## COMMONWEALTH OF KENTUCKY

## BEFORE THE PUBLIC SERVICE COMMISSION

RECEIVED In the matter of: JUL 20 2015 Jonald R Fuller (Your Full Name) PUBLIC SERVICE COMMISSION COMPLAINANT VS. Harmison Co. Smithtion District #2) (Name of Utility) Case No. 2015-00266 DEFENDANT COMPLAINT The complaint of <u>PonALR Fuller</u> respectfully shows: (Your Full Name) (a) Donald R Fuller (Your Full Name) 94 Kingsbury LARE Cynthiana 1Ky 41031 (Your Address) donniefuller@hotmailscom (b) <u>Harrison County Sanitation Aistrict</u> #2 (Name of Utility) P.O. Box 186 Cynth: Ann, Ky 41031 (Address of Utility) That: <u>Sever bill rates are higher then rates</u> (Describe here, attaching additional sheets if necessary. (c) Are to be of 62,00 Amonth, my bills have been the specific act, fully and clearly, or facts that are the reason 1st Bill# 101, 39 2nd Bill 85.00 3nd Bill 03,51 and basis for the complaint.) The First 2 Bills where For MAY 1st thrusth, 2 Bill For 16440 Sune

Continued on Next Page

Formal Complaint

Donald R.Fuller vs. Harrison Co. Sanitation District #2

Page 2 of 2

They don't give straight Answer to changes!

Wherefore, complainant asks <u>For rAte to be what IAW 5AV5</u> (Specifically state the relief desired.) its to be, And to be Refunded or credited to Account Dated at <u>Cynthiana</u>, Kentucky, this <u>15</u> day (Your City) of <u>July</u>, 2015. Donald R Fuller (our Signature\*)

Date

\*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.

(Name and address of attorney, if any)