUC vs. NATIONAL FUEL GAS DISTRIBUTION CORPORATION  
Docket Number R-00061493C0549

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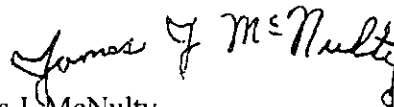
Dear Sir/Madam:

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

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

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

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

jih

**DOCKETED** **DOCUMENT**  
AUG 16 2006 **FOLDER**

**ORIGINAL**

Formal Complaint Form

RECEIVED  
2006 AUG -1 PM 1:50  
PA PUC  
SECRETARY'S BUREAU

Please print or type.

R-00061493C0550

1. CUSTOMER NAME (CO)

Your name, mailing address and service address:

er, utility account number

Name Linda Stephens

Street/P.O. Box 2043 E 19<sup>th</sup> St Apt # \_\_\_\_\_

City ERIE State PA Zip 16510

County ERIE

Area Code/HOME Phone 814 899 7159

Area Code/WORK Phone \_\_\_\_\_

Utility Account Number \_\_\_\_\_  
(from your bill)

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)

DOCUMENT FOLDER

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AUG 16 2006

317

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.

*If you have done all you can do in keeping your gas bills low, why would you want to be penalized for doing what National Fuel told you to do?*

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 pass the utility 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 LINDA STEPHENS, 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 Stephens  
(Signature)

7/30/05  
(Date)

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

AUGUST 16, 2006

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

RE: PA PUC vs. NATIONAL FUEL GAS DISTRIBUTION CORPORATION  
Docket Number R-00061493C0550

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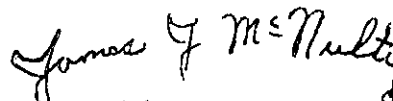
Dear Sir/Madam:

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

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

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AUG 16 2006

**DOCUMENT  
FOLDER**

**ORIGINAL**

PENNSYLVANIA PUBLIC UTILITY COMMISSION

Formal Complaint Form

RECEIVED  
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PA PUC  
SECRETARY'S BUREAU

Please print or type.

R-00061493C0551

1. CUSTOMER NAME (C)

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

Name Marilyn Johnson

Street/P.O. Box 329 Newman St Apt # \_\_\_\_\_

City Erie State Pa Zip 16507-1817

County 25<sup>th</sup>

Area Code/HOME Phone \_\_\_\_\_

Area Code/WORK Phone 814-454-3068

Utility Account Number \_\_\_\_\_  
(from your bill)

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

Name ~~1100 Hundred Blk of State St~~ National Fuel Gas Co.

Street/P.O. Box Erie 1100 Hundred Blk St-1

City Erie State Pa 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)

DOCUMENT FOLDER

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AUG 16 2006

315

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 Increase of GAS  
usage, Because of my conserving  
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 MARILYN JOHNSON, 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).

Marilyn Johnson  
(Signature)

7-30-06  
(Date)

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

AUGUST 16, 2006

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

RE: PA PUC vs. NATIONAL FUEL GAS DISTRIBUTION CORPORATION  
Docket Number R-00061493C0551

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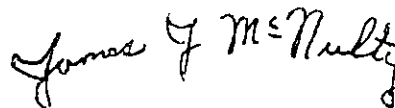
Dear Sir/Madam:

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

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

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

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

jih

**DOCKETED**  
AUG 16 2006

**DOCUMENT  
FOLDER**

# ORIGINAL

## Formal Complaint Form

RECEIVED  
2006 AUG -1 PM 1:50  
PA PUC  
SECRETARY'S BUREAU

Please print or type.

R-00061493C0552

### 1. CUSTOMER NAME (COM

Your name, mailing add.  
and service address:

; utility account number

Name Eileen PAIGE

Street/P.O. Box 2509 McCain Ave Apt # \_\_\_\_\_

City Erie State Pa Zip 16510

County ERIE

Area Code/HOME Phone 814 455-1384

Area Code/WORK Phone 814 451-7580

Utility Account Number \_\_\_\_\_  
(from your bill)

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)

DOCUMENT  
FOLDER

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AUG 16 2006

314

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:** Eileen Paule, 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).

Eileen C. Paule  
(Signature)

7-30-06  
(Date)

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

AUGUST 16, 2006

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

RE: PA PUC vs. NATIONAL FUEL GAS DISTRIBUTION CORPORATION  
Docket Number R-00061493C0552

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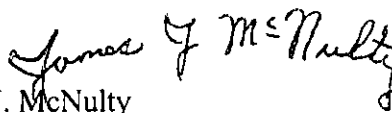
Dear Sir/Madam:

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

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

DOCUMENT  
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**DOCKETED**  
AUG 16 2006

**ORIGINAL**

Formal Complaint Form

RECEIVED  
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PA PUC  
SECRETARY'S BUREAU

Please print or type.

R-00061493C0553

1. CUSTOMER NAME (COM)

Your name, mailing add. \_\_\_\_\_, utility account number \_\_\_\_\_  
and service address:

Name Laurie Curlett

Street/P.O. Box 716 Sassafras Apt # 2W

City ERIE State PA Zip 16507

County \_\_\_\_\_

Area Code/HOME Phone 814-456-8952

Area Code/WORK Phone \_\_\_\_\_

Utility Account Number \_\_\_\_\_  
(from your bill)

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

- STEAM HEAT
- WASTE WATER
- MOTOR CARRIER  
(taxi, moving company, limousine)

TELEPHONE  
(local, long distance)

DOCUMENT FOLDER

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AUG 16 2006

312

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 #61 to Tariff Gas RA P.U.C. No. 9  
file by NATIONAL FUEL GAS DIST. CORP (NFGD) on  
May 31, 2006 and proposed to become effective  
7-30-2006 would ~~decrease~~ increase NFGD's annual  
revenues by approx. 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.

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 Laurie Curlett, 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).

Laurie Curlett  
(Signature)

7-30-2006  
(Date)

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

AUGUST 16, 2006

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

RE: PA PUC vs. NATIONAL FUEL GAS DISTRIBUTION CORPORATION  
Docket Number R-00061493C0553

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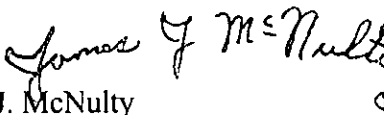
Dear Sir/Madam:

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

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**

AUG 16 2006

**DOCUMENT  
FOLDER**

# ORIGINAL

## PENNSYLVANIA PUBLIC UTILITY COMMISSION

### Formal Complaint Form

Please print or type.

R-00061493C0554

RECEIVED  
2006 AUG -1 PM 1:50  
PA PUC  
SECRETARY'S BUREAU

#### 1. CUSTOMER NAME (COM.)

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

Name HATTIE M. JOHNSON

Street/P.O. Box 1117 EAST 5TH ST. Apt # \_\_\_\_\_

City ERIE State PA Zip 16507

County ERIE

Area Code/HOME Phone 814-454-7259

Area Code/WORK Phone Ø

Utility Account Number \_\_\_\_\_  
(from your bill)

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)

DOCUMENT  
FOLDER

DOCKETED

AUG 16 2006

310

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.

BE CAUSE OF MY FIX INCOME I CAN NOT AFFORD AN INCREASE, WHEN I HAVE BEEN KEEPING MY GAS DOWN AND NOW I HAVE BEEN TOLD THAT IF I CONTINUE TO CUT DOWN ON GAS I WILL BE CHARGE MORE, I FEEL THIS

5. **RELIEF IS UNFAIR**

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

DO NOT APPROVE THE ASK FOR SERCHANGE, OR 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 HATTIE M. JOHNSON, 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).

Hattie M. Johnson  
(Signature)

7/30/06  
(Date)

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

AUGUST 16, 2006

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

RE: PA PUC vs. NATIONAL FUEL GAS DISTRIBUTION CORPORATION  
Docket Number R-00061493C0554

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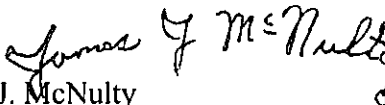
Dear Sir/Madam:

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

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

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

Very truly yours,

  
James J. McNulty  
Secretary

(SEAL)

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FOLDER**  
AUG 16 2006

# ORIGINAL

PENNSYLVANIA PUBLIC UTILITY COMMISSION

## Formal Complaint Form

RECEIVED  
2006 AUG -1 PH 1:50  
PA PUC  
SECRETARY'S BUREAU

Please print or type.

R-00061493C0555

### 1. CUSTOMER NAME (CC)

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

Name Lillian Kennedy

Street/P.O. Box 1036 West 9th Apt#

City Erie State PA Zip 16502

County Erie

Area Code/HOME Phone (814) 453-7952

Area Code/WORK Phone

Utility Account Number   
(from your bill)

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

### 3. TYPE OF UTILITY (check one)

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

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AUG 16 2006

300

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 # 61 to Tariff Gas PA P.U.C. No 7 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  
\$25,892,000 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.

- A. The PA P.U.C. should suspend and interdict the proposed tariff.
- B. Hold an evening public hearing in Erie, PA.
- C. Disallow proposed Advanced Energy Efficiency Program Cost recovery rider.

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: WILLIAM KENNEDY, 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).

William Kennedy  
(Signature)

7-29-06  
(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 <sup>nd</sup> 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

AUGUST 16, 2006

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

RE: PA PUC vs. NATIONAL FUEL GAS DISTRIBUTION CORPORATION  
Docket Number R-00061493C0555

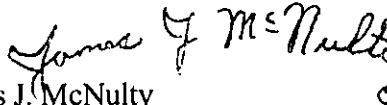
Dear Sir/Madam:

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

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

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

Very truly yours,

  
James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

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AUG 16 2006

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**ORIGINAL**

Formal Complaint Form

Please print or type.

R-00061493C0556

RECEIVED  
2006 AUG -1 PM 1:50  
PA PUC  
SECRETARY'S BUREAU

1. CUSTOMER NAME (COI)

Your name, mailing address, county, city, street, and service address: \_\_\_\_\_ er, utility account number \_\_\_\_\_

Name Umessa Booker

Street/P.O. Box 1153 W. 25th St. Apt # \_\_\_\_\_

City Erie State PA Zip 16502

County Erie

Area Code/HOME Phone 814 459-0134

Area Code/WORK Phone 871-4201 x235

Utility Account Number \_\_\_\_\_  
(from your bill)

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 Corp

3. TYPE OF UTILITY (check one)

ELECTRIC

STEAM HEAT

GAS

WASTE WATER

WATER

MOTOR CARRIER

(taxi, moving company, limousine)

TELEPHONE  
(local, long distance)

DOCUMENT FOLDER

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4 AUG 16 2006

357

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 horrible the way the utilities can be raised w/o the people being able to meet the already high utility bills

5. RELIEF

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

They need to regulate this process better. It is not right the way the gas/electric can be shut off w/o people being able to secure funds to offset payments.

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 Jamesa Booker, 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).

Jamesa Booker  
(Signature)

2/29/08  
(Date)

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

AUGUST 16, 2006

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

RE: PA PUC vs. NATIONAL FUEL GAS DISTRIBUTION CORPORATION  
Docket Number R-00061493C0556

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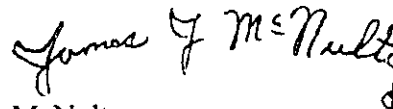
Dear Sir/Madam:

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

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

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

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

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**DOCKETED**

AUG 16 2006

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FOLDER**

# ORIGINAL

## PENNSYLVANIA PUBLIC UTILITY COMMISSION

### Formal Complaint Form

RECEIVED  
2005 AUG -1 PM 1:50  
PA PUC  
SECRETARY'S BUREAU

Please print or type.

R-00061493C0557

#### 1. CUSTOMER NAME (COMPLAINTANT)

Your name, mailing address, and service address: \_\_\_\_\_, utility account number \_\_\_\_\_

Name EARL WOODARD

Street/P.O. Box 634 MONTMARC Apt # \_\_\_\_\_

City ERIE State PA. Zip 16504

County ERIE

Area Code/HOME Phone \_\_\_\_\_

Area Code/WORK Phone \_\_\_\_\_

Utility Account Number \_\_\_\_\_  
(from your bill)

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: NFG Distribution Corp.

#### 3. TYPE OF UTILITY (check one)

ELECTRIC

STEAM HEAT

GAS

WASTE WATER

WATER

MOTOR CARRIER

(taxi, moving company, limousine)

TELEPHONE  
(local, long distance)

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AUG 16 2006

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305

**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 EARL WOODARD, 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).

Earl Woodard 7/30/06  
(Signature) (Date)

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

AUGUST 16, 2006

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

RE: PA PUC vs. NATIONAL FUEL GAS DISTRIBUTION CORPORATION  
Docket Number R-00061493C0557

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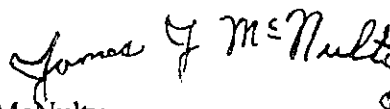
Dear Sir/Madam:

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

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

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

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

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**FOLDER**  
AUG 16 2006

# ORIGINAL

## PENNSYLVANIA PUBLIC UTILITY COMMISSION

### Formal Complaint Form

RECEIVED  
2006 AUG -1 PM 1:50  
PA PUC  
SECRETARY'S BUREAU

Please print or type.

R-00061493C0558

#### 1. CUSTOMER NAME (COI)

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

Name Aubrey A. Stevenson

Street/P.O. Box 3617 Raspberry Apt # \_\_\_\_\_

City Eno State PA Zip 16508

County Eno

Area Code/HOME Phone 814 2414

Area Code/WORK Phone \_\_\_\_\_

Utility Account Number \_\_\_\_\_  
(from your bill)

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)

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AUG 16 2006

301

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 (NFGD)  
On May 31, 2006 and proposed to become effective  
July 30, 2006 would increase NFGD annual  
revenue by 25,812,000 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.

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: Aubrey Stevenson, 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).

Aubrey Stevenson 7/20/08  
(Signature) (Date)

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

AUGUST 16, 2006

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

RE: PA PUC vs. NATIONAL FUEL GAS DISTRIBUTION CORPORATION  
Docket Number R-00061493C0558

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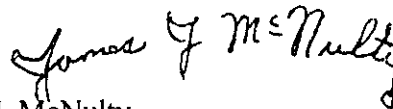
Dear Sir/Madam:

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

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

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

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

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**DOCKETED DOCUMENT**  
**FOLDER**  
AUG 16 2006

**ORIGINAL**

Formal Complaint Form

RECEIVED  
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PA PUC  
SECRETARY'S BUREAU

Please print or type.

R-00061493C0559

1. CUSTOMER NAME (CON

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

Name Margaret Richie

Street/P.O. Box 2565 W. 22 St. Apt#

City Erie State PA Zip 16506

County Erie

Area Code/HOME Phone 814-838-9853

Area Code/WORK Phone

Utility Account Number   
(from your bill)

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

STEAM HEAT

GAS

WASTE WATER

WATER

MOTOR CARRIER

TELEPHONE  
(local, long distance)

(taxi, moving company; limousine)

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AUG 16 2006

**DOCUMENT FOLDER**

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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.

**A. THE PA. P.U.C. SHOULD SUSPEND AND  
INVESTIGATE THE PROPOSED TARIFF,**

**B. HOLD AN EVENING PUBLIC HEARING  
IN ERIE, PA.**

**C. DISALLOW PROPOSED "ENHANCED ENERGY  
EFFICIENCY PROGRAM COST RECOVERY RIDER"**

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 MARGARET RICHIR, 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).

Margaret Richir  
(Signature)

7/28/06  
(Date)

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

AUGUST 16, 2006

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

RE: PA PUC vs. NATIONAL FUEL GAS DISTRIBUTION CORPORATION  
Docket Number R-00061493C0559

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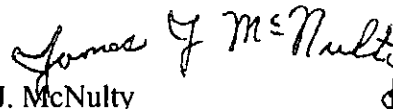
Dear Sir/Madam:

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

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

DOCUMENT  
FOLDER  
**DOCKETED**  
AUG 16 2006

# ORIGINAL

## PENNSYLVANIA PUBLIC UTILITY COMMISSION

Form UC-100

RECEIVED  
2006 AUG -1 PM 1:50  
PA PUC  
SECRETARY'S BUREAU

Please print or type.

R-00061493C0560

### 1. CUSTOMER NAME (COMP)

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

Name GLORIA SULLIVAN

Street/P.O. Box 4048 David Rd Apt # \_\_\_\_\_

City ERIE State PA Zip 16510-3202

County ERIE

Area Code/HOME Phone 814-898-1257

Area Code/WORK Phone \_\_\_\_\_

Utility Account Number 3701273-08  
(from your bill)

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

STEAM HEAT

GAS

WASTE WATER

WATER

MOTOR CARRIER

(taxi, moving company, limousine)

TELEPHONE  
(local, long distance)

DOCUMENT  
FOLDER

DOCKETED  
4

AUG 16 2006

297

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 # 61 to Tariff Gas - PA P.U.C. # 9  
filed by National Fuel Gas Distribution  
(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.

- A. The PA P.U.C. should suspend and investigate the proposed tariff
- B. Hold an evening public hearing in Erie, PA
- C. Disallow proposed "Enhanced Energy Efficiency Program Cost Recovery Rider"

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 GILORIA SULLIVAN 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).

Gloria Sullivan  
(Signature)

7-27-2006  
(Date)

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

AUGUST 16, 2006

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

RE: PA PUC vs. NATIONAL FUEL GAS DISTRIBUTION CORPORATION  
Docket Number R-00061493C0560

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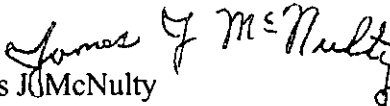
Dear Sir/Madam:

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

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

DOCUMENT  
FOLDER

**DOCKETED**  
AUG 16 2006

# ORIGINAL

## PENNSYLVANIA PUBLIC UTILITY COMMISSION

### Formal Complaint Form

RECEIVED  
2006 AUG -1 PM 1:50  
PA PUC  
SECRETARY'S BUREAU

Please print or type.

R-00061493C0561

#### 1. CUSTOMER NAME (COMPLAINTANT)

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

Name RICHARD R. ZUCK

Street/P.O. Box 1854 E. 6<sup>TH</sup> ST Apt # \_\_\_\_\_

City ERIE State PA Zip 16511-1702

County ERIE

Area Code/HOME Phone 814 454 2780

Area Code/WORK Phone 814 836 7380

Utility Account Number 4725758-10  
(from your bill)

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 GAS DISTRIBUTION CORP.

#### 3. TYPE OF UTILITY (check one)

ELECTRIC

STEAM HEAT

GAS

WASTE WATER

WATER

MOTOR CARRIER  
(taxi, moving company, limousine)

TELEPHONE  
(local, long distance)

DOCUMENT  
FOLDER

DOCKETED

4

AUG 16 2006

295

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 # 61 TO TARIFF GAS - PA. PUC # 9  
FILED BY NATIONAL FUEL GAS DISTRIBUTION CORP (NFGD) ON  
MAY 31, 2006 AND PROPOSED TO BECOME EFFECTIVE 7/30/2006  
WOULD INCREASE NFGD'S ANNUAL REVENUE BY ABOUT \$25  
MILLION DOLLARS 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.

- A. THE PA PUC SHOULD SUSPEND AND INVESTIGATE THE PROPOSED TARIFF.
- B. HOLD AN EXRNING PUBLIC HEARING IN ERIE PA
- C. DISALLOW PROPOSED "ENHANCED ENERGY EFFICIENCY PROGRAM COST RECOVERY RISK"

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: Richard P. Zuck, 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).

Richard P. Zuck  
(Signature) 7.28.06  
(Date)

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

AUGUST 16, 2006

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

RE: PA PUC vs. NATIONAL FUEL GAS DISTRIBUTION CORPORATION  
Docket Number R-00061493C0561

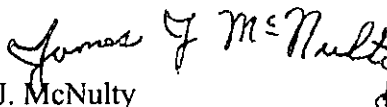
Dear Sir/Madam:

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

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**  
AUG 16 2006

**DOCUMENT  
FOLDER**

# ORIGINAL

## PENNSYLVANIA PUBLIC UTILITY COMMISSION

### Formal Complaint Form

RECEIVED  
2005 AUG -1 PM 1:50  
PA PUC  
SECRETARY'S BUREAU

Please print or type.

1. **CUSTOMER NAME (COMPI)** R-00061493C0562

Your name, mailing address  
service address:

account number and

Name Pita M. Brocke

Street/P.O. Box 2005 Woodlawn Ave. Apt # \_\_\_\_\_

City Erie State PA Zip 16510

County Erie

Area Code/HOME Phone 814-897-0376

Area Code/WORK Phone \_\_\_\_\_

Utility Account Number \_\_\_\_\_  
(from your bill)

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)**

- |  |   |
|--|---|
| <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<br>(taxi, moving company, limousine) |
| <input type="checkbox"/> TELEPHONE<br>(local, long distance) |   |

**DOCUMENT  
FOLDER**

**DOCKETED**

AUG 16 2006

294

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 Corp. (NFGD) on 5-31-06  
and proposed 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.

- A. The PA P.U.C. should suspend and investigate the proposed tariff.
- B. Hold an evening public hearing in Erie, PA
- C. Disallow proposed "Enhanced energy efficiency program cost recovery rider."

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 Rita M. Brocke, 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).

Rita M. Brocke (Signature) 7-28-06 (Date)

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

AUGUST 16, 2006

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

RE: PA PUC vs. NATIONAL FUEL GAS DISTRIBUTION CORPORATION  
Docket Number R-00061493C0562

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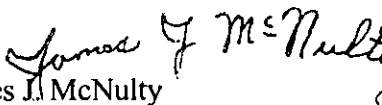
Dear Sir/Madam:

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

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** **DOCUMENT**  
**FOLDER**  
AUG 16 2006

# ORIGINAL

## PENNSYLVANIA PUBLIC UTILITY COMMISSION

### Formal Complaint Form

RECEIVED  
2006 AUG -1 PM 1:51  
PA PUC  
SECRETARY'S BUREAU

Please print or type.

1. CUSTOMER NAME (COMP <sup>R-00061493C0563</sup>)

Your name, mailing address  
service address:

/ account number and

Name Paul Letkiewicz

Street/P.O. Box 1830 W 35th Apt # \_\_\_\_\_

City Erie State PA Zip 16508

County Erie

Area Code/HOME Phone 814 864 3357

Area Code/WORK Phone 814 836 7382

Utility Account Number 4380692-09  
(from your bill)

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

STEAM HEAT

GAS

WASTE WATER

WATER

MOTOR CARRIER

(taxi, moving company, limousine)

TELEPHONE  
(local, long distance)

DOCUMENT  
FOLDER

DOCKETED

AUG 16 2006

293

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. 41 to tariff GAS-PA.  
P.U.C. No. 9 Filed by National Fuel Gas  
Distribution Corporation (NFGD) ON MAY 31, 2004 AND  
PROPOSED TO BECOME EFFECTIVE JULY 30, 2004 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.

A. The PA. P.U.C. should suspend and investigate the proposed tariff.

B. Hold an evening public hearing in Erie PA

C. Disallow proposed "Enhanced Energy Efficiency Program cost recovery rider"

**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 Paul Lekiewicz, 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).

Paul Lekiewicz  
(Signature)

27 July 06  
(Date)

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

AUGUST 16, 2006

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

RE: PA PUC vs. NATIONAL FUEL GAS DISTRIBUTION CORPORATION  
Docket Number R-00061493C0563

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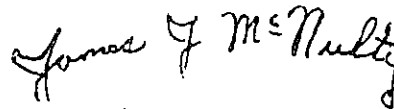
Dear Sir/Madam:

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

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**

AUG 16 2006

**DOCUMENT  
FOLDER**

**ORIGINAL**

Formal Complaint Form

RECEIVED  
2006 AUG -1 PM 1:51  
PA PUC  
SECRETARY'S BUREAU

Please print or type.

1. CUSTOMER NAME (COI) <sup>R-00061493C0564</sup>

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

Name Maria D-Woodard

Street/P.O. Box 1207 W. 26th St Apt # \_\_\_\_\_

City Erie State Pa Zip 16508

County Erie

Area Code/HOME Phone 814-480-868261

Area Code/WORK Phone 814-870-2578

Utility Account Number \_\_\_\_\_  
(from your bill)

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 Distributors Corp.

3. TYPE OF UTILITY (check one)

ELECTRIC

STEAM HEAT

GAS

WASTE WATER

WATER

MOTOR CARRIER

(taxi, moving company, limousine)

TELEPHONE  
(local, long distance)

DOCUMENT  
FOLDER

DOCKETED

AUG 16 2006

292

**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.



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

AUGUST 16, 2006

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

RE: PA PUC vs. NATIONAL FUEL GAS DISTRIBUTION CORPORATION  
Docket Number R-00061493C0564

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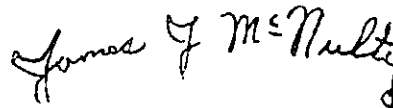
Dear Sir/Madam:

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

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** **DOCUMENT**  
**FOLDER**  
AUG 16 2006

# ORIGINAL

## Formal Complaint Form

RECEIVED  
2006 AUG -1 PM 1:51  
PA PUC  
SECRETARY'S BUREAU

Please print or type.

1. CUSTOMER NAME (C. R-00061493C0565)

Your name, mailing a service address:

utility account number and

Name JOSEPH DiBUONIO

Street/P.O. Box 3309 DAVISON Apt # \_\_\_\_\_

City ERIE State Pa Zip 16504

County ERIE

Area Code/HOME Phone (514) 456-5114

Area Code/WORK Phone \_\_\_\_\_

Utility Account Number \_\_\_\_\_  
(from your bill)

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

STEAM HEAT

GAS

WASTE WATER

WATER

MOTOR CARRIER

(taxi, moving company, limousine)

TELEPHONE  
(local, long distance)

DOCUMENT FOLDER

DOCKETED

AUG 16 2006

291

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.

- A. The PA. P.U.C. should suspend AND  
INVESTIGATE the proposed TARIFF
- B - HOLD AN EVENING PUBLIC HEARING IN EDINBURGH, PA
- C - DISALLOW proposed "ENHANCE & ENERGY  
EFFICIENCY PROGRAM COST RECOVERY RIDER"

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 JOSEPH DIBUONDI, 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).

Joseph Dibondi  
(Signature)

7-28-06  
(Date)

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

AUGUST 16, 2006

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

RE: PA PUC vs. NATIONAL FUEL GAS DISTRIBUTION CORPORATION  
Docket Number R-00061493C0565

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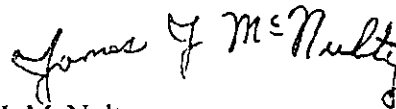
Dear Sir/Madam:

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

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

DOCUMENT  
FOLDER

**DOCKETED**

AUG 16 2006

**ORIGINAL** PENNSYLVANIA PUBLIC UTILITY COMMISSION  
Formal Complaint Form

RECEIVED  
2006 AUG -1 PM 1:51  
PA PUC  
SECRETARY'S BUREAU

Please print or type.

R-00061493C0566

1. CUSTOMER NAME (COMF)

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

Name Podg, Carter

Street/P.O. Box 331 E 22nd st Apt # \_\_\_\_\_

City Erie State Pa Zip 16503

County Erie

Area Code/HOME Phone 814 452-1347

Area Code/WORK Phone \_\_\_\_\_

Utility Account Number \_\_\_\_\_  
(from your bill)

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<br>(taxi, moving company, limousine) |
| <input type="checkbox"/> TELEPHONE<br>(local, long distance) |   |

DOCUMENT FOLDER

DOCKETED

AUG 16 2006

289

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.

3 medical extensions throughout a lifetime is not enough

5. **RELIEF**

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

each circumstance should be reviewed for its particular situation and reviewed fairly

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 Podg; Garter, 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).

Podg; Garter (Signature) 7-30-06 (Date)

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

AUGUST 16, 2006

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

RE: PA PUC vs. NATIONAL FUEL GAS DISTRIBUTION CORPORATION  
Docket Number R-00061493C0566

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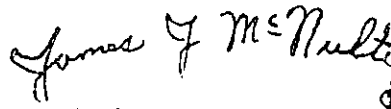
Dear Sir/Madam:

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

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** **DOCUMENT**  
**FOLDER**  
AUG 16 2006

PENNSYLVANIA PUBLIC UTILITY COMMISSION

**ORIGINAL**

Formal Complaint Form

Please print or type.

RECEIVED  
2006 AUG -1 PM 1:51  
PA PUC  
SECRETARY'S BUREAU

1. CUSTOMER NAME (CC) <sup>R-00061493C0567</sup>

Your name, mailing a  
and service address:

er, utility account number

Name CHARLES T. MYERS

Street/P.O. Box 2139 GLENDALE BLVD Apt # \_\_\_\_\_

City ENF State PA Zip 16510

County CRUIS

Area Code/HOME Phone 814-898-2658

Area Code/WORK Phone 814-825-3460

Utility Account Number \_\_\_\_\_  
(from your bill)

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: NEG

3. TYPE OF UTILITY (check one)

ELECTRIC

STEAM HEAT

GAS

WASTE WATER

WATER

MOTOR CARRIER

(taxi, moving company, limousine)

TELEPHONE  
(local, long distance)

DOCUMENT  
FOLDER

DOCKETED

AUG 16 2006

288

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 SHOULD NOT BE CHARGED ~~ANY~~ <sup>ANY ADDITIONAL</sup> FEE BECAUSE I CONSERVED GAS. IT IS UNFAIR ~~ESPECIALLY~~ ESPECIALLY AFTER A 40% 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.

*LET THEM CONSERVE & SPEND LESS!*

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)

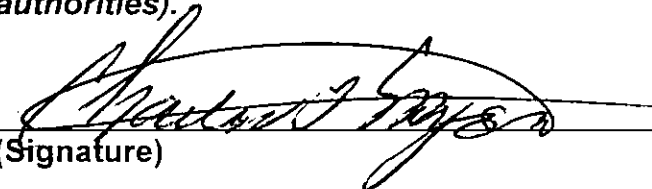
NO

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 CHRISTOPHER T. MYERS, 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)

7/30/12  
(Date)

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

AUGUST 16, 2006

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

RE: PA PUC vs. NATIONAL FUEL GAS DISTRIBUTION CORPORATION  
Docket Number R-00061493C0567

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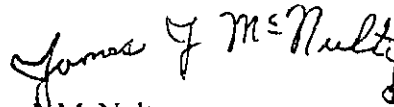
Dear Sir/Madam:

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

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

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

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

jih

**DOCKETED**  
AUG 16 2006

**DOCUMENT  
FOLDER**

**ORIGINAL**

Formal Complaint Form

RECEIVED  
2006 AUG -1 PM 1:51  
PA PUC  
SECRETARY'S BUREAU

Please print or type.

R-00061493C0568

1. CUSTOMER NAME (CC)

Your name, mailing address, and service address:

Number, utility account number

Name Darlene Johnson

Street/P.O. Box 2909 BURTON AVE Apt # \_\_\_\_\_

City ERIE State PA Zip 16504

County ERIE

Area Code/HOME Phone 814 - 455 - 2048

Area Code/WORK Phone 814 - 453 - 4909

Utility Account Number \_\_\_\_\_  
(from your bill)

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 Distrib Corp

3. TYPE OF UTILITY (check one)

ELECTRIC

STEAM HEAT

GAS

WASTE WATER

**DOCUMENT FOLDER**

WATER

MOTOR CARRIER

(taxi, moving company, limousine)

TELEPHONE  
(local, long distance)

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4 AUG 16 2006

286

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 Corp on May 31, 2006 and proposed to become effective July 30, 2006 would increase NFGDs annual revenues by approx \$25,892 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.

- A. The PA P.U.C. should suspend and investigate the proposed tariff.
- B. Hold an evening public hearing in Erie, PA
- C. Disallow proposed "Enhanced Energy Efficiency Program Cost Recovery Rider"

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:** Darlene Y Johnson, 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).

Darlene Y Johnson 7/30/06  
(Signature) (Date)

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

AUGUST 16, 2006

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

RE: PA PUC vs. NATIONAL FUEL GAS DISTRIBUTION CORPORATION  
Docket Number R-00061493C0568

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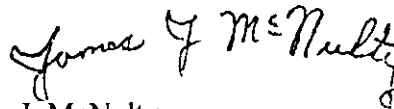
Dear Sir/Madam:

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

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

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

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

jih

**DOCKETED**  
AUG 16 2006

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FOLDER**

# ORIGINAL

## PENNSYLVANIA PUBLIC UTILITY COMMISSION

### Formal Complaint Form

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2006 AUG -1 PH 1:51  
PA PUC  
SECRETARY'S BUREAU

Please print or type.

R-00061493C0569

#### 1. CUSTOMER NAME (COMPLAINTANT)

Your name, mailing address, telephone number, and service address: \_\_\_\_\_  
r, utility account number \_\_\_\_\_

Name Beverly Joyce

Street/P.O. Box 2215 Glendale Ave. Apt # \_\_\_\_\_

City Erie State PA Zip 16510

County Erie

Area Code/HOME Phone (814) 899-0804

Area Code/WORK Phone (814) 860-5692

Utility Account Number \_\_\_\_\_  
(from your bill)

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)

- |  |   |
|--|---|
| <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<br>(taxi, moving company, limousine) |
| <input type="checkbox"/> TELEPHONE<br>(local, long distance) |   |

DOCUMENT FOLDER

DOCKETED

AUG 17 2006

285

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 NFGD*

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 PUC should suspend & investigate the proposed tariff.*
- B) Hold an evening Public Hearing in Erie, PA*
- C. Disallow proposed "Enhanced Energy Efficiency Program Cost Relief Rider"*

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:** Beverly A. Joyce, 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).

Beverly A. Joyce  
(Signature)

7/30/06  
(Date)

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

AUGUST 16, 2006

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

RE: PA PUC vs. NATIONAL FUEL GAS DISTRIBUTION CORPORATION  
Docket Number R-00061493C0569

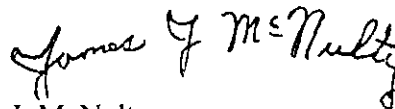
Dear Sir/Madam:

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

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**

AUG 17 2006

**DOCUMENT  
FOLDER**

# ORIGINAL

## PENNSYLVANIA PUBLIC UTILITY COMMISSION

### Formal Complaint Form

RECEIVED  
2006 AUG -1 PM 1:51  
PA PUC  
SECRETARY'S BUREAU

Please print or type.

R-00061493C0570

#### 1. CUSTOMER NAME (COMPLAINANT)

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

Name Jeanette MYERS

Street/P.O. Box 642 E 8th St Apt # \_\_\_\_\_

City Erie State Pa Zip 16583

County ERIE

Area Code/HOME Phone \_\_\_\_\_

Area Code/WORK Phone \_\_\_\_\_

Utility Account Number \_\_\_\_\_  
(from your bill)

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)

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FOLDER

ROCKETED

AUG 17 2006

280

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 Corporation (NFGD) on May 31, 2006 and proposed to become effective July 30, 2006 would increase NFGD's annual revenues by approximately 25,812,000 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.

- (A) The Pa. PUC should suspend and investigate the proposed tariff
- (B) Hold an evening public hearing in Erie Pa
- (C) Disallow proposed "Enhanced Energy Efficiency Program Cost Recovery Rider"

Jeannette

**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 Jeaneette Myers, 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).

Jeaneette Myers 7-30-2006  
(Signature) (Date)

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

AUGUST 16, 2006

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

RE: PA PUC vs. NATIONAL FUEL GAS DISTRIBUTION CORPORATION  
Docket Number R-00061493C0570

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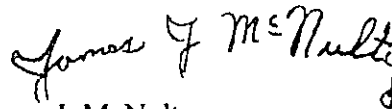
Dear Sir/Madam:

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

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

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

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

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DOCUMENT  
FOLDER

DOCKETED

AUG 17 2006

**ORIGINAL**

PENNSYLVANIA PUBLIC UTILITY COMMISSION

Formal Complaint Form

Please print or type.

R-00061493C0571

RECEIVED  
2006 AUG -1 PH 1:51  
PA PUC  
SECRETARY'S BUREAU

1. CUSTOMER NAME (COM)

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

Name Gloria McClellan

Street/P.O. Box 927 E. 5th St. Apt # \_\_\_\_\_

City Erie State PA Zip 16507

County Erie

Area Code/HOME Phone 814-455-1444

Area Code/WORK Phone \_\_\_\_\_

Utility Account Number \_\_\_\_\_  
(from your bill)

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: AKG Distribution Corp.

3. TYPE OF UTILITY (check one)

ELECTRIC

STEAM HEAT

GAS

WASTE WATER

WATER

MOTOR CARRIER

(taxi, moving company, limousine)

TELEPHONE  
(local, long distance)

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AUG 17 2006

278

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 Corp. (NFGD) on May 31, 06 and proposed to become effective July 30, 06 would increase NFGD's annual revenues by approx. 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.

- A. The PA, P.U.C. should suspend and investigate the proposed tariffs.
- B. Hold an evening public hearing in Erie PA
- C. Disallow proposed "Enhanced Energy Efficiency Program Cost Recovery Rider"

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 Gloria McClellan, 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).

Gloria McClellan  
(Signature)

7-30-06  
(Date)

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

AUGUST 16, 2006

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

RE: PA PUC vs. NATIONAL FUEL GAS DISTRIBUTION CORPORATION  
Docket Number R-00061493C0571

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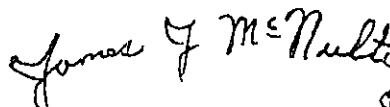
Dear Sir/Madam:

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

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

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

Very truly yours,



James J. McNulty  
Secretary

(SEAL)

Certified Mail  
Return Receipt Requested

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**DOCKETED** **DOCUMENT**  
**FOLDER**  
AUG 17 2006

PENNSYLVANIA PUBLIC UTILITY COMMISSION

R-00061493C0572

Lyn Darby

RECEIVED  
2006 AUG -1 PM 1:50  
PA PUC  
SECRETARY'S BUREAU

Please print or type.

1. CUSTOMER NAME (COMPLAINANT)

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

Name Lyn Darby

Street/P.O. Box 543 E. 37th Apt # \_\_\_\_\_

City Erie State PA Zip 16504

County Erie

Area Code/HOME Phone 814 824-5994

Area Code/WORK Phone 814 870-4215

Utility Account Number \_\_\_\_\_  
(from your bill)

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) National Fuel Gas

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)

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FOLDER

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AUG 17 2006

345

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. *Oppose surcharge because of limited*  
(explain) *use.*

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.

*National Fuel should not be allowed to surcharge customers who for whatever reason limit consumption of gas use. Customers know their budgets and if customers <sup>feel</sup> they need to limit gas consumption because of budgetary reasons National Fuel is showing its greed by wanting to surcharge such customers. How*

Save this Corporation which is  
profitable ~~steal~~ Usurp Money  
from those who live on fixed  
Income or from those who  
cannot make ends meet already.

This does smack of Corporate  
greed to the 7<sup>th</sup> degree.

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 Lyn Darby, 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).

Lyn Darby  
(Signature)

July 30, 06  
(Date)

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

AUGUST 16, 2006

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

RE: PA PUC vs National Fuel Gas  
Docket Number R-00061493C0572

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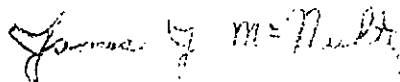
Dear Sir/Madam:

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

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

**DOCUMENT  
FOLDER**

(SEAL)

Certified Mail  
Return Receipt Requested

ddi

**DOCKETED**  
AUG 17 2006