

Exceptions of Complainant.
Angela de León
F-2012-228 7367.

Phone # 484-366-9874
Can be reach.

Thank you.

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PA PUBLIC UTILITY COMMISSION
SECRETARY'S BUREAU

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To: Whom it may concern:

Reference: Exhibits / Decision.

I'm requesting a Review of my Exhibits due to inconsistencies in the Goutial Decision that, was rendered by the Administrative Law Judge Cynthia W. Ford. These are some inconsistencies. Please review.

① They said I wasn't enrolled in the Cap-program in 2012 please review all the Bill statement for 2012 January through March. (message center on the bills)

② Please review page 11 on the initial decision
A= Jan. 2009 bill issue date 1/26/2009 -
Actual bill was 402.81, payment made \$290.00
and they have amount payment paid blank 0
and the \$290.00 was place in Budget Amount.

October they said amount paid \$259.00.
amount that was paid \$ 204.00

Nov. 2009,
on January 2010 Bill amount due \$189.00
they said I paid 204.00 May 2010 I pay \$235.00
they said \$189.00, June 2010 I pay 217.00
they said I paid \$235.00 Sept. 2010 I paid
\$293.00 they said \$211.00

Please review Jan. 2009 through December 2010.
page 11 from Goutial Decision page.

Please review exhibit #3
payment agreement history by Peco, att.
I'm currently paying this amount \$16.67
for (60) monthly.

4/11/2011 \$13.82 said is not kept because
they did replace it with the \$16.67 and
5 payments have been made by me when
it started look at Bills.

Please look at exhibits 1- through 12 from
Peco. There is a \$15.49 amount written
by hand included that, never was
presented in any bill statement to be paid.
"There is another exhibit by Peco dated
Feb. 26/2013 and, Feb. 27 with show
exhibit (payment agreement history for just
\$16.67 (60 monthly payments. (Active) and
13.82 " " " (Not kept.)
missing the \$15.49. Please review (the incon-
sistencies etc.

(27)

Bill date 8/20/14; is for
\$ 207.67.

I did called to be removed from
Budget Billing since at the hearing
with Judge Cynthia Williams Fordham

Pecoy att. Ms. Lee and her witness
also Leung said no one is force to be on the
budget billing also, because my bill
amount was \$58.17 Total New Charges
Gas \$10.00, Electric 48.17 and

Budget Billing amount was \$191.00
and they said I couldn't because, I owed \$400.00 biller.

This bill date was included in the Exhibits
Bill 8/20/14. Should not be included in this
decision due to last hearing was on March 26/2013
by judge Fordham.

On March 26/2013. Hearing with
Judge Fordham, she did mention to
us Ms. Lee and I saw, is 12 exhibits,
then she said or ask how many exhibits
it is? I responded 12 exhibits your Honor
she Ms. Lee said 13th, I reply is 12th -
exhibits. During Ms. Lee questioning or
witness she got up and put a package
on my table and kept walking to her
witness to give her something.
After the case or hearing was over she
never pick it up and it stayed there
I started put in away my papers the judge
had left the reporter, my daughter and I
was putting away my papers, when I look
at the package is was exhibit 13 that
was never presented to Judge Conrad
Johnson and my self before the hearing
I called next day and told Judge Fordham
assistant about the incident to report it
to the judge. Know this exhibit is in-
cluded in the final decision as Exhibit 13
Please (inquire) inquire why she never
presented it to the court.

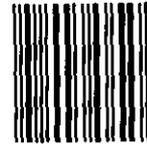
If you will like to reach me
Phone # 484-366-9874.
Ms. Angela de León.

Thank you in advance for giving
this case another review, because there
is a lot of discrepancies.

PRIORITY MAIL EXPRESS



1007



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SEP 22, 15
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\$16.95

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Project, DeLeon
510 Leech Street
1117 W. 1114/4

PAYMENT BY ACCOUNT (If applicable)

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Secretary
PA Public Utility Commission
400 North Street
Spring Mill Health K. Y. Stinebuis
2nd Floor - Harrisburg, PA 17120

ORIGIN (POSTAL SERVICE USE ONLY)

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PO ZIP Code 19464	Scheduled Delivery Date (MM/DD/YY) 09/23/15	Postage \$ 16.95	
Date Accepted (MM/DD/YY) 09/22/15	Scheduled Delivery Time <input type="checkbox"/> 10:30 AM <input type="checkbox"/> 3:00 PM <input checked="" type="checkbox"/> 12:00 NOON	Insurance Fee \$	COD Fee \$
Time Accepted 3:46 <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	10:30 AM Delivery Fee \$	Return Receipt Fee \$	Live Animal Transportation Fee \$
Weight <input type="checkbox"/> Flat Rate lbs. 2.025	Sunday/Holiday Premium Fee \$	Total Postage & Fees \$ 16.95	
DELIVERY (POSTAL SERVICE USE ONLY)			
Delivery Attempt (MM/DD/YY)	Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature	
Delivery Attempt (MM/DD/YY)	Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature	

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