

COMMONWEALTH OF PENNSYLVANIA  
(Public Utility Commission)

-----\*  
PATRICE JENKINS, :  
Complainant : Docket No.:  
vs. : C-2025-3057322  
PHILADELPHIA GAS WORKS, :  
Respondent. :  
-----\*

Pages 1 through 66 TELEPHONIC HEARING  
Judge's Chambers  
State Office Bldg.  
801 Market Street  
Philadelphia, PA 17120

Thursday, December 11, 2025  
Met, pursuant to notice, at 10:00 a.m.

BEFORE: THE HONORABLE ERANDA VERO  
Administrative Law Judge

INDEX TO EXHIBITS  
Docket No.: C-2025-3057322  
Hearing Date: December 11, 2025

EXHIBITS INDEX

NUMBER		MARKED	IN EVIDENCE
COMPLAINANT:			
1	(Email-PGW handbook language)	56	58
2	(Robert Half 9/21/24 to 9/27/24 pay stub)	56	58
3	(Oral & Maxillofacial Surgical pay stubs)	57	58
4	(Robert Half 10/12/24 to 10/18/24 pay stubs)	57	58
PHILADELPHIA GAS WORKS:			
1	(Statement of Account)		59
2	(11/15/24 CRP application)		59
3	(3/28/25 CRP application)		59
4	(10-day shut off notice)		59
5	(Shut off record)		59
6	(Payment agreement history)		59
7	(Opening for Complaint 4052923)		59



Outlook

---

**FW: [External] Re: P Jenkins Docket # C-2025-3057322 (Additional Exhibit)**

---

**From** Vero, Eranda <evero@pa.gov>

**Date** Thu 12/11/2025 11:39 AM

**To** Vero, Eranda <evero@pa.gov>

---

**From:** PATRICE JENKINS <[patrice\\_jenkins74@comcast.net](mailto:patrice_jenkins74@comcast.net)>  
**Sent:** Wednesday, December 3, 2025 4:21 PM  
**To:** McNeal, Pamela <[pmcneal@pa.gov](mailto:pmcneal@pa.gov)>; Christlieb, Graciela C <[graciela.christlieb@pgworks.com](mailto:graciela.christlieb@pgworks.com)>  
**Subject:** [External] Re: P Jenkins Docket # C-2025-3057322 (Additional Exhibit)

**ATTENTION:** *This email message is from an external sender. Do not open links or attachments from unknown senders. To report suspicious email, use the [Report Phishing button in Outlook](#).*

Good Afternoon,  
In addition to providing exhibits, before the deadline. I would like to present this additional exhibit below:

PGW customer handbook documentation requirements vary by program, but general requirements include proof of income for the Customer Responsibility Program (CRP) and a gas service application for new service. For CRP, applicants must provide verifiable income documentation for all household members, such as recent pay stubs, Social Security award letters, or bank statements, along with a signed application. For new service, applications require names and contact information, details on existing and new appliances, and potentially construction plans.

For customer assistance programs (like CRP)

- **Proof of income:** For all household members with income.
  - **Pay stubs:** Within the last 30 days, showing both current and year-to-date gross and net income.
  - **Social Security:** Annual award letter or bank statement showing direct deposit.
  - **Pension:** Pay stubs or bank statements showing pension income.
  - **Other benefits:** DHS/Compass printout, unemployment benefits detail sheet, or worker's compensation/disability pay stubs.
  - **Self-employed:** Bank statements showing deposits and prior year's tax return.
  - **Other:** Court orders for child support or alimony, or foster care support payments.
- **Identification:** Social Security cards and dates of birth for all household members are required for CRP applications.
- **Application:** A completed application form, signed by the applicant.
- **Additional support:** A completed "Additional Financial Assistance" section must be provided for undocumented financial support from someone outside the household.

Thank you,  
Patrice Jenkins

On 12/03/2025 4:14 PM EST PATRICE JENKINS  
<[patrice\\_jenkins74@comcast.net](mailto:patrice_jenkins74@comcast.net)> wrote:

Good Afternoon All,  
Please see the presenting exhibits for my hearing on December 11,  
2025 at 10 am in regards to providing fraudulent documents.  
The exhibits are the paystubs of myself and my daughter. These are  
the documents I provided and sent to PGW's CRP program and will  
be discussed in the hearing.

Thank you,  
Patrice Jenkins  
215-347-4376



Robert Half Inc.  
2884 Sand Hill Road  
Menlo Park CA, 94025  
888-744-9202

Advice Date: 30-SEP-2024

PATRICE JENKINS 2346 N LAMBERT ST PHILADELPHIA PA, 19132-4818  Employee ID: SSN:	TAX DATA:	Federal	State
	Marital Status:		
	Allowances:		
	Additional Amount:		
	Additional Percentage:		

**HOURS AND EARNINGS**

Week Begin Dt	Week Ending Dt	Description	Current			YTD	
			Rate	Hours	Earnings	Hours	Earnings
21-SEP-2024	27-SEP-2024	Girard Estate Regular Earnings Bonus Length of Service Overtime Premium - LOS Overtime					
<b>TOTAL:</b>				33.25	964.25	1,244.51	36,182.83
<b>TOTAL HOURS WORKED:</b>				33.25			

BEFORE-TAX-DEDUCTIONS			STATUTORY DEDUCTIONS			AFTER-TAX-DEDUCTIONS		
Description	Current	YTD	Description	Current	YTD	Description	Current	YTD
			Fed Withholding					
			Fed MED/EE					
			Fed OASDI/EE					
			PA Unempl EE					
			PA Withholding					
			PA Withholding					
<b>TOTAL:</b>			<b>TOTAL:</b>			<b>TOTAL:</b>		
	0.00	0.00					0.00	0.00

TOTAL GROSS	BEFORE TAX DEDUCTIONS	FED TAXABLE GROSS	STATUTORY DEDUCTIONS	AFTER TAX DEDUCTIONS	NET PAY
Current: 964.25	0.00	964.25		0.00	746.48
YTD:	0.00			0.00	

<b>SERVICE HOURS</b> YTD  Length of Service Balance*: Holiday Balance*:  *Balance is as of paycheck(s) received prior to today. Any hours on the current paycheck are not included.	Absence Pay Available to Use: Eligible to Use: 0.00	— DIRECT DEPOSIT DISBURSEMENT —		
		Account Type	Transit #	Account #
				746.48
<b>NET PAY</b>				<b>746.48</b>

MESSAGE: Contact Customer Experience with any questions @ pay.timereporting@rhi.com or 1-888-744-9202.



Robert Half Inc.  
2884 Sand Hill Road  
Menlo Park CA, 94025  
888-744-9202

Advice #: \_\_\_\_\_  
Advice Date: 14-OCT-2024

PATRICE JENKINS 2346 N LAMBERT ST PHILADELPHIA PA, 19132-4818  Employee ID: SSN:			TAX DATA: Federal State  Marital Status: Allowances: Additional Amount: Additional Percentage:					
HOURS AND EARNINGS								
Week Begin Dt	Week Ending Dt	Description	Rate	Current Hours	YTD Hours	Current Earnings	YTD Earnings	
05-OCT-2024	11-OCT-2024	Girard Estate Regular Earnings Bonus Length of Service Overtime Premium - LOS Overtime						
<b>TOTAL:</b>								
<b>TOTAL HOURS WORKED:</b>				39.75				
BEFORE-TAX-DEDUCTIONS			STATUTORY DEDUCTIONS			AFTER-TAX-DEDUCTIONS		
Description	Current	YTD	Description	Current	YTD	Description	Current	YTD
			Fed Withholding Fed MED/EE Fed OASDI/EE PA Unempl EE PA Withholding PA Withholding					
<b>TOTAL:</b>			<b>TOTAL:</b>			<b>TOTAL:</b>		
	0.00	0.00					0.00	0.00
TOTAL GROSS	BEFORE TAX DEDUCTIONS	FED TAXABLE GROSS	STATUTORY DEDUCTIONS	AFTER TAX DEDUCTIONS	NET PAY			
Current:	1,152.75	0.00	1,152.75	267.80	884.95			
YTD:		0.00		0.00				
SERVICE HOURS	YTD	Absence Pay Available to Use: Eligible to Use: 0.00	----- DIRECT DEPOSIT DISBURSEMENT -----					
Length of Service Balance*: Holiday Balance*:			Account Type	Transit #	Account #	Amount		
						884.95		
*Balance is as of paycheck(s) received prior to today. Any hours on the current paycheck are not included.								
<b>NET PAY</b>						<b>884.95</b>		

MESSAGE: Contact Customer Experience with any questions @ pay.timereporting@rhi.com or 1-888-744-9202.



Robert Half Inc.  
2884 Sand Hill Road  
Menlo Park CA, 94025  
888-744-9202

Advice #: \_\_\_\_\_  
Advice Date: 21-OCT-2024

PATRICE JENKINS 2346 N LAMBERT ST PHILADELPHIA PA, 19132-4818  Employee ID: SSN:	TAX DATA:	Federal	State
	Marital Status:		
	Allowances:		
	Additional Amount:		
	Additional Percentage:		

**HOURS AND EARNINGS**

Week Begin Dt	Week Ending Dt	Description	Current			YTD		
			Rate	Hours	Earnings	Hours	Earnings	
12-OCT-2024	18-OCT-2024	Girard Estate Regular Earnings Bonus Length of Service Overtime Premium - LOS Overtime						

TOTAL:  
TOTAL HOURS WORKED:

BEFORE-TAX-DEDUCTIONS			STATUTORY DEDUCTIONS			AFTER-TAX-DEDUCTIONS		
Description	Current	YTD	Description	Current	YTD	Description	Current	YTD
			Fed Withholdng Fed MED/EE Fed OASDI/EE PA Unempl EE PA Withholdng PA Withholdng					
TOTAL:	0.00	0.00	TOTAL:			TOTAL:	0.00	0.00

TOTAL GROSS	BEFORE TAX DEDUCTIONS	FED TAXABLE GROSS	STATUTORY DEDUCTIONS	AFTER TAX DEDUCTIONS	NET PAY
Current: 877.25	0.00	877.25	194.67	0.00	682.58
YTD:	0.00			0.00	

SERVICE HOURS	YTD	Absence Pay Available to Use: Eligible to Use: 0.00	DIRECT DEPOSIT DISBURSEMENT			
Length of Service Balance*: Holiday Balance*:			Account Type	Transit #	Account #	Amount
*Balance is as of paycheck(s) received prior to today. Any hours on the current paycheck are not included.						682.58
			<b>NET PAY</b>			<b>682.58</b>

MESSAGE: Contact Customer Experience with any questions @ pay.timereporting@rhi.com or 1-888-744-9202.

PATRICE JENKINS 2346 N LAMBERT ST PHILADELPHIA PA, 19132-4818  Employee ID: SSN:	TAX DATA: Federal State
	Marital Status:
	Allowances:
	Additional Amount: Additional Percentage:

**HOURS AND EARNINGS**

Week Begin Dt	Week Ending Dt	Description	Current Hours	Current Earnings	YTD Hours	YTD Earnings
19-OCT-2024	25-OCT-2024	Girard Estate Regular Earnings Bonus Length of Service Overtime Premium - LOS Overtime				

**TOTAL:**  
**TOTAL HOURS WORKED:**

BEFORE-TAX-DEDUCTIONS			STATUTORY DEDUCTIONS			AFTER-TAX-DEDUCTIONS		
Description	Current	YTD	Description	Current	YTD	Description	Current	YTD
			Fed Withholding					
			Fed MED/EE					
			Fed OASDI/EE					
			PA Unempl EE					
			PA Withholding					
			PA Withholding					
<b>TOTAL:</b>	0.00	0.00	<b>TOTAL:</b>	14		<b>TOTAL:</b>	0.00	0.00

TOTAL GROSS	BEFORE TAX DEDUCTIONS	FED TAXABLE GROSS	STATUTORY DEDUCTIONS	AFTER TAX DEDUCTIONS	NET PAY
Current: 551.00	0.00	551.00	108.09	0.00	442.91
YTD:	0.00			0.00	

SERVICE HOURS YTD  Length of Service Balance*: Holiday Balance*:  *Balance is as of paycheck(s) received prior to today. Any hours on the current paycheck are not included.	Absence Pay Available to Use: Eligible to Use: 0.00	----- DIRECT DEPOSIT DISBURSEMENT -----			
		Account Type	Transit #	Account #	Amount
					442.91
<b>NET PAY</b>					<b>442.91</b>

MESSAGE: Contact Customer Experience with any questions @ pay.time-reporting@rhi.com or 1-888-744-9202.



Robert Half Inc.  
2884 Sand Hill Road  
Menlo Park CA, 94025  
888-744-9202

Advice #: \_\_\_\_\_  
Advice Date: 04-NOV-2024

PATRICE JENKINS 2346 N LAMBERT ST PHILADELPHIA PA, 19132-4818  Employee ID: SSN:	TAX DATA: Federal State
	Marital Status:
	Allowances:
	Additional Amount:
Additional Percentage:	

**HOURS AND EARNINGS**

Week Begin Dt	Week Ending Dt	Description	Rate	Current		YTD	
				Hours	Earnings	Hours	Earnings
26-OCT-2024	01-NOV-2024	Girard Estate Regular Earnings					
26-OCT-2024	01-NOV-2024	Girard Estate Overtime					
		Bonus Length of Service					
		Overtime Premium - LOS					

TOTAL:  
TOTAL HOURS WORKED:

BEFORE-TAX-DEDUCTIONS			STATUTORY DEDUCTIONS			AFTER-TAX-DEDUCTIONS		
Description	Current	YTD	Description	Current	YTD	Description	Current	YTD
			Fed Withholding					
			Fed MED/EE					
			Fed OASDI/EE					
			PA Unempl EE					
			PA Withholding					
			PA Withholding					
TOTAL:	0.00	0.00	TOTAL:	310.67	8,829.71	TOTAL:	0.00	0.00

TOTAL GROSS	BEFORE TAX DEDUCTIONS	FED TAXABLE GROSS	STATUTORY DEDUCTIONS	AFTER TAX DEDUCTIONS	NET PAY
Current: 1,279.63	0.00	1,279.63	310.67	0.00	968.96
YTD:	0.00			0.00	

SERVICE HOURS YTD  Length of Service Balance*: Holiday Balance*:  *Balance is as of paycheck(s) received prior to today. Any hours on the current paycheck are not included.	Absence Pay Available to Use: Eligible to Use: 0.00	----- DIRECT DEPOSIT DISBURSEMENT -----			
		Account Type	Transit #	Account #	Amount
		Checking			968.96
<b>NET PAY</b>					<b>968.96</b>

MESSAGE: Contact Customer Experience with any questions @ pay.tinereporting@rhi.com or 1-888-744-9202.

# Earnings Statement



ORAL & MAXILLOFACIAL SURGICAL  
2100 N BROAD STREET  
SUITE 106  
LANSDALE, PA 19446

Period Starting:  
Period Ending:  
Pay Date: 10/02/2024

Taxable Filing Status  
Exemptions/Allowances:  
Federal: -  
State: -  
Local: -  
Social Security Number

Tax Override:  
Federal:  
State:  
Local:

**Deja Jenkins-Polite**  
2346 North Lambert Street  
Philadelphia, PA 19132

Earnings                      rate    hours/units                      this period                      year to date

Regular  
Holiday  
Meetings  
Travel

Gross Pay

Statutory Deductions                      this period                      year to date

Federal Income  
Social Security  
Medicare  
Pennsylvania State Income  
Pennsylvania State UI  
Phila R Local Income  
Hatfield T Local Income  
Hatfield Twp Local Services

Net Pay    \$824.09

Other Benefits and Information                      this period                      year to date

Total Hours Worked

Deposits  
account number                      transit/ABA                      amount  
824.09

Important Notes

Basis of pay: Hourly

ORAL & MAXILLOFACIAL SURGICAL  
2100 N BROAD STREET  
SUITE 106  
LANSDALE, PA 19446

Pay Date: 10/02/2024

Deposited to the account                      account number                      transit/ABA                      amount  
824.09

THIS IS NOT A CHECK

Deja Jenkins-Polite  
2346 North Lambert Street  
Philadelphia, PA 19132

# Earnings Statement



ORAL & MAXILLOFACIAL SURGICAL  
2100 N BROAD STREET  
SUITE 106  
LANSDALE, PA 19446

Period Starting:  
Period Ending:  
Pay Date: 10/30/2024

Taxable Filing Status  
Exemptions/Allowances: Tax Override:   
Federal:  
State:  
Local:  
Social Security Number:

**Deja Jenkins-Polite**  
2346 North Lambert Street  
Philadelphia, PA 19132

<u>Earnings</u>	<u>rate</u>	<u>hours/units</u>	<u>this period</u>	<u>year to date</u>
-----------------	-------------	--------------------	--------------------	---------------------

Regular  
Holiday  
Meetings  
Travel

<b>Gross Pay</b>			<b>\$1,058.40</b>	
------------------	--	--	-------------------	--

<u>Statutory Deductions</u>	<u>this period</u>	<u>year to date</u>
-----------------------------	--------------------	---------------------

Federal Income  
Social Security  
Medicare  
Pennsylvania State Income  
Pennsylvania State UI  
Phila R Local Income  
Hatfield T Local Income  
Hatfield Twp Local Services

<b>Net Pay</b>	<b>\$851.81</b>	
----------------	-----------------	--

<u>Other Benefits and Information</u>	<u>this period</u>	<u>year to date</u>
---------------------------------------	--------------------	---------------------

Total Hours Worked

<u>Deposits</u>	<u>account number</u>	<u>transit/ABA</u>	<u>amount</u>
			851.81

### Important Notes

Basis of pay: Hourly

ORAL & MAXILLOFACIAL SURGICAL  
2100 N BROAD STREET  
SUITE 106  
LANSDALE, PA 19446

Pay Date: 10/30/2024

<u>Deposited to the account</u>	<u>account number</u>	<u>transit/ABA</u>	<u>amount</u>
			851.81

**THIS IS NOT A CHECK**

Deja Jenkins-Polite  
2346 North Lambert Street  
Philadelphia, PA 19132

# Earnings Statement



ORAL & MAXILLOFACIAL SURGICAL  
2100 N BROAD STREET  
SUITE 106  
LANSDALE, PA 19446

Period Starting:  
Period Ending:  
Pay Date: 11/13/2024

Taxable Filing Status  
Exemptions/Allowances: Tax Override:  
Federal:  
State:  
Local:  
Social Security Number

**Deja Jenkins-Polite**  
2346 North Lambert Street  
Philadelphia, PA 19132

<u>Earnings</u>	<u>rate</u>	<u>hours/units</u>	<u>this period</u>	<u>year to date</u>	<u>Other Benefits and Information</u>	<u>this period</u>	<u>year to date</u>
Regular					Total Hours Worked		
Holiday							
Meetings							
Travel							
<b>Gross Pay</b>			<b>\$1,193.40</b>		<b>Deposits</b>		<b>amount</b>
					<b>account number</b>		<b>950.97</b>
					<b>Important Notes</b>		
<b>Statutory Deductions</b>			<b>this period</b>	<b>year to date</b>			
Federal Income							
Social Security							
Medicare							
Pennsylvania State Income							
Pennsylvania State UI							
Phila R Local Income							
Hatfield T Local Income							
Hatfield Twp Local Services							
<b>Net Pay</b>			<b>\$950.97</b>				

ORAL & MAXILLOFACIAL SURGICAL  
2100 N BROAD STREET  
SUITE 106  
LANSDALE, PA 19446

Pay Date: 11/13/2024

Deposited to the account \_\_\_\_\_ account number \_\_\_\_\_ transit/ARA \_\_\_\_\_ amount 950.97

**THIS IS NOT A CHECK**

Deja Jenkins-Polite  
2346 North Lambert Street  
Philadelphia, PA 19132



Robert Half Inc.  
2884 Sand Hill Road  
Menlo Park CA, 94025  
888-744-9202

Advice #: \_\_\_\_\_  
Advice Date: 21-OCT-2024

PATRICE JENKINS 2346 N LAMBERT ST PHILADELPHIA PA, 19132-4818  Employee ID: SSN:			<b>TAX DATA:</b> Federal State Marital Status: Allowances: Additional Amount: Additional Percentage:		
HOURS AND EARNINGS					
Week Begin Dt	Week Ending Dt	Description	Rate	Current Hours	YTD Earnings
12-OCT-2024	18-OCT-2024	Girard Estate Regular Earnings Bonus Length of Service Overtime Premium - LOS Overtime			
<b>TOTAL:</b>					
<b>TOTAL HOURS WORKED:</b>					
BEFORE-TAX-DEDUCTIONS		STATUTORY DEDUCTIONS		AFTER-TAX-DEDUCTIONS	
Description	Current	YTD	Description	Current	YTD
			Fed Withholding Fed MED/EE Fed OASDI/EE PA Unempl EE PA Withholding PA Withholding		
<b>TOTAL:</b>	0.00	0.00	<b>TOTAL:</b>	194.67	8,410.95
<b>TOTAL:</b>			<b>TOTAL:</b>	0.00	0.00
TOTAL GROSS	BEFORE TAX DEDUCTIONS	FED TAXABLE GROSS	STATUTORY DEDUCTIONS	AFTER TAX DEDUCTIONS	NET PAY
Current:	877.25	0.00	877.25	0.00	682.58
YTD:		0.00		0.00	
SERVICE HOURS	YTD	Absence Pay Available to Use:	----- DIRECT DEPOSIT DISBURSEMENT -----		
Length of Service Balance*: Holiday Balance*:		Eligible to Use: 0.00	Account Type	Transit #	Account #
					682.58
*Balance is as of paycheck(s) received prior to today. Any hours on the current paycheck are not included.					
<b>NET PAY</b>					<b>682.58</b>

MESSAGE: Contact Customer Experience with any questions @ pay.timereporting@rhi.com or 1-888-744-9202.



Robert Half Inc.  
2884 Sand Hill Road  
Menlo Park CA, 94025  
888-744-9202

Advice #: \_\_\_\_\_  
Advice Date: 28-OCT-2024

PATRICE JENKINS 2346 N LAMBERT ST PHILADELPHIA PA, 19132-4818  Employee ID: SSN:			TAX DATA: Federal State Marital Status: Allowances: Additional Amount: Additional Percentage:					
HOURS AND EARNINGS								
Week Begin Dt	Week Ending Dt	Description	Rate	Current Hours	Current Earnings	YTD Hours	YTD Earnings	
19-OCT-2024	25-OCT-2024	Girard Estate Regular Earnings Bonus Length of Service Overtime Premium - LOS Overtime						
TOTAL:					551.00			
TOTAL HOURS WORKED:								
BEFORE-TAX-DEDUCTIONS			STATUTORY DEDUCTIONS			AFTER-TAX-DEDUCTIONS		
Description	Current	YTD	Description	Current	YTD	Description	Current	YTD
			Fed Withholding Fed MED/EE Fed OASDI/EE PA Unempl EE PA Withholding PA Withholding					
TOTAL: 0.00 0.00			TOTAL: 108.09 8,519.04			TOTAL: 0.00 0.00		
TOTAL GROSS	BEFORE TAX DEDUCTIONS	FED TAXABLE GROSS	STATUTORY DEDUCTIONS	AFTER TAX DEDUCTIONS	NET PAY			
Current: 551.00	0.00	551.00		0.00	442.91			
YTD: 551.00	0.00	551.00		0.00	442.91			
SERVICE HOURS	YTD	Absence Pay Available to Use: Eligible to Use: 0.00	----- DIRECT DEPOSIT DISBURSEMENT -----					
Length of Service Balance*: Holiday Balance*:  *Balance is as of paycheck(s) received prior to today. Any hours on the current paycheck are not included.			Account Type	Transit #	Account #	Amount		
						442.91		
NET PAY						442.91		

MESSAGE: Contact Customer Experience with any questions @ pay.timereporting@rhi.com or 1-888-744-9202.



Robert Half Inc.  
2884 Sand Hill Road  
Menlo Park CA, 94025  
888-744-9202

Advice #:  
Advice Date: 04-NOV-2024

PATRICE JENKINS 2346 N LAMBERT ST PHILADELPHIA PA, 19132-4818  Employee ID: SSN:	<b>TAX DATA:</b> Federal State
	Marital Status: Allowances: Additional Amount: Additional Percentage:

**HOURS AND EARNINGS**

Week Begin Dt	Week Ending Dt	Description	Current		YTD		
			Rate	Hours	Earnings	Hours	Earnings
26-OCT-2024	01-NOV-2024	Girard Estate Regular Earnings					
26-OCT-2024	01-NOV-2024	Girard Estate Overtime					
		Bonus Length of Service					
		Overtime Premium - LOS					
<b>TOTAL:</b>					1,279.63		

<b>TOTAL HOURS WORKED:</b>	
----------------------------	--

BEFORE-TAX-DEDUCTIONS			STATUTORY DEDUCTIONS			AFTER-TAX-DEDUCTIONS		
Description	Current	YTD	Description	Current	YTD	Description	Current	YTD
			Fed Withholding					
			Fed MED/EE					
			Fed OASDI/EE					
			PA Unempl EE					
			PA Withholding					
			PA Withholding					
<b>TOTAL:</b>	0.00	0.00	<b>TOTAL:</b>			<b>TOTAL:</b>	0.00	0.00

TOTAL GROSS	BEFORE TAX DEDUCTIONS	FED TAXABLE GROSS	STATUTORY DEDUCTIONS	AFTER TAX DEDUCTIONS	NET PAY
Current: 1,279.63	0.00	1,279.63		0.00	968.96
YTD: 1,279.63	0.00	1,279.63		0.00	968.96

<b>SERVICE HOURS</b> YTD  Length of Service Balance*:  Holiday Balance*:  *Balance is as of paycheck(s) received prior to today. Any hours on the current paycheck are not included.	Absence Pay Available to Use: Eligible to Use: 0.00	----- DIRECT DEPOSIT DISBURSEMENT -----			
		Account Type	Transit #	Account #	Amount
					968.96
<b>NET PAY</b>					<b>968.96</b>

MESSAGE: Contact Customer Experience with any questions @ pay.timereporting@rhi.com or 1-888-744-9202.





**PHILADELPHIA GAS WORKS**

800 West Montgomery Avenue • Philadelphia, PA 19122

---

**Graciela Christlieb, Senior Attorney  
Legal Department**  
Direct Dial: 215-684-6164  
FAX: 215-684-6798  
E-mail: [graciela.christlieb@pgworks.com](mailto:graciela.christlieb@pgworks.com)

December 4, 2025

**VIA ELECTRONIC MAIL**

Administrative Law Judge Eranda Vero  
Pennsylvania Public Utility Commission  
801 Market Street  
Suite 4063  
Philadelphia, PA 19107

Re: Patrice Jenkins v. Philadelphia Gas Works, Docket No. C-2025-3057322

Dear Judge Vero:

Enclosed, please find PGW's proposed exhibits for the hearing in the above referenced matter.

If you need additional information about this matter, please contact me at my direct-dial number above. Thank you.

Sincerely,

*/s/ Graciela Christlieb*

Graciela Christlieb, Esquire

Enclosure

cc: Cert. of Service w/enc.



**PHILADELPHIA GAS WORKS**

800 West Montgomery Avenue • Philadelphia, PA 19122

---

## **CERTIFICATE OF SERVICE**

I hereby certify that I have this day served a true copy of Philadelphia Gas Works' Proposed Exhibits upon the persons listed below in the manner indicated in accordance with the requirements of 52 Pa. Code §1.54 (relating to service by a party).

**VIA ELECTRONIC MAIL**

Patrice Jenkins

[patrice\\_jenkins74@comcast.net](mailto:patrice_jenkins74@comcast.net)

Date: December 4, 2025

*/s/ Graciela Christlieb*

Graciela Christlieb, Esquire

Specific Service Agreement Statement of Account SA- [REDACTED]

<b>Customer Name</b>	<b>From Date</b>	<b>To Date</b>		
PATRICE JENKINS	12/2/2023	12/2/2025		
<b>Service Address</b>	<b>Account Number</b>	<b>S A Number</b>	<b>Meter</b>	<b>Rate/Class</b>
2346 N LAMBERT ST PHIL, PA 191324818	[REDACTED]	[REDACTED]	2163977	GS

**STATEMENT**

Transaction Date	Transaction Type	Reading	Read Code	# of Days	CCF Usage	Average CCF/Day	Heating DDDs	Payment Type	Due Date	Transaction Amount	Current Balance	Actual Balance
12/27/2023	LPC									\$2.58	\$175.61	\$175.61
12/27/2023	BILL	3031	R	29	128	4.41	651		1/23/2024	\$202.21	\$377.82	\$377.82
1/25/2024	PAY							Check		(\$377.82)	\$0.00	\$0.00
1/26/2024	BILL	3234	R	34	203	5.97	924		2/21/2024	\$315.37	\$315.37	\$315.37
2/23/2024	LPC									\$4.73	\$320.10	\$320.10
2/23/2024	BILL	3381	R	28	147	5.25	686		3/19/2024	\$252.25	\$572.35	\$572.35
3/23/2024	LPC									\$8.51	\$580.86	\$580.86
3/23/2024	BILL	3488	R	29	107	3.69	496		4/17/2024	\$193.69	\$774.55	\$774.55
4/24/2024	LPC									\$11.41	\$785.96	\$785.96
4/24/2024	BILL	3573	R	32	85	2.66	416		5/17/2024	\$139.48	\$925.44	\$925.44
5/6/2024	PAY							Credit Card		(\$150.00)	\$775.44	\$775.44
5/7/2024	BPTOCG									\$123.23	\$898.67	\$898.67
5/9/2024	BILL	3580	R	10	7	0.7	52		6/4/2024	\$10.57	\$909.24	\$909.24

Specific Service Agreement Statement of Account SA- [REDACTED]

<b>Customer Name</b>	<b>From Date</b>	<b>To Date</b>			
PATRICE JENKINS	5/7/2024	12/2/2025			
<b>Service Address</b>	<b>Account Number</b>	<b>S A Number</b>	<b>Meter</b>	<b>Rate/Class</b>	
2346 N LAMBERT ST PHIL, PA 191324818	[REDACTED]	[REDACTED]	2163977	GS	

**STATEMENT**

Transaction Date	Transaction Type	Reading	Read Code	# of Days	CCF Usage	Average CCF/Day	Heating DDDs	Payment Type	Due Date	Transaction Amount	Current Balance	Actual Balance
5/23/2024	BILL	3592	R	14	9	0.64	46		6/18/2024	\$12.89	\$12.89	\$12.89
6/22/2024	BILL	3594	R	30	2	0.07	0		7/17/2024	\$20.26	\$33.15	\$33.15
7/24/2024	BILL	3595	R	32	1	0.03	0		8/16/2024	\$18.84	\$51.99	\$51.99
8/22/2024	BILL	3598	R	29	3	0.1	0		9/17/2024	\$21.59	\$73.58	\$73.58
9/24/2024	LPC									\$1.10	\$74.68	\$74.68
9/24/2024	BILL	3600	R	31	2	0.06	1		10/17/2024	\$20.21	\$94.89	\$94.89
10/23/2024	LPC									\$1.40	\$96.29	\$96.29
10/23/2024	BILL	3619	R	31	19	0.61	80		11/18/2024	\$45.80	\$142.09	\$142.09
11/23/2024	LPC									\$2.09	\$144.18	\$144.18
11/23/2024	BILL	3665	R	31	46	1.48	270		12/18/2024	\$99.76	\$243.94	\$243.94
12/24/2024	LPC									\$3.59	\$247.53	\$247.53
12/24/2024	BILL	3806	R	29	141	4.86	694		1/21/2025	\$216.76	\$464.29	\$464.29
1/28/2025	LPC									\$6.84	\$471.13	\$471.13
1/28/2025	BILL	4062	R	35	256	7.31	1167		2/21/2025	\$359.21	\$830.34	\$830.34
2/25/2025	LPC									\$12.22	\$842.56	\$842.56
2/25/2025	BILL	4254	R	28	192	6.86	854		3/20/2025	\$292.26	\$1,134.82	\$1,134.82
3/26/2025	LPC									\$16.61	\$1,151.43	\$1,151.43
3/26/2025	BILL	4377	R	31	123	3.97	558		4/21/2025	\$233.71	\$1,385.14	\$1,385.14
4/29/2025	BILL	4405	R	14	28	2	146		5/22/2025	\$54.99	\$1,440.13	\$1,440.13

Specific Service Agreement Statement of Account SA- [REDACTED]

<b>Customer Name</b>	<b>From Date</b>	<b>To Date</b>			
PATRICE JENKINS	12/2/2023	12/2/2025			
<b>Service Address</b>	<b>Account Number</b>	<b>S A Number</b>	<b>Meter</b>	<b>Rate/Class</b>	
2134 N 58TH ST PHIL, PA 191313009	[REDACTED]	[REDACTED]	1850607	GS	

**STATEMENT**

Transaction Date	Transaction Type	Read Reading	# of Code	Days Usage	CCF Average CCF/Day	Heating DDDs	Payment Type	Due Date	Transaction Amount	Current Balance	Actual Balance
3/18/2024	WO								(\$4,919.66)	\$0.00	\$0.00
5/9/2024	REACT								\$4,919.66	\$4,919.66	\$4,919.66
5/9/2024	REXFER								(\$4,919.66)	\$0.00	\$0.00

Specific Service Agreement Statement of Account SA- [REDACTED]

Customer Name	From Date	To Date		
PATRICE JENKINS	5/7/2024	12/2/2025		
Service Address	Account Number	S A Number	Meter	Rate/Class
2346 N LAMBERT ST PHIL, PA 191324818	[REDACTED]	[REDACTED]	2163977	GS

STATEMENT

Transaction Date	Transaction Type	Read Reading	# of Code	Days Usage	CCF Average CCF/Day	Heating DDDs	Payment Type	Due Date	Transaction Amount	Current Balance	Actual Balance
5/9/2024	REXFER								\$4,919.66	\$4,919.66	\$4,919.66

Date: Nov 15, 2024  
Account#: [REDACTED]

|||||  
PATRICE JENKINS  
2346 N LAMBERT ST  
PHILADELPHIA PA 19132-4818

Dear PATRICE JENKINS ,

Thank you for submitting your CRP application.

We are currently reviewing your application and will contact you regarding your enrollment in 2-4 weeks.

If you have any questions, please call our Customer Service Team Monday through Friday between 8 a.m. and 6 p.m. at (215) 235-1000.

Para traducción en español, llame a (215) 235-2175.

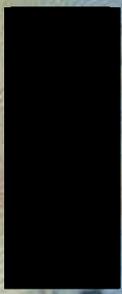
Sincerely,

Customer Service Department  
Philadelphia Gas Works



**Pennsylvania**  
visitPA.com USA

**IDENTIFICATION CARD**  
NOT FOR REAL ID  
PURPOSES



4d IDN: [REDACTED]  
3 DOB: [REDACTED]  
4b EXP: 05/31/2028  
4a ISS: 05/30/2024

VALID UNTIL 06-14-2026

*Jaylen Jones*

1 JENKINS-ALSTON  
2 TAYLOR SAVANNAH  
8 2346 N LAMBERT ST  
PHILADELPHIA, PA 19132

15 SEX: F 16 HGT: 5'-07" 18 EYES: BRO DUPS: 00

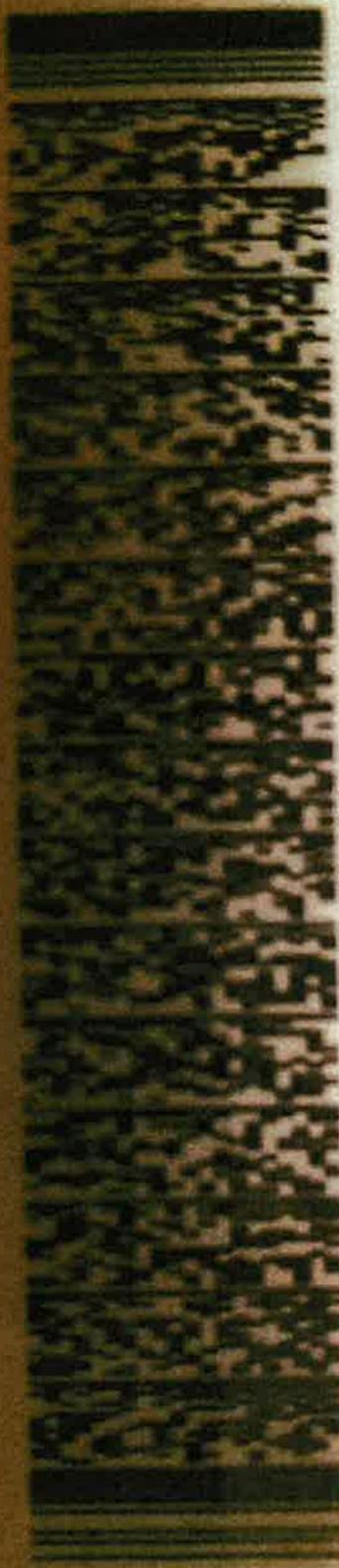


13 DD: 2415100603002  
4005980034670



08/23/1997  
RAV08/07/2018

21 02500807 1320271 06 1



Identification Purposes Only  
NOT a Driver's License

NOTIFY PENNDOT if you move within 15 days. Visit us at www.dmv.pa.gov  
or call us at 717-412-5300.TTY: 717-412-5300. Please call 717-412-5300

# Earnings Statement



ORAL & MAXILLOFACIAL SURGICAL  
2100 N BROAD STREET  
SUITE 106  
LANSDALE, PA 19446

Period Starting:  
Period Ending:  
Pay Date: 10/02/2024

Taxable Filing Status  
Exemptions/Allowances:  
Federal: -  
State: -  
Local: -  
Social Security Number

Tax Override:  
Federal:  
State:  
Local:

**Deja Jenkins-Polite**  
2346 North Lambert Street  
Philadelphia, PA 19132

Earnings	rate	hours/units	this period	year to date
Regular				
Holiday				
Meetings				
Travel				
<hr/>				
<b>Gross Pay</b>				
<hr/>				
			<b>this period</b>	<b>year to date</b>
<b>Statutory Deductions</b>				
Federal Income				
Social Security				
Medicare				
Pennsylvania State Income				
Pennsylvania State UI				
Phila R Local Income				
Hatfield T Local Income				
Hatfield Twp Local Services				
<hr/>				
<b>Net Pay</b>			<b>\$824.09</b>	

Other Benefits and Information	this period	year to date
Total Hours Worked		

Deposits	transit/ABA	amount
account number		824.09

**Important Notes**  
Basis of pay: Hourly

ORAL & MAXILLOFACIAL SURGICAL  
2100 N BROAD STREET  
SUITE 106  
LANSDALE, PA 19446

Pay Date: 10/02/2024

Deposited to the account	account number	transit/ABA	amount
			824.09

THIS IS NOT A CHECK

Deja Jenkins-Polite  
2346 North Lambert Street  
Philadelphia, PA 19132

# Earnings Statement



ORAL & MAXILLOFACIAL SURGICAL  
2100 N BROAD STREET  
SUITE 106  
LANSDALE, PA 19446

Period Starting:  
Period Ending:  
Pay Date: 10/30/2024

Taxable Filing Status  
Exemptions/Allowances: Tax Override:        
Federal:  
State:  
Local:  
Social Security Number:

**Deja Jenkins-Polite**  
2346 North Lambert Street  
Philadelphia, PA 19132

<u>Earnings</u>	<u>rate</u>	<u>hours/units</u>	<u>this period</u>	<u>year to date</u>
Regular				
Holiday				
Meetings				
Travel				
<b>Gross Pay</b>			<b>\$1,058.40</b>	
<b>Statutory Deductions</b>			<b>this period</b>	<b>year to date</b>
Federal Income				
Social Security				
Medicare				
Pennsylvania State Income				
Pennsylvania State UI				
Phila R Local Income				
Hatfield T Local Income				
Hatfield Twp Local Services				
<b>Net Pay</b>			<b>\$851.81</b>	

<u>Other Benefits and Information</u>	<u>this period</u>	<u>year to date</u>
Total Hours Worked		
<b>Deposits</b>	<b>transit/ABA</b>	<b>amount</b>
		851.81

**Important Notes**  
Basis of pay: Hourly

ORAL & MAXILLOFACIAL SURGICAL  
2100 N BROAD STREET  
SUITE 106  
LANSDALE, PA 19446

Pay Date: 10/30/2024

<u>Deposited to the account</u>	<u>account number</u>	<u>transit/ABA</u>	<u>amount</u>
			851.81

THIS IS NOT A CHECK

Deja Jenkins-Polite  
2346 North Lambert Street  
Philadelphia, PA 19132

**Earnings Statement**



ORAL & MAXILLOFACIAL SURGICAL  
2100 N BROAD STREET  
SUITE 106  
LANSDALE, PA 19446

Period Starting:  
Period Ending:  
Pay Date: 11/13/2024

Taxable Filing Status  
Exemptions/Allowances: Tax Override:  
Federal:  
State:  
Local:  
Social Security Number

**Deja Jenkins-Polite**  
2346 North Lambert Street  
Philadelphia, PA 19132

<u>Earnings</u>	<u>rate</u>	<u>hours/units</u>	<u>this period</u>	<u>year to date</u>	<u>Other Benefits and Information</u>	<u>this period</u>	<u>year to date</u>
Regular					Total Hours Worked		
Holiday							
Meetings							
Travel							
<b>Gross Pay</b>			<b>\$1,193.40</b>		<b>Deposits</b>		<b>amount</b>
					<b>account number</b>		<b>950.97</b>
					<b>Important Notes</b>		
<b>Statutory Deductions</b>			<b>this period</b>	<b>year to date</b>			
Federal Income							
Social Security							
Medicare							
Pennsylvania State Income							
Pennsylvania State UI							
Phila R Local Income							
Hatfield T Local Income							
Hatfield Twp Local Services							
<b>Net Pay</b>			<b>\$950.97</b>				

ORAL & MAXILLOFACIAL SURGICAL  
2100 N BROAD STREET  
SUITE 106  
LANSDALE, PA 19446

Pay Date: 11/13/2024

Deposited to the account \_\_\_\_\_ account number \_\_\_\_\_ transit/ARA \_\_\_\_\_ amount 950.97

**THIS IS NOT A CHECK**

Deja Jenkins-Polite  
2346 North Lambert Street  
Philadelphia, PA 19132

**Pennsylvania**  
DRIVER'S LICENSE  
NOT FOR REAL ID PURPOSES

SEX: M HT: 5-08" HAIR: BRN EYES: BRO SKIN: F

CLASS: C

RESTRICTIONS: NONE

EXPIRES: 05/28/2028

ISSUE DATE: 05/30/2024

DL

00

00-241561001204  
500000035516

JENKINS  
PATRICE D  
2346 N LAMBERT ST  
PHILADELPHIA, PA 19132

05/28/2028

05/30/2024

00

00-241561001204  
500000035516



PATRICE JENKINS 2346 N LAMBERT ST PHILADELPHIA PA, 19132-4818  Employee ID: SSN:	TAX DATA:	Federal	State
	Marital Status:		
	Allowances:		
	Additional Amount:		
	Additional Percentage:		

**PGW Exhibit 2**  
**Page 10 of 16**

HOURS AND EARNINGS							
Week Begin Dt	Week Ending Dt	Description	Rate	Current		YTD	
				Hours	Earnings	Hours	Earnings
21-SEP-2024	27-SEP-2024	Girard Estate Regular Earnings Bonus Length of Service Overtime Premium - LOS Overtime					
<b>TOTAL:</b>				33.25	964.25	1,244.51	36,182.83
<b>TOTAL HOURS WORKED:</b>				33.25			

BEFORE-TAX-DEDUCTIONS			STATUTORY DEDUCTIONS			AFTER-TAX-DEDUCTIONS		
Description	Current	YTD	Description	Current	YTD	Description	Current	YTD
			Fed Withholding					
			Fed MED/EE					
			Fed OASDI/EE					
			PA Unempl EE					
			PA Withholding					
			PA Withholding					
<b>TOTAL:</b>			<b>TOTAL:</b>			<b>TOTAL:</b>		
	0.00	0.00					0.00	0.00

TOTAL GROSS	BEFORE TAX DEDUCTIONS	FED TAXABLE GROSS	STATUTORY DEDUCTIONS	AFTER TAX DEDUCTIONS	NET PAY
Current: 964.25	0.00	964.25		0.00	746.48
YTD:	0.00			0.00	

SERVICE HOURS YTD  Length of Service Balance*: Holiday Balance*:  *Balance is as of paycheck(s) received prior to today. Any hours on the current paycheck are not included.	Absence Pay Available to Use: Eligible to Use: 0.00	DIRECT DEPOSIT DISBURSEMENT		
		Account Type	Transit #	Account #
				746.48
<b>NET PAY</b>				<b>746.48</b>

MESSAGE: Contact Customer Experience with any questions @ pay.timereporting@rhi.com or 1-888-744-9202.



PATRICE JENKINS 2346 N LAMBERT ST PHILADELPHIA PA, 19132-4818  Employee ID: SSN:	TAX DATA:	Federal	State
	Marital Status:		
	Allowances:		
	Additional Amount:		
	Additional Percentage:		

PGW Exhibit 2  
Page 12 of 16

HOURS AND EARNINGS						
Week Begin Dt	Week Ending Dt	Description	Rate	Current Hours	Earnings	YTD Earnings
12-OCT-2024	18-OCT-2024	Girard Estate Regular Earnings Bonus Length of Service Overtime Premium - LOS Overtime				

TOTAL:						
TOTAL HOURS WORKED:						

BEFORE-TAX-DEDUCTIONS			STATUTORY DEDUCTIONS			AFTER-TAX-DEDUCTIONS		
Description	Current	YTD	Description	Current	YTD	Description	Current	YTD
			Fed Withholdng					
			Fed MED/EE					
			Fed OASDI/EE					
			PA Unempl EE					
			PA Withholdng					
			PA Withholdng					
TOTAL:	0.00	0.00	TOTAL:			TOTAL:	0.00	0.00

TOTAL GROSS	BEFORE TAX DEDUCTIONS	FED TAXABLE GROSS	STATUTORY DEDUCTIONS	AFTER TAX DEDUCTIONS	NET PAY
Current: 877.25	0.00	877.25	194.67	0.00	682.58
YTD:	0.00			0.00	

SERVICE HOURS	YTD	Absence Pay Available to Use: Eligible to Use: 0.00	DIRECT DEPOSIT DISBURSEMENT		
Length of Service Balance*:			Account Type	Transit #	Account #
Holiday Balance*:					Amount
					682.58
*Balance is as of paycheck(s) received prior to today. Any hours on the current paycheck are not included.					
<b>NET PAY</b>					<b>682.58</b>

MESSAGE: Contact Customer Experience with any questions @ pay.timereporting@rhi.com or 1-888-744-9202.

PATRICE JENKINS 2346 N LAMBERT ST PHILADELPHIA PA, 19132-4818  Employee ID: SSN:	TAX DATA: Federal State
	Marital Status:
	Allowances:
	Additional Amount:
<b>PGW Exhibit 2</b> <b>Page 13 of 16</b>	

HOURS AND EARNINGS						
Week Begin Dt	Week Ending Dt	Description	Current Hours	Earnings	Hours	YTD Earnings
19-OCT-2024	25-OCT-2024	Girard Estate Regular Earnings Bonus Length of Service Overtime Premium - LOS Overtime				
<b>TOTAL:</b>						

BEFORE-TAX-DEDUCTIONS			STATUTORY DEDUCTIONS			AFTER-TAX-DEDUCTIONS		
Description	Current	YTD	Description	Current	YTD	Description	Current	YTD
			Fed Withholding					
			Fed MED/EE					
			Fed OASDI/EE					
			PA Unempl EE					
			PA Withholding					
			PA Withholding					
<b>TOTAL:</b>	0.00	0.00	<b>TOTAL:</b>	14		<b>TOTAL:</b>	0.00	0.00

TOTAL GROSS	BEFORE TAX DEDUCTIONS	FED TAXABLE GROSS	STATUTORY DEDUCTIONS	AFTER TAX DEDUCTIONS	NET PAY
Current: 551.00	0.00	551.00	108.09	0.00	442.91
YTD:	0.00			0.00	

SERVICE HOURS	YTD	Absence Pay Available to Use:	----- DIRECT DEPOSIT DISBURSEMENT -----			
		Eligible to Use: 0.00	Account Type	Transit #	Account #	Amount
Length of Service Balance*:						442.91
Holiday Balance*:						
*Balance is as of paycheck(s) received prior to today. Any hours on the current paycheck are not included.						
<b>NET PAY</b>						<b>442.91</b>

MESSAGE: Contact Customer Experience with any questions @ pay.timereporting@rhi.com or 1-888-744-9202.

PATRICE JENKINS 2346 N LAMBERT ST PHILADELPHIA PA, 19132-4818  Employee ID: SSN:	TAX DATA: Federal State
	Marital Status:
	Allowances:
	Additional Amount: Additional Percentage:

**PGW Exhibit 2**  
**Page 14 of 16**

**HOURS AND EARNINGS**

Week Begin Dt	Week Ending Dt	Description	Rate	Current Hours	Current Earnings	YTD Hours	YTD Earnings
26-OCT-2024	01-NOV-2024	Girard Estate Regular Earnings					
26-OCT-2024	01-NOV-2024	Girard Estate Overtime					
		Bonus Length of Service					
		Overtime Premium - LOS					

**TOTAL:**

**TOTAL HOURS WORKED:**

BEFORE-TAX-DEDUCTIONS			STATUTORY DEDUCTIONS			AFTER-TAX-DEDUCTIONS		
Description	Current	YTD	Description	Current	YTD	Description	Current	YTD
			Fed Withholdng					
			Fed MED/EE					
			Fed OASDI/EE					
			PA Unempl EE					
			PA Withholdng					
			PA Withholdng					
<b>TOTAL:</b>	0.00	0.00	<b>TOTAL:</b>	310.67	8,829.71	<b>TOTAL:</b>	0.00	0.00

TOTAL GROSS	BEFORE TAX DEDUCTIONS	FED TAXABLE GROSS	STATUTORY DEDUCTIONS	AFTER TAX DEDUCTIONS	NET PAY
Current: 1,279.63	0.00	1,279.63	310.67	0.00	968.96
YTD:	0.00			0.00	

SERVICE HOURS	YTD	Absence Pay Available to Use: Eligible to Use: 0.00	----- DIRECT DEPOSIT DISBURSEMENT -----			
Length of Service Balance*: Holiday Balance*:			Account Type	Transit #	Account #	Amount
*Balance is as of paycheck(s) received prior to today. Any hours on the current paycheck are not included.			Checking			968.96
			<b>NET PAY</b>			<b>968.96</b>

MESSAGE: Contact Customer Experience with any questions @ pay.time-reporting@rhi.com or 1-888-744-9202.

Date: Nov 18, 2024  
Account #: [REDACTED]

  
PATRICE JENKINS  
2346 N LAMBERT ST  
PHILADELPHIA PA 19132-4818

Dear PATRICE JENKINS,

We have reviewed your Customer Responsibility Program (CRP) Application, however, it is incomplete. To complete the application, you must address the issue(s) below within 14 days.

**What is the issue?**

- You did not submit income documentation.
- Your paystubs are not current (must be current within 30 days or 12 months).
- Your paystubs have missing or inconsistent information (e.g., year to date amount is not cumulative, pay dates do not reflect consistent time periods, deductions do not match tax rates).
- Your Department of Human Services letter is not current (must be current within one year).
- Your Department of Human Services letter is missing the pages that show benefits received and income reported.
- You must provide a letter from the Social Security Administration or a bank statement showing the direct deposit of your Social Security benefit to document your income from Social Security.
- Household members listed on your CRP application do not match the documentation provided.
- The person providing support did not provide complete contact information.
- Not signed by the person providing support.
- The amount of support is not stated.
- You are missing the date of birth, social security number, or the Individual Tax ID number for one or more household members listed on your application.

Other (if applicable):

**What should I do next?**

To complete your application, you must submit the missing information to us within 14 days. You can submit this information online or by mail. Instructions for each method are included on the back of this letter.

If we do not receive this information within 14 days, you will need to reapply.

If you have any questions, please call our Customer Service Team Monday through Friday between 8 a.m. and 6 p.m. at (215) 235-1000.

Para traducción en español, llame a (215) 235-2175.

**Sincerely,**

Customer Service Department  
Philadelphia Gas Works

## **APPLICATION PROCESSING INFORMATION**

---

Applications to the Customer Responsibility Program can be submitted online and by mail.

### **Online**

If you have registered for a "My Account," you can create a new application for the Customer Responsibility Program online using the link below. You can also check the status of a pending application, view messages about your current or prior application(s) as well as upload any missing documents to an incomplete application.

<https://www.pgworks.com/crp>

### **By Mail**

Please contact us at (215)235-1000 to request a paper application. You can submit the application by mail to the address below. Please make sure to write your account number on every piece of paper submitted.

**Philadelphia Gas Works CRP Program  
P.O. BOX 3529  
Philadelphia, PA 19122-0529**

  
PATRICE JENKINS  
2346 N LAMBERT ST  
PHILADELPHIA PA 19132-4818

Date: Mar 28, 2025  
Account#: 

Dear PATRICE JENKINS ,

Thank you for submitting your CRP application.

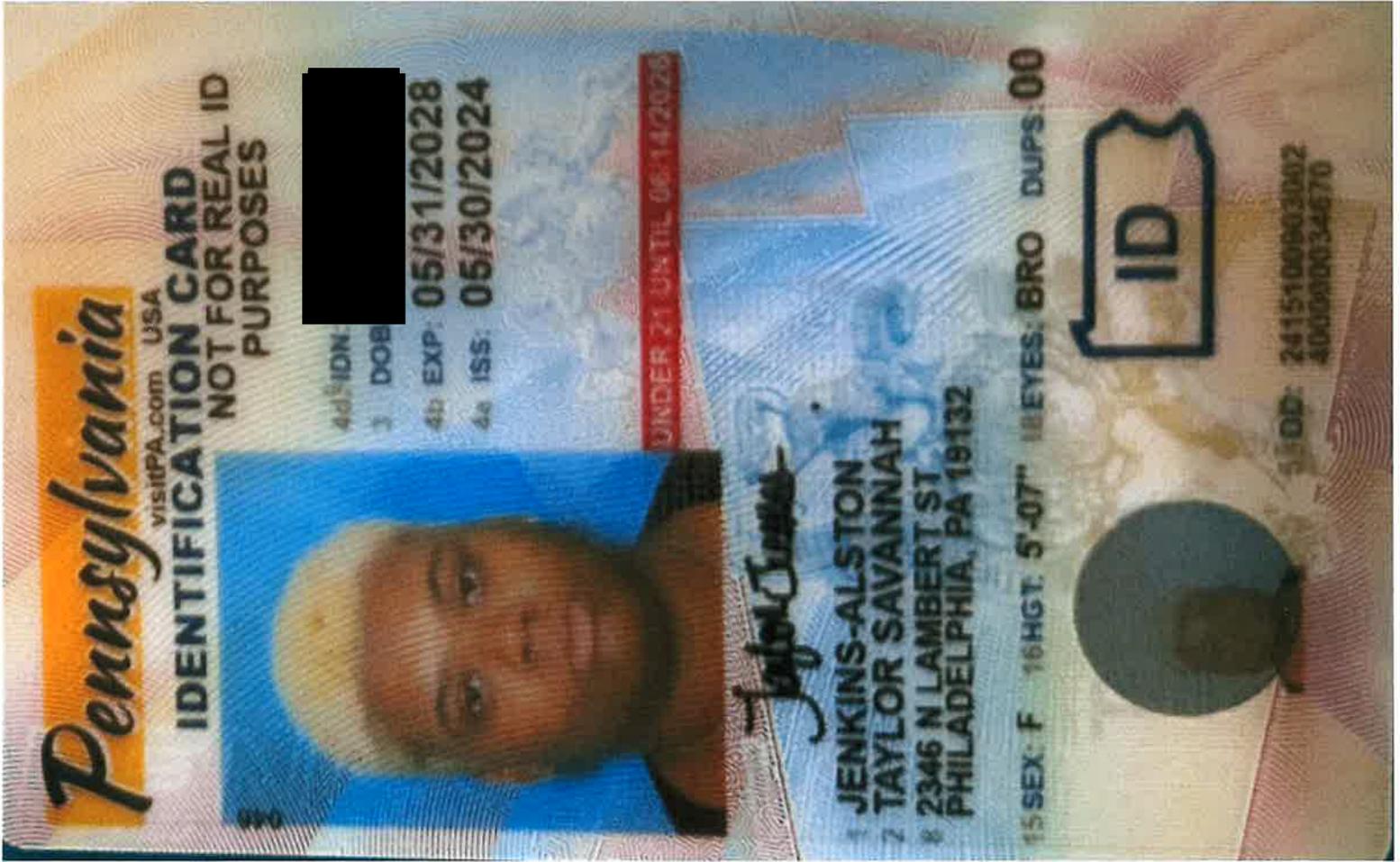
We are currently reviewing your application and will contact you regarding your enrollment in 2-4 weeks.

If you have any questions, please call our Customer Service Team Monday through Friday between 8 a.m. and 6 p.m. at (215) 235-1000.

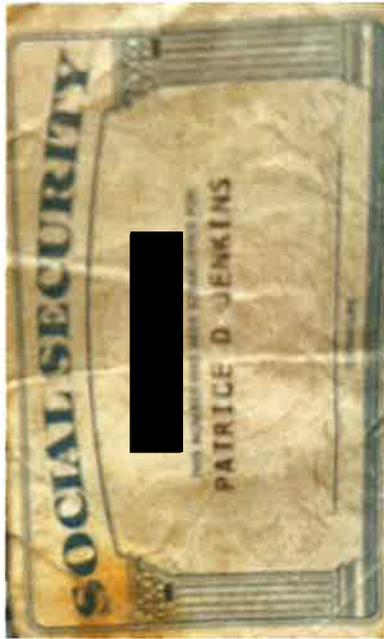
Para traducción en español, llame a (215) 235-2175.

Sincerely,

Customer Service Department  
Philadelphia Gas Works







Statement of Earnings For: <b>Patrice Jenkins</b>				West Philadelphia Achievement Charter	
Employee #:	Department	Period Begin: 3/2/2025	Check Date: 3/21/2025	6701 Callowhill Street	
Clock Number:	GL Account	Period End: 3/15/2025	Pay Type:	Philadelphia, PA 19151	
Company Id:	Federal Filing:	Exemptions:	Additional Tax:	PGW Exhibit 3	
	State Filing:	Exemptions:	Additional Tax:	Page 5 of 9	
				Check Message	
<b>Voucher Id</b>	<b>Check Amount</b>	<b>Gross Pay</b>	<b>Net Pay</b>		
	\$0.00		\$1,926.06		
<b>EARNINGS</b>	*Not included in Totals	^Hrs/Units = Units (Units not included in Totals)		<b>TAXES</b>	<b>DEDUCTIONS</b>
Description	Rate Hrs/Units	Dollars YTD	Hrs/Unit YTD Dollars	Description Current YTD	Description Current YTD
Regular	3.			SOC SEC EE	103b Mand 5% s
*Medical Pre-Tax				MED EE	
*ER Mand Match				FEDERAL WH	
Sick				PA WH	
Holiday				PHILADELPHIA	
				PA SUI EE	
<b>Total:</b>				<b>Total:</b>	<b>Total:</b>
<b>CURRENT PERIOD LEAVE ACCRUAL</b>				<b>DISTRIBUTION OF NET PAY</b>	
Personal	Accrued:	Taken:	Balance	Checking	Deposit Amount: 1,926.06
Sick	Accrued:	Taken:	Balance		
Vacation	Accrued:	Taken:	Balance		

West Philadelphia Achievement Charter Elementary School  
6701 Callowhill Street  
Philadelphia, PA 19151

<b>CHECK DATE</b>	<b>VOUCHER ID</b>
3/21/2025	

<b>TOTAL NET PAY</b>
*****\$1,926.06

**Patrice Jenkins**  
2346 N. Lambert Street  
Philadelphia, PA 19132

**NOT NEGOTIABLE**





Statement of Earnings For: **Patrice Jenkins**

**West Philadelphia Achievement Charter**

Employee #: \_\_\_\_\_ Department: \_\_\_\_\_ Period Begin: 1/19/2025 Check Date: 2/7/2025  
 Clock Number: \_\_\_\_\_ GL Account: \_\_\_\_\_ Period End: 2/1/2025 Pay Type: \_\_\_\_\_  
 Company Id: \_\_\_\_\_ State Filing: \_\_\_\_\_ Exemptions: \_\_\_\_\_ Additional Tax: \_\_\_\_\_

6701 Callowhill Street  
 Philadelphia, PA 19151

PGW Exhibit 3  
 Page 8 of 9

Voucher Id	Check Amount	Gross Pay	Net Pay	Check Message
	\$0.00		\$1,926.08	

EARNINGS				TAXES			DEDUCTIONS		
Description	Rate	Hrs/Units	Dollars YTD	Description	Current	YTD	Description	Current	YTD
Regular				SOC SEC EE					
Sick				IED EE					
Holiday				FEDERAL WH					
*Medical Pre-Tax				PA WH					
*ER Mand Match				PHILADELPHIA					
				PA SUI EE					

<b>Total:</b>				<b>Total:</b>			<b>Total:</b>		
---------------	--	--	--	---------------	--	--	---------------	--	--

CURRENT PERIOD LEAVE ACCRUAL				DISTRIBUTION OF NET PAY			
Personal	Accrued:	Taken:	Balance	Checking		Deposit Amount:	1,926.08
Sick	Accrued:	Taken:	Balance				
Vacation	Accrued:	Taken:	Balance				

West Philadelphia Achievement Charter Elementary  
 School  
 6701 Callowhill Street  
 Philadelphia, PA 19151

<b>CHECK DATE</b> 2/7/2025	<b>VOUCHER ID</b> _____
<b>TOTAL NET PAY</b> *****\$1,926.08	

**Patrice Jenkins**  
 2346 N. Lambert Street  
 Philadelphia, PA 19132

**NOT NEGOTIABLE**



PATRICE JENKINS  
2346 N LAMBERT ST  
PHILADELPHIA PA 19132-4818

Date: Mar 31, 2025  
Account#: [REDACTED]

Dear PATRICE JENKINS,

Thank you for applying for PGW's Customer Responsibility Program (CRP). After reviewing your application and supporting documents, we are unable to complete your application because:

- *It contains fraudulent information*

**What does this mean for me?**

If you were actively enrolled in CRP and wanted to recertify:

1. You have been removed from CRP and will no longer receive program benefits.
2. Any unpaid bills are now due in full.
3. We have cancelled your CRP application and you must wait at least 12 months before applying again.

If this was a new CRP application:

1. Your application cannot be processed.
2. Any unpaid bills are now due in full.
3. We have cancelled your CRP application and you must wait at least 12 months before applying again.

**What should I do next?**

If you have any questions, please call our Customer Service Team Monday through Friday between 8 a.m. and 6 p.m. at (215) 235-1000.

Para traducción en español, llame a (215) 235-2175.

Sincerely,

Philadelphia Gas Works

10-DAY SHUT OFF NOTICE  
Your Gas Service May Be Shut Off

PGW Exhibit 4  
Page 1 of 1

Your bill is past due. As a result, PGW will shut off gas to 2346 N LAMBERT ST on or after 8 a.m. on Apr 01, 2025. This notice will remain effective for 60 days. To talk about your bill or this notice, call our office at 215-235-1777.

**We will not shut off gas if you do ONE of the following:**

- Pay your past due amount of \$6,659.24.
- Pay the amount you owe on your most recent payment plan.
- Make a payment arrangement (you may be eligible for a special assistance program).
- Contact us to dispute the bill.

**At a minimum, you may have to pay all of the following before we turn your service on:**

Past Due Amount	\$6,659.24
Security Deposit	\$268.00
Turn On Charge	\$123.23
Total	\$7,050.47

**Plus \$372.00 if we must dig up the street.**

**You are also responsible for all gas service provided to you that is now or has become past due. If shut off, you may be required to pay more than the amount on this notice to have gas turned on.**

**MEDICAL EMERGENCY NOTICE**

LET US KNOW IF SOMEONE LIVING IN YOUR HOME IS SERIOUSLY ILL OR HAS A MEDICAL CONDITION. WE WILL NOT SHUT OFF YOUR SERVICE during such illness, provided you:

1. Have your licensed physician, physician's assistant or nurse practitioner certify in writing that such an illness exists and that it may be aggravated if your service is stopped; and
2. Make arrangements to pay your current bills.
3. Contact us by calling 215-235-1777.
4. HAVE A LICENSED PHYSICIAN, PHYSICIAN'S ASSISTANT OR NURSE PRACTITIONER SEND PGW A LETTER WITHIN 3 DAYS, VERIFYING THE MEDICAL CONDITION.

If you are a victim of abuse and have an order issued by the courts, special medical emergency procedures and protections may be available. **Call us immediately at 215-235-1000 to inform us so these special procedures and protection can be provided.** You will be required to provide us with a copy of the court order.

**IMPORTANT TO KNOW – BEFORE WE SHUT OFF YOUR GAS SERVICE**

- You may be eligible for a payment agreement or special assistance program. Enrollment into this program may be a way of avoiding shut off. Contact us immediately at 215-235-1777 to find out if you're eligible, and how to enroll. Documentation of your income may be required.
- If you have questions or need more information, please call us today at 215-235-1777 or write us at P.O. Box 3500, Philadelphia, PA 19122. After you talk with PGW, if you are not satisfied, you may file a complaint with the Pennsylvania Public Utility Commission (PUC). The PUC may delay the shutoff if you file the complaint before the shut-off date. To contact them call 1 (800) 692-7380 or write to: Pennsylvania Public Utility Commission, P.O. Box 3265, Harrisburg, PA 17105-3265.

- Call us if your landlord pays your utility bill. You have certain legal protections.
- If you have trouble understanding or speaking English call us for free interpretation.
- Please contact us if you are disabled and need assistance.
- All adult occupants of the premises whose names are on the mortgage, deed or lease are considered the 'customer' and are responsible for payment of the bill.
- If service is shut off, ANY adult occupant who has been living at the premises may have to pay all or portions of this bill to have service restored.
- If your service is shut off, you must contact us after your payment has been made to be sure you have met all conditions to have the service turned on and to arrange access to your premises. It may take up to seven days to have your service restored.
- If you have a valid **Protection From Abuse** order or an order issued by a court of competent jurisdiction in this Commonwealth that provides clear evidence that you are a victim of domestic violence, there are additional protections available to you. **Call us immediately at 215-235-1000.** You will be required to provide us with a copy of the order.

**WINTER SHUT OFF PROVISIONS Dec. 1-March 31**

- **Contact us before the shut off date** to give us household and occupant information to see if you qualify for any assistance programs.
- **If you are low income there are special rules about whether we may shut off your gas in the winter.** Add together the monthly income in your household. Look at the chart below to determine your group. You may need to provide us with proof of income.
- **If your income is 150% of the federal poverty guidelines or below, we must first ask the PUC for permission to shut off your service.** We will notify you prior to shutting off service if we ask the PUC for permission to terminate your gas service.
- **If your income is above 150% but does not exceed 250% of the federal poverty guidelines, we will not shut off your service if one of these conditions applies to you:**
  - o Someone in your household is 12 or younger or 65 or older; or
  - o You have paid at least one-half of your last two monthly gas bills; or
  - o If over the last two months you have paid at least 15% of your household income toward the gas bills.
- **If we reconnect your service during the winter months (between December 1st and March 31st)** we will restore your service within 24 hours of you meeting all requirements to have service reconnected. When street digging is required, it may take up to seven days.

**Federal Poverty Guidelines (FPG) 2025**

Household Size	Your income is 150% of the FPG or below if your monthly gross is:	Your income is between 151% - 250% of the FPG if your monthly gross is:
	1	\$1,956 or less
2	\$2,644 or less	\$2,645-\$4,406
3	\$3,331 or less	\$3,332-\$5,552
4	\$4,019 or less	\$4,020-\$6,698
Each add. person add	\$688	\$689-\$1,146

PL\_20250313180101.dat-18043-000004480

**Please return this portion with your payment.**  
**Write your account number on your check or money order made payable to Philadelphia Gas Works**

**Account Number:**  
**Notice Date:**  
**Please Pay:**

[REDACTED]  
M [REDACTED]  
**\$6,659.24**

Place "X" in box for address corrections. Print corrections on reverse side.

**Amount Enclosed:**

|||||  
PATRICE JENKINS  
2346 N LAMBERT ST  
PHILA PA 19132-4818

|||||  
**Philadelphia Gas Works**  
**P.O. Box 11700**  
**Newark, NJ 07101-4700**

**Customer Contact: Service** [X]

Date: 04/07/2025 Time: 1:25:00 PM Source: \_\_\_\_\_ Related Tran: \_\_\_\_\_  
CC Type: SERV - Service [v] Created: 04/07/2025 at: 1:25:55 PM by: NSTOCKLI  
Area: 800 - Residential General Service [v] Changed: \_\_\_\_\_ at: \_\_\_\_\_ by: \_\_\_\_\_  
 Surveyable Auto Delete Date: 04/07/2029 Class: Inquiry

Comments: Nick Stocklin was here on a 96 C & C Field Shut Off order with Order # 15449933 , with a result of Completed Found Gas ON , Left Gas OFF , with activities of ( Field Collections - NPSO Completed ) , with comments of "Off at curb. Left PTN"

Letter

Status: \_\_\_\_\_ Print Date: \_\_\_\_\_ Run Number: \_\_\_\_\_ Reprint: [v]  
Template: \_\_\_\_\_

Review List Tickler

Follow Up: [ ]  to Review Group  to User  
Priority: [ ] Review Group... [ ]

Account: [redacted] Jenkins, Patrice [v]  
Premise: 2346 N Lambert St/Phila,Pa [v]  
Person: Jenkins, Patrice [v]

[Change] [Cancel]

**Search For Negotiated Payment Arrangement** [X]

Search Criteria

Account... [REDACTED]  Jenkins, Patrice

From Date: 12/01/2025

Apply Criteria

OK

Cancel

Date	Seq	Status	Comments
05/06/2024	1	Canceled	

1 record(s) found.

**Search For Negotiated Payment Arrangement** [X]

Search Criteria

Account... [REDACTED]  Jenkins, Patrice

From Date: 12/01/2025

Apply Criteria

OK

Cancel

Date	Seq	Status	Comments
05/12/2023	1	Broken	
08/03/2021	1	Broken	
05/14/2021	1	Canceled	PAR21
05/14/2021	2	Broken	PAR21
08/05/2019	1	Broken	
05/24/2019	1	Broken	

6 record(s) found.

# PHILADELPHIA GAS WORKS

## PUC

### Opening XML

**Case Number:** 4052923  
**Company Name:** PGW (PHILA. GAS WORKS (NGDC))  
**Company Code:** 0766  
**Company Type:** GAS TRANSPORTER  
**Customer First Name:** PATRICE  
**Customer Middle Initial:**  
**Customer Last Name:** JENKINS  
**Customer Account Number:** [REDACTED]  
**Customer Home Phone w/ Area Code:**  
**Customer Work Phone w/ Area Code:**  
**Customer Service Class:** RESIDENTIAL  
**Customer Mail Address 1:**  
**Customer Mail Address 2:**  
**Customer Mail Address City:**  
**Customer Mail Address State:**  
**Customer Mail Address Zip:**  
**Customer Mail Address 4-Zip:**  
**Customer Service Address 1:** 2346 N LAMBERT ST  
**Customer Service Address 2:**  
**Customer Service Address City:** PHILADELPHIA  
**Customer Service Address State:** PA  
**Customer Service Address Zip:** 19132  
**Customer Service Address 4-Zip:**  
**Customer Family Adults:** 3  
**Customer Family Children:** 1  
**Customer Family Age:** 15 MOS  
**Gross Income**  

Source	Income Amount
AD1 WAGES	3466.67
AD2 NONE	0
AD3 WAGES	4116.67

**Date Open:** 2025-04-08  
**Reason For Contact:** STRAIGHT OFF- SVC TERMINATED/SUSPENDED-NO DISPUTE- PAR NEEDED (# 82)  
**Term Date:** 2025-04-07  
**Business Name:**  
**Case Problem:**  
**Company Position:** 04/08/2025 CUSTOMER MUST PAY \$2700 TO RESTORE SERVICE  
**Related Information:** 82 – SERVICE IS OFF. NO DISPUTE. SERVICE TERMINATED/SUSPENDED. PAYMENT ARRANGEMENT NEEDED. - RELIEF SOUGHT - RESTORATION OF SERVICE AND PAR THE CELL PHONE NUMBER [REDACTED] [REDACTED] HAS BEEN ALLOWED TO BE SHARED. THE EMAIL ADDRESS PATRICE\_JENKINS74@COMCAST.NET HAS BEEN ALLOWED TO BE SHARED.  
**Case Misc Info:**  
**Hot Issue:**  
**Case Origin:** TELEPHONE  
**Prior Case Number:** 3989103  
**Universal Service:** N  
**Arrearage:** 7000  
**BCS Investigator First Name:** BCS  
**BCS Investigator Last Name:** CASE POOL  
**BCS Investigator Phone w/ Area Code:** [REDACTED]  
**BCSIntaker First Name:** AMY  
**BCSIntaker Last Name:** FREEBURN  
**Number Of Time Send:** 1  
**Number Of Time Faxed:** 0  
**Number Of Time Faxed:** 7172658273

# PHILADELPHIA GAS WORKS

## PUC

### Closing XML

**Case Number:** 4052923  
**Company Name:** PGW (PHILA. GAS WORKS (NGDC))  
**Company Code:** 0766  
**Company Type:** GAS TRANSPORTER  
**Customer First Name:** PATRICE  
**Customer Middle Initial:**  
**Customer Last Name:** JENKINS  
**Account Number:** [REDACTED]  
**Service Address 1:** 2346 N LAMBERT ST  
**Service Address 2:**  
**Service City:** PHILADELPHIA  
**Service State:** PA  
**Service Zip 5:** 19132  
**Service Zip 4:**  
**Decision Issue:** Y  
**Oral Written:** W  
**Violation:** NO  
**Chapter:**  
**Section Rule:**  
**Total Balance:** 7214.04  
**Date Closed:** 2025-04-10  
**Resolution:** DECISION ISSUED: CUSTOMER HAS MADE 1 PAYMENT IN 12 MONTHS. CUSTOMER HAS NOT DEMONSTRATED GOOD FAITH IN SATISFYING THEIR ACCOUNT BALANCE. COMPANY POSITION UPHELD ON WHAT THE CUSTOMER MUST PAY TO RESTORE SERVICE.  
**Balance Date:** 2025-04-10  
**Service Restored Pay:** 0.00  
**Service Continue Amount:** 0.00  
**Service Continue Date:**  
**Terms:**  
**Special Budget Amount:** 0.00  
**Regular Budget Amount:** 145.00  
**Arrears Payment Plus:** 0.00  
**FinalMonthlyPayment:** 0.00  
**CurrentMonthlyPayment:** 0.00  
**EndMonthlyPayment:** 0.00  
**LetterDescription:**  
**HeadDate:** 2025-04-11  
**Paragraph:**  
**Bill Date:**  
**Reconnect Amount:** 0  
**Pay Amount:** 0.00  
**BCS Investigator First Name:** BRIDGET  
**BCS Investigator Last Name:** GAFFNEY  
**Number Of Time Send:** 1  
**Number Of Time Faxed:** 0  
**PUC Fax:** 7172658273