COMMONWEALTH OF KENTUCKY

BEFORE THE PUBLIC SERVICE COMMISSION

In the Matter of:

MICHAEL HUNTER D/B/A M. H. REHAB COMPLAINANT v. KENTUCKY UTILITIES COMPANY DEFENDANT	))))))))))	CASE NO. 2005-00012

ORDER TO SATISFY OR ANSWER

Kentucky Utilities Company ("KU") is hereby notified that it has been named as defendant in a formal complaint filed on December 29, 2004, a copy of which is attached hereto.

Pursuant to 807 KAR 5:001, Section 12, KU is HEREBY ORDERED to satisfy the matters complained of or file a written answer to the complaint within 10 days from the date of service of this Order.

Should documents of any kind be filed with the Commission in the course of this proceeding, the documents shall also be served on all parties of record.

Done at Frankfort, Kentucky, this 12th day of January, 2005.

By the Commission

ATTEST:

Executive Director

RECEIVED
DEC 2 9 2004
PSC Consumer Services

COMMONWEALTH OF KENTUCKY

BEFORE THE PUBLIC SERVICE COMMISSION

In the matter of:

M H REHAB
(Your Full Name)
COMPLAINANT

VS.

K. U.
(Name of Utility)
DEFENDANT

Case 2005-00012

RECEIVED
DEC 29 2004
PUBLIC SERVICE COMMISSION

COMPLAINT

The complaint of MICHAEL HUNTER respectfully shows:
(Your Full Name)

D.B.A.

(a) M.H REHAB
(Your Full Name)

2220 NICHOLASVILLE RD SUITE 120
(Your Address)

(b) K. U.
(Name of Utility)

K.U. LEXINGTON KY
(Address of Utility)

(c) That: I WAS PLACED ON THE WRONG
(Describe here, attaching additional sheets if necessary,

RATE. I WAS NOT GIVEN A
the specific act, fully and clearly, or facts that are the reason

CHOICE, IN CLOSED ARE COPYS
and basis for the complaint.)

OF K.U. BILL, NOTE THE
INCREASE IN JULY AND THE

Continued on Next Page

Formal Complaint

M. H. REHAB vs. K. U.

DECREASE, AFTER I CALLED IN NOV. PLUS NOTE DEC. 28, 04 37.05. 01.28.04 63.58 IS STILL ALMOST DOUBLED. EVEN BEFORE THE ALLEGED ~~AN~~ RATE INCREASE.

Wherefore, complainant asks KENTUCKY
(Specifically state the relief desired.)

Dated at LEXINGTON, Kentucky, this 27 day
(Your City)

of 12, ~~19~~ 2004
(Month)

(Your Signature)

(Name and address of attorney, if any)

807 KAR 5:001. Rules of procedure.

Section 12. Formal Complaints.

(1) **Contents of complaint.** Each complaint shall be headed "Before the Public Service Commission," shall set out the names of the complainant and the name of the defendant, and shall state:

(a) The full name and post office address of the complainant.

(b) The full name and post office address of the defendant.

(c) Fully, clearly, and with reasonable certainty, the act or thing done or omitted to be done, of which complaint is made, with a reference, where practicable, to the law, order, or section, and subsections, of which a violation is claimed, and such other matters, or facts, if any, as may be necessary to acquaint the commission fully with the details of the alleged violation. The complainant shall set forth definitely the exact relief which is desired (see **Section 15(1)** of this administrative regulation).

(2) **Signature.** The complaint shall be signed by the complainant or his attorney, if any, and if signed by such attorney, shall show his post office address. Complaints by corporations or associations, or any other organization having the right to file a complaint, must be signed by its attorney and show his post office address. No oral or unsigned complaints will be entertained or acted upon by the commission.

(3) **Number of copies required.** At the time the complainant files his original complaint, he must also file copies thereof equal in number to ten (10) more than the number of persons or corporations to be served.

(4) **Procedure on filing of complaint.**

(a) Upon the filing of such complaint, the commission will immediately examine the same to ascertain whether it establishes a prima facie case and conforms to this administrative regulation. If the commission is of the opinion that the complaint does not establish a prima facie case or does not conform to this administrative regulation, it will notify the complainant or his attorney to that effect, and opportunity may be given to amend the complaint within a specified time. If the complaint is not so amended within such time or such extension thereof as the commission, for good cause shown, may grant, it will be dismissed.

(b) If the commission is of the opinion that such complaint, either as originally filed or as amended, does establish a prima facie case and conforms to this administrative regulation, the commission will serve an order upon such corporations or persons complained of under the hand of its secretary and attested by its seal, accompanied by a copy of said complaint, directed to such corporation or person and requiring that the matter complained of be satisfied, or that the complaint be answered in writing within ten (10) days from the date of service of such order, provided that the commission may, in particular cases, require the answer to be filed within a shorter time.

(5) **Satisfaction of the complaint.** If the defendant desires to satisfy the complaint, he shall submit to the commission, within the time allowed for satisfaction or answer, a statement of the relief which he is willing to give. Upon the acceptance of this offer by the complainant and the approval of the commission, no further proceedings need be taken.

(6) **Answer to complaint.** If satisfaction be not made as aforesaid, the corporation or person complained of must file an answer to the complaint, with certificate of service on other parties endorsed thereon, within the time specified in the order or such extension thereof as the commission, for good

cause shown, may grant. The answer must contain a specific denial of such material allegations of the complaint as controverted by the defendant and also a statement of any new matter constituting a defense. If the answering party has no information or belief upon the subject sufficient to enable him to answer an allegation of the complaint, he may so state in his answer and place his denial upon that ground (see **Section 15(2)** of this administrative regulation).

807 KAR 5:001. Rules of procedure.

Section 15. Forms.

(1) In all practice before the commission the following forms shall be followed insofar as practicable:

(a) Formal complaint.

(b) Answer.

(c) Application.

(d) Notice of adjustment of rates.

(2) Forms of formal complaint.
(3) Form of answer to formal complaint.
(4) Form of application.
(5) Form of notice to the commission of adjustment of rates

Before the Public Service Commission

(Insert name of complainant) Complainant	))	
	)	No. _____
vs.	))	(To be inserted by the secretary)
(Insert name of each defendant) Defendant	))	

COMPLAINT

The complaint of (here insert full name of each complainant) respectfully shows:

(a) That (here state name, occupation and post office address of each complainant).

(b) That (here insert full name, occupation and post office address of each defendant).

(c) That (here insert fully and clearly the specific act or thing complained of, such facts as are necessary to give a full understanding of the situation, and the law, order, or rule, and the section or sections thereof, of which a violation is claimed).

WHEREFORE, complainant asks (here state specifically the relief desired).

Dated at Lexington, Kentucky, this 27 day of December, ~~19~~ 2004.

M. H. REHAB
(Name of each complainant)

_____
(Name and address of attorney, if any)

Customer Service: (859) 367-1200
Mon-Fri 7AM-6PM
www.lgeenergy.com

DATE DUE	AMOUNT DUE
12/28/04	$37.05

Conserve paper! With e-bill, we'll send you an e-mail each month letting you know your bill is available for viewing and, if you choose, online payment. Sign up today by visiting our website at www.lgeenergy.com.

ACCOUNT INFORMATION

Account Number: 011763-022 0
Account Name: M H Rehab
Service Address: 2220 Nicholasville Rd Ste 120
Lexington,Ky

Averages for Billing Period	This Year	Last Year
Average Temperature	46º	45º
Number of Days Billed	32	30
Electric/kwh per Day	12.3	14.7

BILLING SUMMARY

Previous Balance		173.13
Payments as of 12/14		(173.13)
Balance as of 12/14		0.00
Electric Charges	32.97	
Taxes and Fees	4.08	
Utility Charges as of 12/14		37.05
Total Amount Due		**37.05**

ELECTRIC CHARGES

Rate Type: GS-GENERAL SERVICE

Customer Charge	10.00
Energy Charge	20.99
Other Charges For Above Rates	
Fuel Adjustment ($.00307 x 394 kwh)	1.21
GS DSM ($.00024 x 394 kwh)	0.09
Environmental Surcharge (2.850% x $32.29)	0.92
Merger Surcredit (2.576% CR x $33.21)	-0.86
ESM Electric Adj (2.330% x $32.35)	0.75
Value Delivery Surcredit (0.380% CR x $33.10)	-0.13
Total Electric Charges	**$32.97**

ease see reverse side for additional charges.

Please bring entire bill when paying in person.

Customer Service: (859) 367-1200
Mon-Fri 7AM-6PM
www.lgeenergy.com

DATE DUE	AMOUNT DUE
11/24/04	$173.13

View your previous 12-months' energy usage online at www.lgeenergy.com.

ACCOUNT INFORMATION

Account Number: 011763-022 0
Account Name: M H Rehab
Service Address: 2220 Nicholasville Rd Ste 120
Lexington,Ky

Averages for Billing Period	This Year	Last Year
Average Temperature	56º	55º
Number of Days Billed	29	29
Electric/kwh per Day	12.7	15.2

BILLING SUMMARY

Previous Balance		173.20
Payments as of 11/12		(173.20)
Balance as of 11/12		0.00
Electric Charges	154.09	
Taxes and Fees	19.04	
Utility Charges as of 11/12		173.13
Total Amount Due		**173.13**

ELECTRIC CHARGES

Rate Type: LP-SECONDARY

Customer Charge		75.00
Energy Charge		8.14
Demand Charge	Minimum Applied	66.50
Other Charges For Above Rates		
Fuel Adjustment ($.00316 x 370 kwh)		1.17
LP DSM ($.00003 x 370 kwh)		0.01
Environmental Surcharge (2.880% x $150.82)		4.34
Merger Surcredit (2.576% CR x $155.16)		-4.00
ESM Electric Adj (2.330% x $151.16)		3.52
Value Delivery Surcredit (0.380% CR x $154.68)		-0.59
Total Electric Charges		**$154.09**

3391

ease see reverse side for additional charges.

Please bring entire bill when paying in person.

Customer Service: (859) 367-1200
Mon-Fri 7AM-6PM
www.lgeenergy.com

DATE DUE	AMOUNT DUE
10/26/04	$173.20

Enroll in our Automatic Bank Club (ABC) and never worry about making a late payment.

ACCOUNT INFORMATION

Account Number: 011763-022 0
Account Name: M H Rehab
Service Address: 2220 Nicholasville Rd Ste 120
Lexington,Ky

Averages for Billing Period	This Year	Last Year
Average Temperature	63º	60º
Number of Days Billed	29	29
Electric/kwh per Day	15.5	15.8

BILLING SUMMARY

Previous Balance		179.86
Payments as of 10/14		(179.86)
Balance as of 10/14		0.00
Electric Charges	154.16	
Taxes and Fees	19.04	
Utility Charges as of 10/14		173.20
Total Amount Due		**173.20**

ELECTRIC CHARGES

Rate Type: LP-SECONDARY

Customer Charge		75.00
Energy Charge		9.94
Demand Charge	Minimum Applied	66.50
Other Charges For Above Rates		
Fuel Adjustment ($.00213 x 452 kwh)		0.96
LP DSM ($.00003 x 452 kwh)		0.01
Environmental Surcharge (1.850% x $152.41)		2.82
Merger Surcredit (2.576% CR x $155.23)		-4.00
ESM Electric Adj (2.330% x $151.23)		3.52
Value Delivery Surcredit (0.380% CR x $154.75)		-0.59
Total Electric Charges		**$154.16**

3324

Please see reverse side for additional charges.

Please bring entire bill when paying in person.

Customer Service: (859) 367–1200
Mon–Fri 7AM–6PM
www.lgeenergy.com

DATE DUE	AMOUNT DUE
09/27/04	$179.86

Now you can view and pay your utility bills by internet. It's easy! Register your account online at www.lgeenergy.com.

ACCOUNT INFORMATION

Account Number: 011763–022 0
Account Name: M H Rehab
Service Address: 2220 Nicholasville Rd Ste 120
Lexington,Ky

Averages for Billing Period	This Year	Last Year
Average Temperature	71 º	74 º
Number of Days Billed	32	32
Electric/kwh per Day	22.5	27.8

BILLING SUMMARY

Previous Balance		181.56
Payments as of 09/15		(181.56)
Balance as of 09/15		0.00
Electric Charges	160.08	
Taxes and Fees	19.78	
Utility Charges as of 09/15		179.86
Total Amount Due		**179.86**

ELECTRIC CHARGES

Rate Type: LP–SECONDARY

Customer Charge		75.00
Energy Charge		15.88
Demand Charge	Minimum Applied	66.50
Other Charges For Above Rates		
Fuel Adjustment ($.00152 x 722 kwh)		1.10
LP DSM ($.00003 x 722 kwh)		0.02
Environmental Surcharge (1.690% x $158.50)		2.68
Merger Surcredit (2.576% CR x $161.18)		–4.15
ESM Electric Adj (2.330% x $157.03)		3.66
Value Delivery Surcredit (0.380% CR x $160.69)		–0.61
Total Electric Charges		**$160.08**

Please see reverse side for additional charges.

Please bring entire bill when paying in person.

Customer Service: (859) 367-1200
Mon-Fri 7AM-6PM
www.lgeenergy.com

DATE DUE	AMOUNT DUE
08/26/04	$181.56

You can view your current and previous bills online at www.lgeenergy.com. It's safe, secure, fast and easy.

ACCOUNT INFORMATION

Account Number: 011763-022 0
Account Name: M H Rehab
Service Address: 2220 Nicholasville Rd Ste 120
Lexington,Ky

Averages for Billing Period	This Year	Last Year
Average Temperature	71º	74º
Number of Days Billed	29	29
Electric/kwh per Day	26.7	23.9

BILLING SUMMARY

Previous Balance		124.21
Payments as of 08/16		(124.21)
Balance as of 08/16		0.00
Electric Charges	161.58	
Taxes and Fees	19.98	
Utility Charges as of 08/16		181.56
Total Amount Due		**181.56**

ELECTRIC CHARGES

Rate Type: LP-SECONDARY

Customer Charge		75.00
Energy Charge		17.05
Demand Charge	Minimum Applied	66.50
Other Charges For Above Rates		
Fuel Adjustment ($.00133 x 775 kwh)		1.03
LP DSM ($.00003 x 775 kwh)		0.02
Environmental Surcharge (1.940% x $159.60)		3.10
Merger Surcredit (2.576% CR x $162.70)		-4.19
ESM Electric Adj (2.330% x $158.51)		3.69
Value Delivery Surcredit (0.380% CR x $162.20)		-0.62
Total Electric Charges		**$161.58**

Please see reverse side for additional charges.

Please bring entire bill when paying in person.

Customer Service: (859) 367-1200
Mon-Fri 7AM-6PM
www.lgeenergy.com

DATE DUE	AMOUNT DUE
07/28/04	$124.21

Conserve paper – Go Electronic! Did you know we can send your utility bill by e-mail? Switching to e-bill is easy when you visit our website: www.lgeenergy.com.

ACCOUNT INFORMATION

Account Number: 011763-022 0
Account Name: M H Rehab
Service Address: 2220 Nicholasville Rd Ste 120
Lexington,Ky

Averages for Billing Period	This Year	Last Year
Average Temperature	73º	74º
Number of Days Billed	31	30
Electric/kwh per Day	23.9	34.4

BILLING SUMMARY

Previous Balance		79.57
Payments as of 07/16		(79.57)
Balance as of 07/16		0.00
Electric Charges	110.54	
Taxes and Fees	13.67	
Utility Charges as of 07/16		124.21
Total Amount Due		**124.21**

ELECTRIC CHARGES

Rate Type: LP-SECONDARY

Customer Charge		36.29
Energy Charge		18.90
Demand Charge	Minimum Applied	53.39
Other Charges For Above Rates		
Fuel Adjustment ($.00008 x 742 kwh)		0.06
LP DSM ($.00003 x 742 kwh)		0.02
Environmental Surcharge (2.420% x $108.66)		2.63
Merger Surcredit (2.568% CR x $111.29)		-2.86
ESM Electric Adj (2.330% x $108.43)		2.53
Value Delivery Surcredit (0.380% CR x $110.96)		-0.42
Total Electric Charges		**$110.54**

$3/25

Please see reverse side for additional charges.

Please bring entire bill when paying in person.

Customer Service: (859) 367-1200
Mon-Fri 7AM-6PM
www.lgeenergy.com

DATE DUE	AMOUNT DUE
06/28/04	$79.57

Need to report a problem with a streetlight? It's easy when you use the form on our website (www.lgeenergy.com), or you can call us with the details.

ACCOUNT INFORMATION

Account Number: 011763-022 0
Account Name: M H Rehab
Service Address: 2220 Nicholasville Rd Ste 120
Lexington,Ky

Averages for Billing Period	This Year	Last Year
Average Temperature	71º	63º
Number of Days Billed	31	32
Electric/kwh per Day	30.5	15.7

BILLING SUMMARY

Previous Balance		64.44
Payments as of 06/16		(64.44)
Balance as of 06/16		0.00
Electric Charges	70.83	
Taxes and Fees	8.74	
Utility Charges as of 06/16		79.57
Total Amount Due		**79.57**

ELECTRIC CHARGES

Rate Type: LP-SECONDARY

Energy Charge		27.17
Demand Charge	Minimum Applied	41.10
Other Charges For Above Rates		
Fuel Adjustment ($.00120 x 946 kwh)		1.14
LP DSM ($.00003 x 946 kwh)		0.03
Environmental Surcharge (2.660% x $69.44)		1.85
Merger Surcredit (2.538% CR x $71.29)		-1.81
ESM Electric Adj (2.330% x $69.48)		1.62
Value Delivery Surcredit (0.380% CR x $71.10)		-0.27
Total Electric Charges		**$70.83**

3063

Please see reverse side for additional charges.

Please bring entire bill when paying in person.

Customer Service: (859) 367–1200
Mon–Fri 7AM–6PM
www.lgeenergy.com

DATE DUE	AMOUNT DUE
05/27/04	$64.44

No more checks! More than 110,000 of our customers are now paying their bills through our Automatic Bank Club (ABC) to save paper and time. Call customer service to sign up or to learn more about ABC!

ACCOUNT INFORMATION

Account Number: 011763–022 0
Account Name: M H Rehab
Service Address: 2220 Nicholasville Rd Ste 120
Lexington,Ky

Averages for Billing Period	This Year	Last Year
Average Temperature	62º	62º
Number of Days Billed	29	30
Electric/kwh per Day	18.3	15.9

BILLING SUMMARY

Previous Balance		65.34
Payments as of 05/17		(65.34)
Balance as of 05/17		0.00
Electric Charges	57.35	
Taxes and Fees	7.09	
Utility Charges as of 05/17		64.44
Total Amount Due		**64.44**

ELECTRIC CHARGES

Rate Type: LP–SECONDARY

Energy Charge		15.28
Demand Charge	Minimum Applied	41.10
Other Charges For Above Rates		
Fuel Adjustment ($.00038 x 532 kwh)		0.20
LP DSM ($.00003 x 532 kwh)		0.02
Environmental Surcharge (1.980% x $56.60)		1.12
Merger Surcredit (2.538% CR x $57.72)		–1.46
ESM Electric Adj (2.330% x $56.26)		1.31
Value Delivery Surcredit (0.380% CR x $57.57)		–0.22
Total Electric Charges		**$57.35**

2996

Please see reverse side for additional charges.

Please bring entire bill when paying in person.

Customer Service: (859) 367-1200
Mon-Fri 7AM-6PM
www.lgeenergy.com

DATE DUE	AMOUNT DUE
04/28/04	$65.34

Save time and money! Pay your bill on our website at www.lgeenergy.com.

ACCOUNT INFORMATION

Account Number: 011763-022 0
Account Name: M H Rehab
Service Address: 2220 Nicholasville Rd Ste 120
Lexington,Ky

Averages for Billing Period	This Year	Last Year
Average Temperature	49º	54º
Number of Days Billed	31	29
Electric/kwh per Day	18.6	15.2

BILLING SUMMARY

Previous Balance		50.12
Payments as of 04/16		(50.12)
Balance as of 04/16		0.00
Electric Charges	58.16	
Taxes and Fees	7.18	
Utility Charges as of 04/16		65.34
Total Amount Due		**65.34**

ELECTRIC CHARGES

Rate Type: LP-SECONDARY

Energy Charge		16.57
Demand Charge	Minimum Applied	41.10

Other Charges For Above Rates

Fuel Adjustment ($.00071 x 577 kwh)	0.41
LP DSM ($.00003 x 577 kwh)	0.02
Environmental Surcharge (0.710% x $58.10)	0.41
Merger Surcredit (2.538% CR x $58.51)	-1.48
ESM Electric Adj (2.367% x $57.03)	1.35
Value Delivery Surcredit (0.380% CR x $58.38)	-0.22
Total Electric Charges	**$58.16**

Please see reverse side for additional charges.

Please bring entire bill when paying in person.

Customer Service: (859) 367-1200
Mon-Fri 7AM-6PM
www.lgeenergy.com

DATE DUE	AMOUNT DUE
03/26/04	$50.12

You can now pay your bill over the telephone with a check or credit card for a minimal fee. Call (800) 807-3596 to take advantage of this exciting and convenient new payment option.

ACCOUNT INFORMATION

Account Number: 011763-022 0
Account Name: M H Rehab
Service Address: 2220 Nicholasville Rd Ste 120
Lexington,Ky

Averages for Billing Period	This Year	Last Year
Average Temperature	41 º	36 º
Number of Days Billed	31	31
Electric/kwh per Day	17.5	12.4

BILLING SUMMARY

Previous Balance		64.33
Payments as of 03/16		(64.33)
Balance as of 03/16		0.00
Electric Charges	55.31	
Taxes and Fees	6.84	
Utility Charges as of 03/16		62.15
Other Charges		(12.03)
Total Amount Due		**50.12**

ELECTRIC CHARGES

Rate Type: LP-SECONDARY

Energy Charge		15.62
Demand Charge	Minimum Applied	41.10
Other Charges For Above Rates		
Fuel Adjustment ($.00032 CR x 544 kwh)		-0.17
LP DSM ($.00004 x 544 kwh)		0.02
Environmental Surcharge (1.060% CR x $56.57)		-0.60
Merger Surcredit (2.538% CR x $55.97)		-1.42
ESM Electric Adj (1.771% x $54.55)		0.97
Value Delivery Surcredit (0.380% CR x $55.52)		-0.21
Total Electric Charges		**$55.31**

Please see reverse side for additional charges.

Please bring entire bill when paying in person.

Customer Service: (859) 367-1200
Mon-Fri 7AM-6PM
www.lgeenergy.com

DATE DUE	AMOUNT DUE
02/26/04	$64.33

You can now pay your bill over the telephone with a check or credit card for a minimal fee. Call (800) 807-3596 to take advantage of this exciting and convenient new payment option.

ACCOUNT INFORMATION

Account Number: 011763-022 0
Account Name: M H Rehab
Service Address: 2220 Nicholasville Rd Ste 120
Lexington,Ky

Averages for Billing Period	This Year	Last Year
Average Temperature	29º	27º
Number of Days Billed	29	30
Electric/kwh per Day	18.6	17.1

BILLING SUMMARY

Previous Balance		63.58
Payments as of 02/16		(63.58)
Balance as of 02/16		0.00
Electric Charges	57.25	
Taxes and Fees	7.08	
Utility Charges as of 02/16		64.33
Total Amount Due		**64.33**

ELECTRIC CHARGES

Rate Type: LP-SECONDARY

Energy Charge		15.57
Demand Charge	Minimum Applied	41.10
Other Charges For Above Rates		
Fuel Adjustment ($.00059 x 542 kwh)		0.32
LP DSM ($.00004 x 542 kwh)		0.02
Environmental Surcharge (1.640% x $57.01)		0.93
Merger Surcredit (2.538% CR x $57.94)		-1.47
ESM Electric Adj (1.771% x $56.47)		1.00
Value Delivery Surcredit (0.380% CR x $57.47)		-0.22
Total Electric Charges		**$57.25**

ase see reverse side for additional charges.

Please bring entire bill when paying in person.

Customer Service: 1-800-383-5582
Mon-Fri 7AM-6PM
www.lgeenergy.com

DATE DUE	AMOUNT DUE
01/28/04	$63.58

You can now pay your bill over the telephone with a check or credit card for a minimal fee. Call (800) 807-3596 to take advantage of this exciting and convenient new payment option.

ACCOUNT INFORMATION

Account Number: 011763-022 0
Account Name: M H Rehab
Service Address: 2220 Nicholasville Rd Ste 120
Lexington,Ky

Averages for Billing Period	This Year	Last Year
Average Temperature	34 º	38 º
Number of Days Billed	34	34
Electric/kwh per Day	15.0	16.2

BILLING SUMMARY

Previous Balance		61.15
Payments as of 01/16		(61.15)
Balance as of 01/16		0.00
Electric Charges	56.58	
Taxes and Fees	7.00	
Utility Charges as of 01/16		63.58
Total Amount Due		**63.58**

ELECTRIC CHARGES

Rate Type: LP-SECONDARY

Energy Charge	14.70
Demand Charge Minimum Applied	41.10
Other Charges For Above Rates	
Fuel Adjustment ($.00035 x 512 kwh)	0.18
LP DSM ($.00004 x 512 kwh)	0.02
Environmental Surcharge (2.180% x $56.00)	1.22
Merger Surcredit (2.470% CR x $57.22)	-1.41
ESM Electric Adj (1.771% x $55.81)	0.99
Value Delivery Surcredit (0.380% CR x $56.80)	-0.22
Total Electric Charges	**$56.58**

3704

se see reverse side for additional charges.

Please bring entire bill when paying in person.

M.H. REHAB
238 EAST LOWRY LANE
LEXINGTON, KY 40503

UNITED STATES POSTAL SERVICE
0000

AMOUNT
$1.06

U.S. POSTAGE
PAID
LEXINGTON,KY
40517
DEC 28, '04
00101063-15
40602

RECEIVED
DEC 29 2004
PUBLIC SERVICE COMMISSION

ENVIRONMENTAL + PUBLIC PROTECTION CABINET
211 SOWER BLVD.
PO BOX 615
FRANKFORT KENTUCKY
40602-0615