

**BEFORE THE
PENNSYLVANIA PUBLIC UTILITY COMMISSION
Office of the Administrative Law Judge
801 Market Street, 4th Floor, Suite 4063
Philadelphia, PA 19107**

BEFORE: ALJ ANGELA T. JONES

Mindy Jaye Zied, and) F-2015-2500342
Binnie A. Zied, *Complainants*)
v.) related case:
PECO Energy Company,) (P-2015-2520474 - April 21, 2016)
(an Exelon Corp.), *Respondents*)
_____)

**COMPLAINANTS REPLY TO PECO'S 1/5/2017 OPPOSITION
TO COMPLAINANT'S MOTION FOR A DISABILITY
ACCOMMODATION REQUEST OR CERTIFICATION TO THE
COMMONWEALTH COURT OF PENNSYLVANIA FOR
RESOLUTION OF THIS QUESTION - W Opposition to
PECO's Newly Raised Argument**

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PA PUBLIC UTILITY COMMISSION
SECRETARY'S BUREAU

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DATE: January 8, 2017

JAN 08 2017

INTRODUCTIONPA PUBLIC UTILITY COMMISSION
SECRETARY'S BUREAU

On December 23, 2016, the Complainants made their second request for a disability accommodation.

After review of the attachments, it appears that the Office of Administrative Law Judge(s), at P. O. Box 3265, Harrisburg, PA 17105-3265 rescheduled the telephone hearing on November 17, 2016, because it appears that ALJ Jones was copied this particular notice. (see Complainant's December 23, 2016 Motion, Exhibit #1)

In a document dated January 5, 2017, received on January 7, 2017, PECO opposed the Complainants' Motion for various reasons, which Complainants claim is completely non-meritorious, and overall is contradictory to the Exhibits attached to the Motion, and the Motion itself.

PECO claims that "On December 27, 2016 PECO was served with the above named Motion in the docket listed above", which is misleading at best.

The tracking information that the Complainants' possess, which was sent to Shawane L. Lee (PECO's Attorney) by the United States Postal Service Tracking Number: #9505-5000-0388-6358-0000-54. The United States Postal Service indicates that the December 23, 2016 document was delivered to the address of record to Ms. Lee by the USPS on December 24, 2016 at 2:30 p.m.

This response will address the newly submitted information by PECO pertaining to Page 4 of their document, and their failure to address the other relief requested by

Complainants' in that particular motion.

RELIEF REQUESTED

Not only in the caption of the Complainants Motion did the Complainants request that this tribunal refer and certify a question to the Commonwealth Court of Pennsylvania the question as to whether or not the "written record" opposed to a "telephonic hearing" was in fact a reasonable accommodation request made by the Complainants, but PECO has not opposed nor objected to this particular relief requested by Mindy J. Zied or 98 year old Binnie A. Zied. Not only should this question be certified by the Commonwealth Court of Pennsylvania, but the entire record should be forwarded to the Commonwealth, including the P-2015-2520474 - April 21, 2016 decision rendered by the Commission, in order for the Commonwealth Court of Pennsylvania to completely understand the question at issue.

The Complainants clearly presented the following on pages 3 and page 4 of their Motion, which has gone unopposed by PECO. They stated the following:

CERTIFICATION TO THE COMMONWEALTH COURT OF PA

"Due to the fact that this Office is having a problem with understanding the disabilities of the Complainants', and the law, rules and regulations which comprise of both the American with Disabilities Act of 1990 and the Rehabilitation Act of 1973, et. seq. as amended, it is requested that should this accommodation request be denied, that this office refer this question to the Commonwealth Court of Pennsylvania for review and decision pertaining to their disability accommodation request.

It is a strong belief of the Complainants that as cited before, all of the documentation which has already been submitted supports the Complainants request for relief, and that the documentation adequately sets forth the facts that show that the Complainants deserve relief for the violations which took place by P.E.C.O.

The Question to be Certified is as follows:

Whether in the Commonwealth of Pennsylvania in order to be in compliance with the American with Disabilities Act of 1990, et. seq., (as amended) - 42 U.S.C. § 12132, an in-person or telephonic hearing can be waived by a self-represented individual and/or individuals who are impaired by permanent non-physical disability(s), to include but are not limited to communication difficulties, and/or by a 98 year old individual who not only suffers from health problems, but cannot hear via telephone, which would allow the merits of the complaint to be heard based solely on the paperwork submitted, as an alternative form of communication/accommodation request to either the disability(s) in question and/or the age and/or physical health of that elderly self-represented complainant(s)."

ARGUMENT

Treating Psychiatrist, Dr. Camilla P. Clark

PECO argued that Ms. Zied's Psychiatrist who practices in the State of California, and can no longer treat Ms. Zied because Ms. Zied resides in Philadelphia, that in her letter, dated June 2, 1999 that Dr. Clark did not say that Ms. Zied could not communicate telephonically.

PECO misses the sentence of Dr. Clark which Ms. Zied based her Motion upon, and that sentences were:

"...Ms. Zied-Campbell experiences severe mood swings ranging from mania to severe depressive episodes."Often times people who are clinically depressed experience..... **inability to focus/concentrate...**"

It is important to note that Ms. Zied has been paid for her "disability" from the Social Security Administration based in part upon Dr. Camilla P. Clark's medical assessment of Ms. Zied to California Psychiatrist, Dr. Michael Skopek who approved Ms. Zied's disability at which time she has been paid for that disability from that time forward

by the SSA, although the actual onset date is still being disputed, and presently on appeal.

NO UNDUE BURDEN OR FUNDAMENTAL ALTERATION OF THE PROGRAM

PECO has not argued nor have they provided that the request accommodation by the Complainants that their request meets the criteria of an “undue burden”, or that it is a fundamental alteration of the program. But, even if they have, as asserted by Zied in the Motion, the Department of Justice has stated that (pg. 16) “the public entity still has an obligation to provide an alternative aid or service that provides effective communication if one is available.”

PECO’S ASSESSMENT OF THE MEDICAL NOTE WRITTEN ON 7/6/1973 (page 70 of the Attachments to the Complainant’s Motion)

PECO (pg. 3):

“The remaining medical note (p. 70) written in 1973 merely discusses treatment Ms. Zied received after after tragic events that occurred in 1972. These notes do not prove that Ms. Zied is unable to participate in a hearing or has an ongoing mental disability.”

Well, I guess its a good thing that PECO’s Attorney is not an actual “medical doctor”, because anyone in the medical field who reads the following and makes the aforementioned statement is not only insensitive to persons with mental disabilities but is completely ignorant as to the effects of electro-shock treatments, if she even knows or understands what those treatments are! Keep in mind that Complainant Zied was 18.

(pg. 70 of the Motion):

“She was worked up for electro-shock and she underwent 7 treatments...

It is to be noted, however that she still appeared to having a thinking disorder at the time of discharge.”

PECO also missed page 68 which was a “**COURT ORDER**”, issued on May 30, 1974, which was signed by the Court of Common Pleas of Philadelphia County, which was written and identified as a “**REPORT OF MASTER IN MENTAL HEALTH**” after getting confirmation by two of Ms. Zied’s treating Psychiatrists, and other testimony, who on this day stated with the box checked off that says under “**FINDING**”:

X That is consideration of the testimonies presented, your MASTER finds MINDY ZIED, above named Respondent, to be mentally disabled within the meaning of this Act.

PECO stated (bottom of page 3) “Indeed, Ms. Zied’s actions during this matter prove the converse and demonstrate that she has the mental ability to participate in a telephonic hearing.”

PECO provides no expert testimony by any Psychiatrist which is a specialist in mental disability(s), and as previously stated, PECO and/or their Attorney are not medical doctors, and are unable to assess Ms. Zied’s ability or non-ability to participate in a telephonic hearing, or as to what mental abilities that Ms. Zied does or does not have.

NEW INFORMATION BY PECO ADDRESSING/ATTACKING MS. ZIED’S WRITING ABILITY

The Opposition that PECO has supplied shows how many people are unaware of the varieties of impairments that persons with “invisible disabilities” have.

It is a sad situation, but unfortunately for many many disabled individuals it rings

true on so many levels, and it is the opinion of Mindy J. Zied that this view should be highly intolerable by all of us.

Now, other than the fact that both the Complainants disagree with EVERYTHING else that PECO has asserted in their opposition, this is what the Complainants will address the following that PECO has asserted on page 4, which is a new argument on their part, and it has never been a necessity to address the “written submissions” of Mindy J. Zied prior to this point, because that was the whole basis to her argument, that she is in fact able to provide her submissions “in writing” opposed to verbal communication which causes her an inability to concentrate, an inability to focus, and to lose her thought, and a tendency to speak in a rapid manner, and sometimes in an incoherent one, as she has been many times been told by different entities.

PECO: (pg. 4 of their 1/5/2017 document)

“PECO believes it is important to understand exactly what Ms. Zied has accomplished during the time that she has litigated this formal complaint claiming to have a mental disability. On or about August 2015, Ms. Zied drafted and filed a 115 page formal complaint and organized 27 exhibits to support her complaint. She drafted and filed an extensive Motion for Summary Judgment with supporting exhibits and filed a Second Motion for an Immediate Decision. On December 22, 2015, Ms. Zied drafted a 17 page Petition for Interlocutory Appeal with supporting exhibits. On May 5, 2016, Ms. Zied drafted a Response to the Commission’s Order on the Petition for Interlocutory Appeal. On May 18, 2016, Ms. Zied drafted a Motion for Recusal of Administrative Law Judge Angela T. Jones. On June 16, 2016, Ms. Zied filed a Motion for Relief, alleging that PECO had failed to comply with an Order. Now, she has filed the current Motion Renewing her petition for Accommodation under the American with Disabilities Act. Clearly, the level and number of concise pleadings filed, should, at a minimum raise questions about whether Ms. Zied can reasonably claim that she is not mentally competent to participate in a hearing. This in turn raises questions as to whether she actually has

a disability and if so, how much accommodation must be made to that disability. It is evident here that if Ms. Zied does have a current mental impairment, thus far, it is clearly not limiting her ability to participate in this formal complaint litigation.”

Ms. Zied never claimed to be mentally incompetent, nor has PECO pointed to anywhere in the record where she ever stated this.

Now, attached here is a document which was submitted to the Social Security Administration on June 28, 1995 which addresses how and why Ms. Zied “writes excessively”. (see here Attachment A), which in part says: “I like to write, it releases my anger.”

I think it is important, since PECO challenges Ms. Zied’s disability, what the Attorney’s for the Commonwealth of Pennsylvania wrote as an affirmative statement to the United States District Court for the Middle District of Pennsylvania in USDC Md Pa Case #1:04-cv-000026-YK, where Ms. Zied was not only a plaintiff in that particular case, but at the time this was written, Ms. Zied had been represented by Counsel:

(Document filed on 1/13/2006 by the State in the aforementioned case):

DEFENDENTS STATEMENT OF UNDISPUTED AND MATERIAL FACTS.....

Case 1:04-cv-00026-YK Document 69 Filed 01/13/2006 Page 7 of 26

¶25. Plaintiff has bipolar disorder, paranoid disorder, agoraphobia, sleep disorder, and schizoaffective disorder.....

¶26. Due to her psychological conditions, plaintiff cannot work a full-time job, has difficulty communicating, has periods of depression, reacts differently than someone else who would receive mail, gets overwhelmed easily, tires often, has more mood swings than someone else, thinks rapidly, has difficulty leaving the house, and believes that sometimes she is being followed.....

The following was submitted to the Federal Court of Appeals in USCA 3rd Circuit Case #14-4556 on 8/8/2016, which will shed light as to the other “impairment” that Ms. Zied has, that of “Hyper-graphia”.

Ms. Zied-Campbell's Hyper-graphia

(page 9 of the 8/8/2016 submission to the Appellate Court, all which went unopposed by the Social Security Administration):

In - USDC Md Pa Case #06-cv-02305 (Zied v. Barnhart, et.al) Pgs. 17-18 on 12/8/2009:

“Exhibit #2 is presented to explain what Hypergraphia is, and how it is the insatiable desire for one to write, and it also a product of persons with Bipolar Disorder. (see here, Exhibit #3, Dr. Clark’s letter June 2, 1999- pertaining to plaintiff Zied’s Bipolar Disorder and Exhibit #8 - Medical Notes from Psychologist Madeline Rosario County Mental Health, also pertaining to plaintiff Zied’s Bipolar Disorder)

In - USDC Md Pa Case #06-cv-01219 (Zied v. Astrue)- Amended Complaint - 11/30/2006:

...¶38...Fourteen years ago, on a “DISABILITY REPORT”, dated (June 21, 1995) on an SSA form filled out in Philadelphia, Pennsylvania (see here as Exhibit #4) (fourth page in, on that Exhibit, under Part III - “Information about Your Activities” Section #11, Plaintiff Zied in her own hand-writing wrote: “I...write, it releases my anger.”

In - USDC Md Pa Case #06-cv-02305 (Zied v. Barnhart, et.al.)-First Amended Complaint-11/30/06

¶20. Ms. Zied suffers from several invisible disabilities which are psychological, and stem from an emotional abusive childhood, a brain injury which was the result of a motorcycle accident in 1972, when she was 17, a series of shock treatments administered upon her in 1973, and being institutionalized in 1973, and 1974.

¶21. Over the years, Ms. Zied has been diagnosed with Paranoid Schizophrenia; Manic Depression; Bipolar Disorder; Shizoffective Disorder, Paranoid Disorder; and Sleep Apnea.

¶22. Due to these Disorders, Ms. Zied suffers from major life activities that include but are not limited to (1) the inability to concentrate and stay focused; (2) accelerated thinking; (3) excessive speech pattern; (4) a tendency to be single focused; (5) tendencies to shut down and block herself out from other people; (6) has mood swings at times that result in a deep depression; (7) on occasion, an inability to communicate effectively with other people; (8) problems going to sleep; (9) capacity issues in stressful situations; (10) capacity problems in opening mail from intimidating sources, and can only do semi-adequately do so on weekdays, when offices are open, so that she can call them if need be, and solve any type of problem immediately; and (11) **difficulties in being concise.**

On - October 11, 2011 to the SSA ALJ (pg. 2) from Zied in the Administrative Proceedings

..."Among other errors and mistakes, (e.g. - Dr. Clark's June 2, 1999 letter addressed directly to SSA, not being taken into consideration); the SSA's Medical Consultant's Report by Psychiatrist, Dr. Renee Bacas, dated 1/6/1999, not being given to the DDS in 1996, and not evaluated..., Therapist Madeline Rosario's notes not being taken into consideration, when the September 21, 2004 decision was written, and **Claimant Zied's condition of Hyper-Graphia, which is a by-product of Bipolar Disorder which causes a person to write excessively not looked at as the reason why the prior briefs were written excessively.**

(Complaint USDC Md Pa Case #12-cv-0510 transferred to USDC Ed Pa Case #12- cv-3700)

(page 28) ¶65 On a "Disability Report" dated June 21, 1995...I ...write, it releases my anger...

¶66. It was later learned by Claimant Zied that a symptom derived from her Bipolar Disorder (the newly established name for Manic Depression) was one that meets the definition of Hyper-graphia, usually associated with epilepsy, but sometimes associated with Bipolar Disorder, which attributes to the amount of writing that Claimant Zied has a propensity to generate, and although some have held this particular symptom against Claimant Zied, her over-writing ability has never been a motive of adverse intention.

¶67. Although Claimant Zied has been able to write or over-write, she does not have the same ability to read and/or comprehend applications, forms, books, or notifications in the same manner. When Claimant Zied gets overwhelmed in certain circumstances, she finds herself not being able to continue on any further, which at times been problematic.

(page 10, 8/8/2016 document in the Third circuit Court of Appeals):

A Case in Illinois describes the adverse effect of an individual with hyper-graphia

**CASE IN THE APPELLATE COURT OF ILLINOIS, SECOND DISTRICT -
IN RE: DAWN H.**

Alleged to be a person Subject to Involuntary Treatment (The People of the State of Illinois, Petition-Appellee, v. Dawn H., Respondent-Appellant) - Case No. 2-11-1013 - Decided August 20, 2012

¶21. BACKGROUND

¶3. Respondent, age 30, has a 12-year history of mental illness. Specifically, respondent has been diagnosed with bipolar disorder with psychosis...

¶5. Respondent was subsequently placed in Elgin Mental Health Center, and in September 2011, her treating psychiatrist, Dr. Donna Luchetta, petitioner for the involuntary administration of psychotropic medication.

¶7. At the hearing on the petition, Luchetta testified that she observed respondent's bipolar disorder with psychosis manifested in respondent's loud, argumentative behavior; monopolizing and hypervocal speech; **hypergraphia (writing unprompted five-and six page letters to judges, requesting that they help her find a home, even though she was housed in the health center at the time.)**

(page 12-16 8/8/2016 document to the Third Circuit Court of Appeals)

A LOOK AT HYPER-GRAPHIA

“THE MIDNIGHT DISEASE: The Drive to Write, Writer’s Block, and the Creative Brain BY NEUROLOGIST & SUFFERER OF HYPER-GRAPHIA - ALICE Weaver FLAHERTY

....Some of the excerpts of this book are as follows:

(location 50)

...Neurologists have found that changes in a specific area of the brain can produce hypergraphia--the medical term for an overpowering desire to write. Thinking in a counterintuitive, neurological way about what drives and frustrates literary creation can suggest new treatments for hypergraphia’s more common and tormenting opposite, writer’s block. Both conditions arise from complicated abnormalities of the basic biological drive to communicate.

(location 74)

..Many parts of the brain play a role: Leonardo’s exquisite motor cortical control of his pen, the way his visual cortex perceived shape from shadow, his face recognition area. Yet some parts of the brain may be more crucial than others for the emotional aspect of the drive toward beauty or meaning.

One of the regions is the pair of temporal lobes, located in the cerebral cortex roughly behind the ears. The temporal lobes have been somewhat neglected by neurologists, in part because damage to them does not produce glaring motor or cognitive problems. Still, the temporal lobes are important for producing literature, in part because they are necessary for understanding word meaning--and also meaning in its philosophical senses. In addition, changes in the temporal lobes can produce hypergraphia....

(location 86)

..The temporal lobes’ role in hypergraphia, for instance, may parallel their role in intense drives to paint and to compose music. The same brain changes that drove Vincent Van Gogh’s frenzied painting (at his peak he produced a new canvas every thirty-six hours) seem to have driven his hypergraphia and frenetic artistic achievement are special cases of the more general phenomenon of a sense of vocation, or of workaholism, they can shed light on how or whether to control these double-edged states.

(location 92)

..Along with my fascination with writing, my work as a physician shapes the book. I am obsessed with illness and how it changes my patients. Moreover, like many doctors, I have acquired the occupational illness of seeing disease everywhere. ..Can any good come from casting such a medicalized eye on the world of writing? Medicalization tends to lead to pathographies of artists: El Greco's elongated figures are explained away as mere astigmatism, Dostoevsky's writing as nothing but epilepsy. Pathologizing the process of writing could make us see creativity as abnormal or even dangerous...

(location 98)

..One of the first moving, and most readily helped, groups of patients I see is college students admitted for their first psychiatric break. Often what finally brings them to their university's attention is that they can no longer write and are beginning to get incompletes in their courses. These are students with biologically based psychiatric problems that affect their creativity and their ability to express themselves. Their Treatment often underestimates their problems with work as side effects of family issues. Indeed, the two are hard to separate. But work--how we make things of and do things to the external world--is nearly as basic, and primeval, a factor in human happiness as family in human happiness as family relations. The inability to write reflects the sufferer's feeling that he or she cannot contribute to the world, cannot communicate with others in any meaningful way.

(location 111) Yet someone with, say, Parkinson's disease who has spent months in a wheelchair will, if there is a fire, be able to leap from her chair and run. This confusing inconsistency often convinces family members that their mother or husband isn't ill, but simply isn't trying hard enough. Sometimes not even the patient wants to give up that belief. To admit that you will is sometimes ineffective is terrifying. ..

(location 117) Another difference between "psychological states" such as block and "neurological" states such as Parkinson's disease is that relatively subtle behavioral interventions (psychotherapy, for instance) can be immensely helpful in the former, but not in the latter. Because of my biology-based training, and because so many others have described the ways that therapy can help writing problems, I sometimes neglect therapy and other behavioral interventions in this book.

(location 122) As a doctor, I hope I do not simply see normal problems as illness; I want also to see that illness is often nearly normal. ...Take the famous “little man with the perfect memory” so movingly described by the Russian psychologist A.R. Luria in *The Mind of a Mnemonist*. Although the man Luria studied had a photographic memory, he was cursed rather than blessed. Reading and writing were among the many activities his too-good memory made hard for him. Every word, even every letter within a word, called up so many associations that it was nearly impossible for him to concentrate on a chain of thought. His distracting memory ended his writing career as a journalist, and he finished his life as a circus performer doing memory tricks. (Or would only a writer say that this career change was unfortunate?)

(location 129) *The Midnight Disease* is shaped not only by my work as a doctor with people, but also by my work as a neuroscientist with brain imaging to study neural activity.

(location 140) While doctors care about disease because they want to cure it, many neuroscientists care about disease as a scalpel with which to dissect health. When something falls apart, you can see its pieces more clearly. In this way, for instance, researchers learned about the role of the left and right sides of the brain from split- brain patients. As a neuroscientist, I am fascinated by hypergraphia and writer’s block because of what they tell us about normal creativity.

(location 147) As a researcher, I am obsessed with the powerful notion of testability, which is the foundation of the scientific method. Single examples often mislead most explanations and treatments for writing problems still need rigorous testing by what scientists consider the gold-standard method: the double-blind, prospective, randomized clinical trial.

(location 299) One hypergraphic patient of Geschwind’s, rather more typical than Dostoevsky, began having seizures several months after a head injury. They began with a rising or fluttering sensation in his stomach, sometimes with the feeling that he was falling or rising in the air. An EEG (electroencephalogram, a test of brain electrical activity) showed epileptic spikes in the right temporal lobe even between seizures. The man attended art school for some years, but also spent several years in prison for assault. He began writing extensively around the time of his first seizure, keeping a diary and writing songs and poems. Because he feared that his work would be stolen, he hid it in various places in his home. He often wrote aphorisms for hours at a time, saying “Once I start, I can’t stop.”

(location 164) Why, if I am a scientist, have I written a book? Scientists should write scientific papers. ..Perhaps writing this book is my eulogy for the book, or a wistful hope that people will always be crazy enough to write books. In the end, though, because of an unusual personal experience, writing this book was something I could not stop myself from doing. I always wrote a little more than was normal... In medical school when I first heard about the existence of hypergraphia, I began to wonder whether my own writing was hypergraphic--partly because suggestible medical students tend to believe they have whatever disorder they are currently studying, and partly because my own writing was indeed becoming more driven.

(location 176)When I wrote my first book, a handbook of neurology, I was a hospital resident working 80 to 110 hours a week. Without any plan to start a book, I found that some notes I was taking to help me on the wards crept up on me and took over. Soon I was skipping meals and waking early to work on them. As a joke, I told people that the book was an attempt to make my hypergraphia useful. Then I got pregnant and had a postpartum mood disorder during which my writing truly exploded. After that, it was no longer witty to describe my writing as a medical symptom. My postpartum mood disorder, which had several manic as well as the more typical depressed features, came after I had given birth prematurely to twin boys who died...For ten days I was filled with sorrow. Then, suddenly, as if someone had thrown a switch, I was wildly agitated, full of ideas, all of them pressing to be written down....While postpartum major depression occurs after one in ten deliveries, postpartum mania occurs after one in a thousand. mania and depression can come in complicated mixtures. As I found out, one manic feature is hypergraphia.

(location 224) Chapter 1 describes several relatively well defined brain conditions that increase the desire to write. Some patients with temporal lobe epilepsy, manic-depression (bipolar disorder), and other disorders experience florid hypergraphia. ..Chapter 2 describes how the temporal lobes may help drive "normal" emotionally engaged writing just as they drive "abnormal" hypergraphia... Chapter 3, can also help us to understand block in relation to another agonizing problem, procrastination. A neuroscientific, as opposed to a psychological, perspective on block (Chapter 4) allows biochemical explanations and treatments of block. In the frequent case of block related to mood swings, a medical model of block can clarify why writers such as Samuel Taylor Coleridge, who were made miserable by writer's block, were also able in bursts of creativity to write hypergraphically. Chapter 5 describes how recent advances in

neuroscience, including brain imaging technology, have made it possible to study the ability to write in normal people, as well as language impaired people.

CONCLUSION

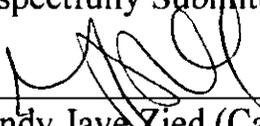
No person should ever have to apologize for their disability, but laws must be followed, and each and every person who has a disability, especially one that cannot be seen automatically with the naked eye deserves to be accommodated for their disability(s), if they meet, which in this case has overwhelming evidence in support of Ms. Zied's disability, and as for Ms. Binnie Zied, her age in and of itself, being 98 with two hearing aids should speak as to her inability to partake in a telephonic hearing.

Because this appears to be such an important issue, and PECO did in fact bring up a disabled person's ability to write, Ms. Zied attaches here as Attachment B, as the book: "The Midnight Disease - The Drive to Write, Writer's Block, and the Creative Brain", by Alice W. Flaherty, if for no other reason to expand the scope of a non-disabled person's insight into a field that they have little knowledge of.

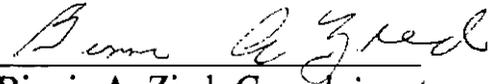
The complaint, as PECO has been so articulate in setting forth has this litigation has been perfected in "writing", that in and of itself should set forth the reasons why this should be heard on the written submissions, and the telephonic hearing should be cancelled, which would serve additionally as a disability accommodation to both Complainants, Mindy J. Zied and Binnie A. Zied, or alternatively since PECO has failed to oppose certification to the Commonwealth Court of Pennsylvania, then this tribunal should Certify the Question set forth in the original Motion for that question to be

addressed.

Respectfully Submitted,



Mindy Jaye Zied (Campbell), *Complainant*



Binnie A. Zied, *Complainant*

Date: January 8, 2017

- Attachment A - SSA document June 28, 1995
- Attachment B - Book - The Midnight Disease - by Alice W. Flaherty

Certificate of Service

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JAN 08 2017

PA PUBLIC UTILITY COMMISSION
SECRETARY'S BUREAU

ATTACHMENT A

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Social Security Administration

Form Approved
OMB No. 0980-0141

DISABILITY REPORT

PLEASE PRINT, TYPE, OR WRITE CLEARLY AND ANSWER ALL ITEMS TO THE BEST OF YOUR ABILITY. If you are filling on behalf of someone else, enter his or her name and social security number in the space provided and answer all questions. COMPLETE ANSWERS WILL AID IN PROCESSING THE CLAIM.

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PRIVACY ACT NOTICE: The Social Security Administration is authorized to collect the information on this form under sections 2054(a), 2264 and 1631(a)(1) of the Social Security Act. The information on this form is received by Social Security to make a decision on your claim. While giving us the information on this form is voluntary, failure to provide all or part of the requested information could prevent an accurate or timely decision on your claim and could result in the loss of benefits. Although the information you furnish on this form to Social Security is used for any purpose other than making a determination on your disability claim, such information may be disclosed by the Social Security Administration as follows: (1) To enable a third party or agency to assist Social Security in establishing rights to Social Security benefits and/or coverage; (2) to comply with Federal laws requiring the release of information from Social Security records (e.g., to the General Accounting Office and the Department of Veterans Affairs); and (3) to facilitate statistical research and audits necessary to ensure the integrity and improvement of the Social Security programs (e.g., to the Bureau of Census and private concerns under contract to Social Security). We may also use the information you give us when we search records by computer. Matching programs compare our records with those of other Federal, State, or local government agencies. Many agencies may use matching programs to find or prove that a person qualifies for benefits paid by the Federal government. The law allows us to do this even if you do not agree to it.

Explanations about these and other reasons why information you provide us may be used or given out are available. If you want to learn more about this, contact any Social Security Office.

A. NAME OF CLAIMANT MINDI JAYE ZIED	B. SOCIAL SECURITY NUMBER [REDACTED] / [REDACTED] / [REDACTED]
--	---

C. WHAT IS YOUR DISABLING CONDITION? (Briefly explain the injury or illness that stops you from working.)
Psychological - MANIC Depression and Paranoia

PART I - INFORMATION ABOUT YOUR CONDITION

1. When did your condition first bother you: MONTH DAY YEAR
1977

2A. Did you work after the date shown in item 1? (If "no" go on to items 3A and 3B.)
 YES NO

2B. If you did work since the date in item 1, did your condition cause you to change --

Your job or job duties?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Your hours of work?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Your attendance?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Anything else about your work?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO

(If you answered "no" to all of these, go to items 3A and 3B.)
2C. If you answered "yes" to any item in 2B, explain below what the changes in your work circumstances were, the dates they occurred, and how your condition made these changes necessary.
I have never been able to concentrate AT ANY JOB I have had. I am unable to keep a regular job. I can't concentrate on what I am doing.

3A. When did your condition finally make you stop working? MONTH DAY YEAR

3B. Explain how your condition now keeps you from working.
I have many mood swings. I sometimes get very depressed and want to go back to sleep. I feel that when I go certain places, I am being watched.

8. Have you had any of the following tests in the last year?

TEST	CHECK APPROPRIATE BLOCK OR BLOCKS	IF 'YES' SHOW	
		WHERE DONE	WHEN DONE
Electrocardiogram	<input type="checkbox"/> YES <input type="checkbox"/> NO		938
Chest X-Ray	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
Other X-Ray (name body part here)	<input type="checkbox"/> YES <input type="checkbox"/> NO		
Breathing Tests	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		
Blood Tests	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
Other (Specify)	<input type="checkbox"/> YES <input type="checkbox"/> NO		

9. If you have a Medicaid card, what is your number (some hospitals and clinics file your records by your Medicaid number)

PART III - INFORMATION ABOUT YOUR ACTIVITIES

10. Has your doctor told you to cut back or limit your activities in any way? YES NO
If "yes", give the name of the doctor below and tell what he or she told you about cutting back or limiting your activities.

[Redacted area]

Describe your daily activities in the following areas and state what and how much you do of each and how often you do it:

• Household maintenance (including cooking, cleaning, shopping, and odd jobs around the house as well as any other similar activities):

[Redacted area]

• Recreational activities and hobbies (hunting, fishing, bowling, hiking, musical instruments, etc.):

I like to write. It releases my anger. I study the Bible.

• Social contacts (visits with friends, relatives, neighbors):

I don't like anyone but my immediate family.

• Other (drive car, motorcycle, ride bus, etc.)

[Redacted area]

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ATTACHMENT B
BOOK - THE MIDNIGHT DISEASE
BY
ALICE W. FLAHERTY

**NO SCANNED IMAGES ARE
AVAILABLE**

**COMPLETE ATTACHMENTS
AND/OR EXHIBIT(S)
MAY BE VIEWED IN THE
COMMISSION'S
FILE ROOM**

**BEFORE THE
PENNSYLVANIA UTILITY COMMISSION**

MINDY JAYE ZIED,)
BINNIE A. ZIED,)
Complainants)
)
v.)
)
PECO ENERGY COMPANY/EXELON,)
Respondents)
)

Docket No. F-2015-2500342

CERTIFICATE OF SERVICE

I, Mindy Jaye Zied hereby certify that I have this day served a copy of Complainants' Opposition to PECO's January 3, 2017 document to Complainants' Motion for a disability accommodation request plus Attachment A, upon all interested parties by mailing USPS first class postage pre-paid mail today to:

Shawane L. Lee
PECO Legal Department
Counsel for PECO Energy Company
2301 Market Street, S23-1
P. O. Box 8699
Philadelphia, PA 19101-8699

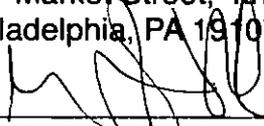
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PA PUBLIC UTILITY COMMISSION
SECRETARY'S BUREAU

Rosmary Chiavetta, Secretary
Pennsylvania Public Utility Commission
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Harrisburg, PA 17105-3265

Administrative Law Judge Angela T. Jones
Pennsylvania Utility Commission
801 Market Street, 4th Floor, Suite 4063
Philadelphia, PA 19107


Mindy Jaye Zied
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(717)856-9607
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Date: January 8, 2017

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