

OALJ Hearing Report

Please Check Those Blocks Which Apply

Docket No.:	C-20055344		YES	NO
Case Name:	Jeannie Swartz	Prehearing Held:	<input type="checkbox"/>	<input type="checkbox"/>
	v.	Hearing Held:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	West Penn Power Company	Testimony Taken:	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Location:	Pittsburgh	Transcript Due:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Date:	December 20, 2005	Hearing Concluded:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
ALJ:	Robert P. Meehan	Further Hearing Needed:	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Reporting Firm:	Commonwealth Reporting	Estimated Add'l Days:		
<p align="center">RECEIVED</p> <p align="center">JAN - 8 2006</p> <p align="center">PA PUBLIC UTILITY COMMISSION SECRETARY'S BUREAU PLEASE PRINT CLEARLY - Incomplete Information may result in delay of processing.</p>		RECORD CLOSED:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
		DATE:	12-20-05	
		Briefs to be Filed:	<input type="checkbox"/>	<input type="checkbox"/>
		DATE:		
		Bench Decision:	<input type="checkbox"/>	<input type="checkbox"/>
		REMARKS:		

**DOCUMENT
FOLDER**

Name and Telephone Number	Address			Who are you representing?
Jeannie Swartz	2030 Kimball Avenue			Complainant <i>pro se</i>
	City Arnold	State PA	Zip 15068	
Telephone: 724-212-3677	E-mail Address:			Fax Number:
John L. Munsch, Esq.	800 West Cabin Hill Drive			Respondent
	City Greensburg	State PA	Zip 15601-1689	
Telephone: 724-838-6210	E-mail Address:			Fax Number:
	City	State	Zip	
Telephone:	E-mail Address:			Fax Number:

Check this box if additional parties or attendees appear on back of form.

12/27/05 *elp*

Lois R. Mullen
Reporter's Signature

Note: Completion of this form does not constitute an entry of appearance, see 52 Pa. Code §§1.24 and 1.25.