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OCT 1 6 2008

COMMONWEALTH OF KENTUCKY

PUBLIC SERVICE

In the matter of:

055 (Your Full Name) COMPLAINANT VS. (Name of Utility) DEFENDANT COMPLAINT 285 respectfully shows: The complaint of \underline{V} (Your Full Name) (a) (Your Full Name CATLEttsburg Ky 41129 4976 RIEN) (Your Address) DSTREAM (b) Name of Utility) -KLVD 2827 (Address of Utility) (C) That: (Describe here, attaching additional sheets if necessary, 505 OL <u>)i SH</u> the specific act, fully and clearly, or facts that are the reason WOULD 99.97 ħĒ Nev OLD nn for the con ERIMON NOME. 230 TRNET AUE Continued on Next Page

Formal Complaint iAm J. RESS VS. WINDSTREAM

Page 2 of 2 it ADD-ON AS OID tIMES-TADES WERE NEVER LOOKON TRA DSTREAM, MORT 4.5122 "bundling your mad lime only TALDER WD STREAM Alone. Appointment FOR INST. SET WA りど JD Wherefore, complainant asks IVD (Specifically state the relief desired.) AXES + FCL CHARGES OCAL + Side-Up 22 tza, Ìs wha 2 Ar IME

_, Kentucky, this <u>15</u>day Dated at / (Your City)

____, 19__. 2008 of DeT. (Month)

our Signat

(Name and address of attorney, if any)