October 8, 1999



Missouri Public Service Commission

RE: Williams v. AmerenUE Case No. EC-2000-19

Mr. Roberts,

NOTE: the date and amount due of 7/16 in the "shocking to my mind;" amount of \$750.99 "coincidentally" falling on the date that I was admitted into the hospital at St. Louis University Hospital with a seizure disorder.

As of October 11, 1999, I had an appointment with my doctor; (nuerosurgeon) Dr. Buholdz, who discussed with me that stress was a contributing factor, and for this reason I believe that continuing with this matter would only add further stress and detriment to my health—for this reason we are going to have to "abandon" this issue.

Upon moving to this current address (on the day I was released from the hospital on 7/23) Ameran "lowered" the amount from \$750.99 to \$276.55. The \$276.55 (was due on 8/11) was paid in full 9/3/99 after our service had been disconnected that day.

---I have "no doubt" that Ameran will request yet another deposit due to this most recent disconnect action.

As this entire situation is what prompted us to move, I do feel that Ameran was responsible for the problems we have experienced to this date. The reason being that I would <u>not</u> have moved at all had this deposit amount and fear of being denied service (in JUNE and JULY) for lack of ability to pay such a (for us) "unreasonable" deposit had not "forced us" to do so.

When this issue of this deposit first came about, I would have never imagined it would have caused such an effect on our lives as it has. And now we are once again facing having to move (by mistakingly taking the first thing that came along and found it to be most unsuitable).

As I have a more serious concern; that of surgery to contend with at this time, I cannot continue pursuing this issue any longer.

Sincerely, (lucall) afficie Keith Williams

Xenia Waymire

Keith Williams

P.S.

I am enclosing the reply to Amerans answere, I was unable to continue with and ended.

Mr. Roberts,

NOTE: the date and amount due of 7/16 in the "shocking to my mind;" amount of \$750.99 "coincidentally" falling on the date that I was admitted into the hospital at St. Louis University Hospital with a seizure disorder.

As of October 11, 1999, I had an appointment with my doctor; (nuerosurgeon) Dr. Buholdz, who discussed with me that stress was a contributing factor, and for this reason I believe that continuing with this matter would only add further stress and detriment to my health—for this reason we are going to have to "abandon" this issue.

Upon moving to this current address (on the day I was released from the hospital on 7/23) Ameran "lowered" the amount from \$750.99 to \$276.55. The \$276.55 (was due on 8/11) was paid in full 9/3/99 after our service had been disconnected that day.
---I have "no doubt" that Ameran will request yet another deposit due to this most recent disconnect action.

As this entire situation is what prompted us to move, I do feel that Ameran was responsible for the problems we have experienced to this date. The reason being that I would <u>not</u> have moved at all had this deposit amount and fear of being denied service (in JUNE and JULY) for lack of ability to pay such a (for us) "unreasonable" deposit had not "forced us" to do so.

When this issue of this deposit first came about, I would have never imagined it would have caused such an effect on our lives as it has. And now we are once again facing having to move (by mistakingly taking the first thing that came along and found it to be most unsuitable).

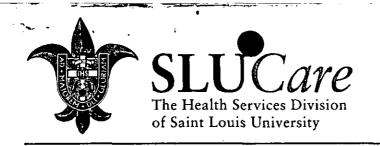
As I have a more serious concern; that of surgery to contend with at this time, I cannot continue pursuing this issue any longer.

Sincerely,

Xenia Waymire Keith Williams

P.S.

I am enclosing the reply to Amerans answere, I was unable to continue with and ended.



Saint Louis University Hospital 3635 Vista Ave. at Grand Blvd. PO Box 15250 St. Louis, MO 63110-0250 (314) 577-8000

August 11,1999

To Whom It May Concern:

this is Incorrect

Miss Xenia Waymire was under my inpatient care for the dates of July 17 and 18, 1999. She was readmitted on July 19, 1999 and was discharged on July 23, 1999. I saw her in follow-up in the outpatient clinic on August 4, 1999.

Thank you

Mary E. Bertrand, M.D.

Instructor

The Greater Midwest Epilepsy Treatment Center

Department of Neurology

St. Louis University

# are The Healt ices Division of Saint Louis University Saint Louis University Hospital

University Medical Group

3635 Vista Ave. at Grand Boulevant St. Louis, MO 83110-0250 Call Center 1-314-265-5330 on1-800 268 5680

HE 34814579 | WAYMIRE XENIA C 35C3 ITASKA ST LOUIS 37/15/55 87 57 IT

# PHYSICIAN'S DISCHARGE NOTE AND ORDERS

| DISCHARGE INFORMATION  | ATTENDING PI   |  | Bertind  |
|--|--|--|--|
| Date Patient Discharged: ク/ス3/9う   | Disposition: Disposition:  | dome 🔲 Name o  | of Facility:   |
| Discharge Diagnosis:   | 13/0   |  |  |
|  |  |  | A CALLY TO THE PARTY OF THE PAR |
|  |  | <b>*</b> ***********************************   |  |
|  | nproved 🗆  | NURSING  |  |
| MEDICATIONS  |  | INSTRUCTIONS   | COMMENTS   |
| ORUG / GOSE / ROUTE / TIMES  | 979 Å  | RX CARDS<br>GIVEN GIVEN  | Death to go a large with the property of the   |
|  | TID  |  | Depakole 250 ng h maun three 15 a yi   |
| 77 7 1   | 70 B.O   |  | Claration 3.75 mg two fines daily  |
| Cacos soong for  | 778"   |  | Calcium Causonall Storr, on garly  |
| Three Togo   | <del></del>  |  | mus (multivitainus) every ocy.   |
|  | and the same of th | <del></del>  |  |
|  |  | <del></del>  |  |
| - Andrew Control of the Control of t |  |  | The state of the s |
|  |  |  |  |
|  |  |  |  |
| - Committee to the second seco |  |  | 1 414  |
| Arrangements made to obtain medications?   | IX Yes □ N/A   |  | 49 1999  |
| أنا المستحد  | 77   | *** *** *  | The state of the s |
| ACTIVITIES   | □ No restriction   | ist regume normal :  | <u>.</u>   |
| Ueight bearing limitation  | Ambulate with:   | showering  | ☐ No stair climbing  |
|  | TI Cana  | =  |  |
| No lifting quarter them.   | LI Gruignes  | tub bathing  | No driving   |
| - ·  | ☐ Crutches ☐ No  | o tub bathing<br>o bending   | _  |
| !bs  | □ Crutches L□ NC   | o tub bathing<br>o bending   | No driving   |
| Confined to bed  | ☐ Crutches ☐ No ☐ Walker ☐ No ☐ Assistance ☐ O   | o tub bathing<br>o bending   | No driving   |
| 口 Confined to bed 口<br>ADDITIONAL INSTRUCTIONS: ずかい  | ☐ Crutches ☐ No ☐ Walker ☐ No ☐ Assistance ☐ Ot Use wheelchair ☐ Ot  | o tub bathing<br>o bending<br>ther:  | No driving   |
| ☐ Confined to bed  | □ Crutches □ Walker □ Assistance Use wheelchair □ Crutches □ No □ No □ Assistance □ Ot   | tub bathing bending ther:  Heart Healthy   | No driving  No sexual activity  Linkwith  Linkwith  Linkwith   |
| Confined to bed  ADDITIONAL INSTRUCTIONS: Lower  Dist  Special:  | □ Crutches □ Walker □ Assistance Use wheelchair □ Ot   | bending ther:  Heart Healthy List 70.  | No driving  No sexual activity  Linky which accompany to be of the control of the |
| DIST  Special:  PLEASE CALL YOUR PRIVATE PHYS  | □ Crutches □ Walker □ Assistance Use wheelchair □ Ot   | tub bathing bending ther: Heart Healthy Lus 70,  | No driving No sexual activity  (3x dail y)  TAKE THIS FORM WITH YOU TO APPOINTMENTS.   |
| Confined to bed  ADDITIONAL INSTRUCTIONS:  DIST  Special:  PLEASE CALL YOUR PRIVATE PHYS SLUCERE FOLLOW-UP CARE  | Crutches  Walker  Assistance Use wheelchair  Walker  On  On  On  On  On  On  On  On  On  O   | tub bathing bending ther:  Heart Healthy  Lus 770,   | No driving  No sexual activity  (3x doil y)  TAKE THIS FORM WITH YOU TO APPORTMENTS.  NTMENT ARRANGEMENTS  Cathy No.15.  |
| DIST  Special:  PLEASE CALL YOUR PRIVATE PHYS  | □ Crutches □ Walker □ Assistance Use wheelchair □ Ot   | tub bathing bending ther:  Heart Healthy  Lus 770,   | No driving  No sexual activity  (3x dail y)  TAKE THIS FORM WITH YOU TO APPOINTMENTS.  NOTIMENT AFRANGEMENTS  COMMENTS  COMMENTS  COMMENTS  COMMENTS  NOTIMENT AFRANGEMENTS  NOTIMENT AFRANGEMENT AFRANGEMENT AFRANGEMENT AFRANGEMENT AFRANGEMENT AFRANGEMENT AFRANGEMENT AFRANGEME |
| Confined to bed  ADDITIONAL INSTRUCTIONS:  DIST  Special:  PLEASE CALL YOUR PRIVATE PHYS SLUCERE FOLLOW-UP CARE  | Crutches  Walker  Assistance Use wheelchair  Walker  On  On  On  On  On  On  On  On  On  O   | tub bathing bending ther:  Heart Healthy  Lus 770,   | No driving  No sexual activity  (3x doil y)  TAKE THIS FORM WITH YOU TO APPORTMENTS.  NTMENT ARRANGEMENTS  Cathy No.15.  |
| Confined to bed  ADDITIONAL INSTRUCTIONS:  DIST  Special:  PLEASE CALL YOUR PRIVATE PHYS SLUCERE FOLLOW-UP CARE  | Crutches  Walker  Assistance Use wheelchair  Walker  On  On  On  On  On  On  On  On  On  O   | tub bathing bending ther:  Heart Healthy  Lus 770,   | No driving  No sexual activity  (3x dail y)  TAKE THIS FORM WITH YOU TO APPOINTMENTS.  NOTIFICATION OF THE POST NEW 15.  NOTIFICATION OF THE P |
| DIFT  Special:  PLEASE CALL YOUR PRIVATE PHYS  SLUCATE FOLLOW-UP CARE  | Crutches  Walker  Assistance Use wheelchair  Walker  On  On  On  On  On  On  On  On  On  O   | tub bathing bending ther:  Heart Healthy  Lus 770,   | No driving  No sexual activity  (3x doil y)  TAKE THIS FORM WITH YOU TO APPOINTMENTS.  NOTIMENT AFRANGEMENTS  COMMENTS  COMMENTS  COMMENTS  COMMENTS   |
| ADDITIONAL INSTRUCTIONS: James Dist  Special: August PRIVATE PHYS SLUCARE FOLLOW-UP CARE SEE DR. WHEN WHERE  1 Lettard 2 week 2 3 Villproot L- 4   | Crutches  Walker  Assistance Use wheelchair  CIAN TO PLAN FOR CON  DATE  TIME  CARE D No / Not applie  | tub bathing bending ther:  Heart Healthy  LOCATION  Charles  4  4  4  4  4  4  4  4  4  4  4  4  4   | No driving  No sexual activity  (3x dail y)  TAKE THIS FORM WITH YOU TO APPOSTMENTS.  NIMENT ARRANGEMENTS Cathy Nels.  N COMMENTS 57-600  Dischard fracessay.  2 June  |
| Confined to bed  ADDITIONAL INSTRUCTIONS:  DIST  Special:  PLEASE CALL YOUR PRIVATE PHYS SLUCERE FOLLOW-UP CARE  | Crutches  Walker  Assistance Use wheelchair  CIAN TO PLAN FOR CON  DATE  TIME  | tub bathing bending ther:  Heart Healthy  LOCATION  Charles  4  4  4  4  4  4  4  4  4  4  4  4  4   | No driving  No sexual activity  (3x daily)  TAKE THIS FORM WITH YOU TO APPORTMENTS.  NOTIFICATION OF THE PORTMENTS.  NOTIFICATION OF THE PORTMENTS.  NOTIFICATION OF THE PORTMENTS.  A COMMENTS STORY NOTIFICATION OF THE PORTMENTS.  A COMMENTS STORY NOTIFICATION OF THE PORTMENTS.  |
| Special: Act galent  PLEASE CALL YOUR PRIVATE PHYS SLUCERE FOLLOW-UP CARE SEE DR. WHEN WHERE  1 Sections 2  3 Valguet La  REFERRALS FOR POST HOSPITA   | Crutches  Walker  Assistance Use wheelchair  CIAN TO PLAN FOR CON  DATE  TIME  CARE   No / Not applic  Yes - Name:   | tub bathing bending ther:  Heart Healthy  LOCATION  Charles  4  4  4  4  4  4  4  4  4  4  4  4  4   | No driving  No sexual activity  (2x doil y)  TAKE THIS FORM WITH YOU TO APPOSTMENTS.  NIMENT ARRANGEMENTS (athy Nels.  COMMENTS 51 - 600  Doil Tok f recessing 1.  |
| Confined to bed  ADDITIONAL INSTRUCTIONS: John  DIST  Special: Acceptant  PLEASE CALL YOUR PRIVATE PHYS  SLUCARE FOLLOW-UP CARE  SEE DR. WHEN WHERE  1 Lettard 2 week  2  3 Valport L-   | Crutches  Walker  Assistance Use wheelchair  CIAN TO PLAN FOR CON  DATE  TIME  CARE   No / Not applic  Yes - Name:   | tub bathing bending ther:  Heart Healthy  LOCATION  Charles  4  4  4  4  4  4  4  4  4  4  4  4  4   | No driving  No sexual activity  (2x doil y)  TAKE THIS FORM WITH YOU TO APPOSTMENTS.  NIMENT ARRANGEMENTS (athy Nels.  COMMENTS 51 - 600  Doil Tok f recessing 1.  |
| Confined to bed  ADDITIONAL INSTRUCTIONS: John DIET  Special: Accordance PLEASE CALL YOUR PRIVATE PHYS SLUCARE FOLLOW-UP CARE SEE DR. WHEN WHERE  1 Lettard 2 week 2 3 Valguet Land 4 REFERRALS FOR POST HOSPITA   | Crutches  Walker  Assistance Use wheelchair  CIAN TO PLAN FOR CON  DATE  TIME  CARE   No / Not applic  Yes - Name:   | tub bathing bending ther:  Heart Healthy  LOCATION  Charles  4  4  4  4  4  4  4  4  4  4  4  4  4   | No driving  No sexual activity  (2x doil y)  TAKE THIS FORM WITH YOU TO APPOSITURITS.  NIMENT ARRANGEMENTS (at by Nels)  COMMENTS 5 - 600  Doil Tok f recessing 1.   |
| Confined to bed  ADDITIONAL INSTRUCTIONS: James  DIST  Special: Act Alexant  PLEASE CALL YOUR PRIVATE PHYS  SLUCARE FOLLOW-UP CARE  SEE DR. WHEN WHERE  1 Lettard 2 week  2  3 Valguet Lettard  REFERRALS FOR POST HOSPITA   | Crutches  Walker  Assistance Use wheelchair  CIAN TO PLAN FOR CON  DATE  ME  CARE  No / Not applic  Yes - Name:  I care if applicable):  | tub bathing bending ther:  Heart Healthy  APPOI  LOCATION  Charte  JG 6  Cable   | No driving  No sexual activity  (3x doil y)  FAKE THIS FORM WITH YOU TO APPOSTMENTS.  NIMENT ARRANGEMENTS Cathy Nels.  NO COMMENTS 51-600  Daylord for accoming 1.  Phone Daylord Vis.   |
| Confined to bed  ADDITIONAL INSTRUCTIONS: January  DIST  Special: Act affect  PLEASE CALL YOUR PRIVATE PHYS  SLUCARE FOLLOW-UP CARE  SEE DR. WHEN WHERE  1 Lational 2 week  2  3 Valgatet La  REFERRALS FOR POST NOSPITAL  SPECIAL INSTRUCTIONS (include wound   | Crutches  Walker  Assistance Use wheelchair  CIAN TO PLAN FOR CON  DATE  ME  CARE  No / Not applic  Yes - Name:  I care if applicable):  | tub bathing bending ther:  Heart Healthy  APPOI  LOCATION  Charte  JG 6  Cable   | No driving  No sexual activity  (2x doil y)  TAKE THIS FORM WITH YOU TO APPOSITURITS.  NIMENT ARRANGEMENTS (at by Nels)  COMMENTS 5 - 600  Doil Tok f recessing 1.   |
| ADDITIONAL INSTRUCTIONS:  DIST  Special:  PLEASE CALL YOUR PRIVATE PHYS SLUCARE FOLLOW-UP CARE SEE DR. WHEN WHERE  1 Lational 2 work  REFERRALS FOR POST HOSPITAL  SPECIAL INSTRUCTIONS (include wound  Call Physician for:  CALL CENTER USE ONLY  | Crutches  Walker  Assistance Use wheelchair  CIAN TO PLAN FOR CON  DATE  ME  CARE  No / Not applic  Yes - Name:  I care if applicable):  | tub bathing bending ther:  Heart Healthy  APPOI  LOCATION  Charte  JG 6  Cable   | No driving  No sexual activity  (3x dail y)  TAKE THIS FORM WITH YOU TO APPORTMENTS.  NTMENT ARRANGEMENTS Cathy Nels.  NOTE COMMENTS 5 600  COMMENTS 5 600  Phone Date of Language of the property of the prop |
| ADDITIONAL INSTRUCTIONS:  DIET  Special:  PLEASE CALL YOUR PRIVATE PHYS SLUCARE FOLLOW-UP CARE SEE DR. WHEN WHERE  1 June 1 2 3 JULY COLL L.  REFERRALS FOR POST HOSPITAL SPECIAL INSTRUCTIONS (include wound Call Physician for:  CALL CENTER USE ONLY  Ref. Phys.  | Crutches  Walker  Assistance Use wheelchair  CIAN TO PLAN FOR CON  DATE  ME  CARE  No / Not applic  Yes - Name:  I care if applicable):  | tub bathing bending ther: Heart Healthy LOCATION LOCATION Chance (APPONE Chance (APPONE Cable Ca | No sexual activity  (3x dQil y)  FAKE THIS FORM WITH YOU TO APPOINTMENTS.  NOTIFICATION OF THE STREET OF THE STREE |
| ADDITIONAL INSTRUCTIONS:  DIST  Special:  PLEASE CALL YOUR PRIVATE PHYS SLUCARE FOLLOW-UP CARE SEE DR. WHEN WHERE  1 Lational 2 work 2 3 Valgatat La 4  REFERRALS FOR POST HOSPITA SPECIAL INSTRUCTIONS (include wound  Call Physician for:  CALL GENTER USE ONLY  Ref. Phys.  Fax No.   | Crutches  Walker  Assistance Use wheelchair  CARE  No / Not applicable):  I HAVE RECEIVED AND UN  HAVE RECEIVED AND UN   | tub bathing bending ther: Heart Healthy LOCATION LOCATION Chance (APPONE Chance (APPONE Cable Ca | No driving  No sexual activity  (3x dail y)  TAKE THIS FORM WITH YOU TO APPORTMENTS.  NTMENT ARRANGEMENTS Cathy Nels.  NOTE COMMENTS 5 600  COMMENTS 5 600  Phone Date of Language of the property of the prop |
| ADDITIONAL INSTRUCTIONS:  DIST  Special:  PLASE CALL YOUR PRIVATE PHYS SLUCARE FOLLOW-UP CARE SEE DR. WHEN WHERE  1  | CARE No / Not applicable):   | tub bathing bending ther: Heart Healthy LOCATION LOCATION Chance LOCATION Chance Chance APPOIL Chance Chance FAINT NAME  | No driving  No sexual activity  (3x daily)  TAKE THIS FORM WITH YOU TO APPOSITIONS  NIMENT ARRANGEMENTS  COMMENTS  COMMENTS  Light  Phone  Phone  Days  O'F MA  VIS  COMMENTS  CATHOLOGY  Days  O'F MA  DAYS  COMMENTS   |
| ADDITIONAL INSTRUCTIONS:  DIST  Special:  PLEASE CALL YOUR PRIVATE PHYS SLUCARE FOLLOW-UP CARE SEE DR. WHEN WHERE  1 Futured 2 work  REFERRALS FOR POST HOSPITAL  SPECIAL INSTRUCTIONS (include wound  Call Physician for:  CALL CENTER USE ONLY  Ref. Phys.  Fax No.  | Crutches  Walker  Assistance Use wheelchair  CARE  No / Not applicable):  I HAVE RECEIVED AND UN  HAVE RECEIVED AND UN   | tub bathing bending ther: Heart Healthy LOCATION LOCATION Chance LOCATION Chance Chance APPOIL Chance Chance FAINT NAME  | No sexual activity  (3x dQil y)  FAKE THIS FORM WITH YOU TO APPOINTMENTS.  NOTIFICATION OF THE STREET OF THE STREE |
| Call Physician for:  Call Physician for:  CALL GENTER USE ONLY  Call Cantined to bed  Call Confined to bed  Call Cantines Control Cantines Call Cantines Cantines Call Cantines Cantine | CARE No / Not applicable):   | tub bathing bending ther: Heart Healthy LOCATION LOCATION Chance LOCATION Chance Chance APPOIL Chance Chance FAINT NAME  | No driving  No sexual activity  (3x daily)  TAKE THIS FORM WITH YOU TO APPOSITIONS  NIMENT ARRANGEMENTS  COMMENTS  COMMENTS  Light  Phone  Phone  Days  O'F MA  VIS  COMMENTS  CATHOLOGY  Days  O'F MA  DAYS  COMMENTS   |

PRES RDG PREV RDG READING RATE AMOUNT 79.12 ST.LOUIS CTY TAX 3.30 BUDGET ADJUSTM RECONN CHARGE 14.58 30.00 LATE PAY CHARGE @ 1.5% 2.07 **DEFR LATE PAY @ 1.5%** 1.74 DEFR MNTHLY AMT 25.00 **DEPOSIT ARREARS** 457.00 **PRIOR BALANCE** 138.18 AMOUNT DUE ON 07/16 750.99



FIRST CLASS MAIL U.S. POSTAGE PAID 1 OUNCE ST. LOUIS, MO PERMIT NO. 2859

Service at: 3503 ITASKA
Service from 06/02 to 06/30/99 Days 28
Your Last Payment 06/11/99 \$70.99
Acct. No. 0636 113 0301 27 Bill Date 07/06/1999

Due date and delinquent date apply to current charges only. Budget balance ahead \$50.97 after paying this bill. Deferred amts/months remaining after this bill: \$91.17/4.

Amount Due \$750.99
Due By 07/16
Delinquent After 07/27

### hllaallaallaallaallaallalalalalalallaall

\*\*\*\*\*\*\*\*\*\*\*\*AUTO\*\*5-DIGIT 63111 WILLIAMS KEITH 3503 ITASKA SAINT LOUIS MO 63111-1427

| *** ·                                     |                   |
|---|-------------------|
| AmerenUE P.O. BOX 66529 ST. LOUIS, MO 631 | 66-6529           |
| PRESTRIG BREYBOG HISE READING REATEN      | <b>FIAL</b> USIMA |
| ARNOLD TAX                                | 1.91              |
| SALES TAXES                               | .75               |
|   |                   |
| DEFR MNTHLY AMT                           | 23.00             |
| FINAL BILL *                              | 312.72            |
| DEFERRED                                  | -91.70            |
|   |                   |
| AMOUNT DUE ON 08/11                       | 276.55            |
| , i                                       |                   |
|   |                   |
| 1   |                   |

99B-00980 AUTO 5-DIGIT FIRST CLASS MAIL U.S. POSTAGE PAID 1 OUNCE ST. LOUIS, MO PERMIT NO. 2859

Service at: 2286 JACKSON DR APT D Service from 07/17 to 07/27/99 Days 10

Acct, No. 3386 035 0731 54 Bill Date 07/30/1999

Ε

Deferred amts/months remaining after this bill: \$68.70/3.

\*From previous address 3503 ITASKA

Amount Due \$276.55 Due By 08/11

Delinquent After 08/20

\*\*\*\*\*\*\*\*\*\*\*\*\*\*AUTO\*\*5-DIGIT 63010 WILLIAMS KIETH 2286 JACKSON DR APT D ARNOLD MO 63010-1679

Ameren UE P.O.BOX 66301

ST. LOUIS, MO 63166

(800) 552-7583 B-00306 D

#### **NOTICE OF SERVICE DISCONNECTION**

\* If your service is disconnected, you may be required to pay the full amount due plus a reconnection charge before we can restore service.

If this amount has been paid, please disregard this notice.

See Reverse Side

RETURN THIS STUB TO:
AmerenUE
P.O.BOX 66301
ST. LOUIS, MO 63166

|   |   | •                          |                            |  |                        |  |   |  |
|---|---|----------------------------|----------------------------|--|------------------------|--|---|--|
| *** = <u> </u>  |   |                            |                            |  |                        |  |   |  |
| 28.695.¢<br>70.770.7  | 86,102<br>20,872  | otal Deduct<br>et Earnings | T 98.346,11<br>N 91.018,01 | 97°677<br>00°574   | S.                     | ntngs<br>le Earning  | orosa Eari<br>IdexeT TWI  | ٦  |
| 126971  126371  | -99\E2\80   | 032 498-78-                | TY<br>82.527,1<br>60.172,6 | 00.0<br>30.27<br>00.0<br>00.004<br>00.004  | 00 %<br>00 00<br>00 00 | OF<br>OF<br>OTTO   | WILLIAMS, PROFITSHAR PROULAR REGULAR ACCULAR  |  |
| <b>Rick</b>   |   |                            |                            |  |                        | & SABO, INC.   | MAMRATIOD   |  |
| WAND TO OUNCE  FAND 1 OUNCE  ST. LOUIS, NO. 2859  WHENT NO. 2859  PERMIT DELP OF THE PERMIT NO. 2859 | 098-00980 TIDIO-5 OTUA TIDIO-6 OTUA SONDAL 2886 USCONO TOTO ON OTAL ON OTAL TOTO OTAL OTAL TOTO TOTO OTAL | Defei                      | 53                         | ARNOUNT DE PROUNT DE PROUNT DE PROUNT DE PRESENTANT DE PRE |                        | Merena<br>RANGE 110<br>ACTH 3586055075154<br>MUNT PATA 4276.55 | ASH #276.55<br>f you must call for reconnection please<br>have your receive number ready. | Hetropolitan St. Louis call 342-1111<br>Outside the Metropolitan area call<br>I-RMD-552-7583 |

Merenue P.O. BOX 66529 ST. LOUIS, MO 63166-6529

ANNOLD TAXA

SAL DATA

SAL DATA

ANNOLD TAXA

SAL DATA

SAL DA

THANK YOU WEREN

4--

AMOUNT

1 25

Amerentië

はいいは、

September 2, 1999

Dear Mr. Roberts,

IN RE: Xenia Waymire-Williams,

v.

Ameren UE,

Case No. EC-2000-19

I received the copy of Ameren's "ANSWERE" on 8/19 for which I have the following to say:

- #1. On April 12, 1999, I received a letter from Mr. R. D. Lloyd, Customer Representative for Ameren UE informing me of the \$470.00 deposit "IN DISPUTE;" the third deposit since we had "rented" the premises in December of 1997. (See attachment #1 and letter of reply from myself, dated April 29, 1999).
- #2. Upon calling Ameren and speaking with a representative I questioned the "whereabouts" of my previous deposits of the following:

February 14, 1998 \$152.00 "will be billed"

May 12, 1998 86.00 "will be included..."

April 12, 1999 \$470.00

(NOTE: agreement made on 5/11/98 at bottom of attachment 2 showing bill was assessed to my account and the installments added to the monthly bill).

- #3. When I inquire of the representative I spoke with regarding my previous deposits she told me they never were "charged" to my account!). I asked for a statement and was mailed this STATEMENT OF ACCOUNT from AmerenUE. (See attchement #3: also note that the deposits are billed DPB, but there is no DPAB; deposits applied to bill).
- #4. With payments at approximately \$142.00 a month, we could not afford another deposit "budgeted" into the account, especially one of such an "Unreasonable" amount—as we were only "renters of a rather "small" house.

IN WHICH IN THAT CASE WOULD MAKE SUCH A "NECESSARY" SERVICE "UNAVAILABLE TO MY HOUSEHOLD.

--- The deposits in the previous amounts were not near as unreasonable; even though the first (2) alone, were placed within just 3-months of one another!

#5. Although we may have been "late payment-payers"; as Mr. Lloyd calls us and gives this as the reason for imposing the \$470.00 deposit shown my 1<sup>st</sup> attachment...... (if you look at attachment #4 once again you will note that many are "yellow" or "pink" notices) this I will admit...

HOWEVER, we always managed to pay the bill or make arrangements to pay the bill... except on that "ONE" occasion on April 11, 1999, yet, I called immediately (early that morning when I discovered it was disconnected and had overlooked the date) to have the service reconnected and paid the bill immediately in order to have the service restored the next day.

(See attachment #5—I was home waiting for them!)

#6. And it was from the very beginning (Mr. Lloyd's letter informing me of the deposit in Attachment #1) which began this "dispute" over this deposit amount for which I wrote, called, and due to failure to make "arrangements" I could not make due to the lack of an ability to pay any further higher a monthly bill I was disconnected for the deposit amount of \$540.99 (\$470.00 + \$70.00) and it was from there I called the 1-800 number.

#### Mr. Roberts;

YOU HAVE NO IDEA HOW THIS HAS AFFECTED MY LIFE!! Adding a deposit on top of an already high existing bill (is only adding a bill on top of a bill!—makes it only higher and harder to pay).

- I. For fear of not being able to continue such a "necessary service" I felt it necessary to move due to "this matter of the \$470.00.
- II. I was unable to complete my summer session at Webster University where I currently have 101 credits and a 3.0+GPA; which would have given me 6 more credit hours to my completion of my desired goal in obtaining my degree in May of 2000.
- III. My not being able to find a place available in time to be out of the residence this deposit was incurred—as I had given my landlady a 30-day notice.
- IV. Forced me to have to get rid of a much loved pet.
- V. Forced me to take "unsuitable" housing—finding upon moving in that the premises was infested with roaches and many other problems stemming from the apartment itself.—although we did not move in until 7/23/99\*\*\*and finding I may very well be moving AGAIN!

(See attachment: Hospital release)

## IV. THIS CAUSED SUCH EMOTIONAL DISTRESS THAT I I WAS ADMITED INTO THE HOSPITAL FOR A SEIZURE ON THE VERY DAY AMEREN'S "SHOCKING BILL" OF \$750.99 WAS DUE!

In conclusion Mr. Roberts,

No utility company should have "this much power!!!" I can understand having a service cut-off for L-A-C-K of payment; but to add a deposit to an already high existing bill; thus making it only higher and even more difficult for us "late-payers," is too most certainly "UNJUST AND UNDULY PREJUDICIAL!!!" No consumer should be subjected to having to move... for fear of being deprived of such a necessary service in the hottest time of the year! No consumer should be subjected to what I have been over a "deposit."

I'm no lawyer, but I didn't particularly think much of Mrs. Brauer's "red herring" answere's adding it "all reads similar" Having no understanding of the law when it came to her citations I took the following to mean:

#### From her Paragraph C of general Provisions---

- 1. "A" deposit...to mean ONE, not 3!
- 2. "for initial... to mean IN THE BEGINNING (of the service)
- 3. "NEW" residential service...to mean just that, "new," not one of a year and a half!
- 4. And I believe she skipped 4 CSR 240-13.030 entirely.

But since I'm not a lawyer, I'm just a consumer; it doesn't all <u>"read similar"</u> to me.

Thank you for your time and attention into this matter.

Sincerely,

Xenia Waymire-Williams

Union Electric

AHAChmen+ #1

7/alrea/5470.00

One Ameren Plaza 1901 Chouteau Avenue PO Box 66149 St. Louis, MO 63166-6149 314.621.3222

April 12, 1999

Williams Keith 3503 Itaska St. Louis Mo. 63111

Dear Customer:



We will include a deposit for \$470.00 on your next bill. This deposit will be held in your name and will earn 9.5% per annum in interest. The deposit is required at this time due to your record of late payment.

If you have any questions, please contact our Customer Service Center at 342-1111.

Sincerely yours,

R. D. Lloyd

**Customer Representative** 

R.D. Sloyd

**Customer Relations Department** 

ACCOUNT NO.

SERVICE ADDRESS

0636 113 0301 2

3503 Itaska

April 29, 1999

OP 9

Mr. R. D. Lloyd One Ameran Plaza 1901 Chouteau Avenue St. Louis, MO 63166-6149

Dear Mr. Lloyd,

Regarding your recent correspondence, dated April 12, 1999, in which you informed me that you will be adding yet another (!) deposit onto my bill, I only wish to say I find these "excessive" deposits to be highly unreasonable, undue, and prejudicial!

-

If you would take a moment to review my record, you will see an \$86.00 charge for a deposit I was charged in my May 3, 198 bill and then another deposit was again charged on February 2, 1998. I would like to know what the current status of these two deposits totaling \$238.00 are at this time.

It is difficult to understand how Ameran expects a customer who is "perceived" to have difficulty in making payments; expect such a customer to afford an amount of close to \$500 (and, which would not go directly on the currently bill?)---is ludicrous, to say the least!

As Mr. Williams has only recently secured permanent employment after a period of temporary employment and unemployment—the requiring of yet another deposit at this time would place us in a financial disadvantage, when we are just now trying to get caught up!

It should be "unlawful2 to impose such excessive charges as this upon consumers and forcing them into an undue and unreasonable disadvantage for such a necessary service!

Sincerely,

Xenia Williams

ATE PAY CHARGE @ 1.5% PERMIT NO. 2859 .72 DEFRILATE PAY @ 1.5% DEFRIMNTHLY AMT 3.99 Service at: 3503 T 25.00 /02/99 Days 34 PRIOR BALANCE Service from 11/29 47.86 Your Last Payment 12/03/98 \$100.00 Acct. No. 0636 113 0301 27 Bill Date 01/05/1999 AMOUNT DUE ON 01/15 189.57 live date and delinquent date apply to current charges only. Budget balance behind \$175.97 after paying this bill. Deferred amts/months remaining after this bill: \$241.17/10.

= 262.41

AmerenUE P.O. BOX 66529 ST. LOUIS, MO 63166-6529 PRESIDG PREVIROGY 08591 08190 401 (ACTUAL) RES 01 29.80 ST.LOUIS CTY TAX

LATE PAY CHARGE @ 1.5%

DEPOSIT 1.24 1.17 152.00 PRIOR BALANCE 79.20

998-15718 **AUTO 5-DIGIT**  W FIRST CLASS MAIL U.S. POSTAGE PAID 1 OUNCE ST. LOUIS, MO

PERMIT NO. 2859

Service at: 3503 ITASKA Service from 02/02 to 02/27(98) Days 25

Acct. No. 0636 113 0301 27 Bill Date 03/06

Actual meter reading corrects previous estimate.

RETURN THIS STUB WITH PAYMENT TO:

AMOUNT DUE ON 03/18

AmerenUE P.O. BOX 66529 ST. LOUIS, MO 63166-6529 Acct. No. 0636 113 0301 27

**Amount Due** \$262.41 Due By 03/18 Delinquent After 03/27

\*\*\*\*\*\* AUTO 5-DIGIT 63111 WILLIAMS KEITH **3503 ITASKA** SAINT LOUIS MO 63111-1427

AmerenUE P.O. BOX 66529 ST, LOUIS, MO 63166-6529 S RDG PREV RDG USE READING RATE AMOU 558 00000 2244 ACTUAL RES 01 112. PRES ADG PREV ADG 00558 10277 08591 MTR CHG ST.LOUIS CTY TAX 4.70 LATE PAY CHARGE @ 1.5% 1.66 **DEPOSIT ARREARS** 152.00 PRIOR BALANCE 110.41 AMOUNT DUE ON 04/17 <u>~</u> 381.53

02B-00917 V **AUTO 3-DIGIT** 

Ω9 2 12-97

Service at: 3503 ITASKA? Service from 02/27 to 04/02/98 Days 34

Acct. No. 0636 113 0301 27 Bill Date 04/06

Bill includes past due amount. To avoid further collection action, pay \$188.00 by the delinquent date.

RETURN THIS STUB WITH PAYMENT TO:

AmerenUE P.O. BOX 66529 ST. LOUIS, MO 63166-6529 Acct. No. 0636 113 0301 27

**Amount Due** \$381.53 Due By 04/17 Delinquent After 04/28

ldhoullandlandlandlalahdlandlandlandl

\*\*\*\*\*\*\*\*\*\* AUTO 3-DIGIT 631 **WILLIAMS KEITH** 3503 ITASKA SAINT LOUIS MO 63111-1427

THACKMENT #1 showing increase

109448 06777 26 FT.LOUIS CTY TAX BUDGET ADJUSTM LATE PAY CHARGE DEFR MNTHLY AM DEPOSIT ARREARS PRIOR BALANCE

09446 06777 2669 ACTUAL RES 01 226.50 9.44 -123,94 LATE PAY CHARGE @ 1.5% 3.21 DEFR MNTHLY AMT 37,00 DEPOSIT ARREARS 23,39 PRIOR BALANCE Deposits 213,75 AMOUNT DUE ON 09/15 389,35 Applied!

99B-15453 AUTO 5-DIGIT FIRST CLASS MAIL U.S. POSTAGE PAID 1 OURICE ST. LOUIS, MO PERMIT NO. 2859

Service at: 3503 ITASKA Service from 08/02 to 08/30/98 Days 28 Your Last Payment 07/07/98 \$150.00 Acct. No. 0636 113 0301 27 Bill Date 09/02/1998

Ε

Due date and delinquent date apply to current charges only. Budget balance behind \$377.19 after paying this bill. Your budget amount has been changed to avoid a large 12th month adjustment. Your new budget amount is \$112.00. Deferred amts/months remaining after this thire \$137.01.5.

AmerenUE P.O. BOX 66529 ST. LOUIS, MO 63166-6529 PRES RDG PREV RDG 16332 15698 0SE **634** READING RATE
ACTUAL RES 01 58,19 ST.LOUIS CTY TAX 2.42 BUDGET ADJUSTMENT 36,39 LATE PAY CHARGE @ 1.5% 1.06 DEFR LATE PAY @ 1.5% DEFR MNTHLY AMT 2.12 25.00 DEPOSIT ARREARS 470.00

AMOUNT DUE ON 06/16

PRIOR BALANCE

06/16/99

99B-16438 AUTO 5-DIGIT FIRST CLASS MAIL U.S. POSTAGE PAID 1 OUNCE ST. LOUIS, MO PERMIT NO. 2859

Service at: 3503 ITASKA Service from 05/03 to 06/02/99 Days 30 Your Last Payment 05/10/99 \$142.01

Acct. No. 0636 113 0301 27 Bill Date 86/04/1999

Due date and delinquent date apply to current charges only. Budget balance ahead \$36.39 after paying this bill. Deferred amts/months remaining after this bill: \$116.17/5.

My70 Deposit

RETURN THIS STUB WITH PAYMENT TO:

AmerenUE

P.O. BOX 66529 ST. LOUIS, MO 63166-6529

Address Service Requested

Amount Due \$666.17 Due By 06/16 Delinquent After 06/25 ldfaaffaalladladladladladlaallaalla

\*\*\*\*\*\*AUTO\*\*5-DIGIT 63111 WILLIAMS KEITH 3503 ITASKA SAINT LOUIS MO 63111-1427

70.99

666.17

and 86\$1 Deposi-

AmerenUE P.O. BOX 66529 ST. LOUIS, MO 63166-6529 PRESIDG PREY HOG LISE READING RES OF 10290 ST.LOUIS CTY TAX **4.28** BUDGET ADJUSTMENT -23.88 RECONN CHARGE 30.00 DEFR LATE PAY @ 1,5% DEFR MNTHLY AMT 1.29 27.00 DEPOSIT 86,00 AMOUNT DUE ON 08/16 227.29 3600 99B-16111 M
AUTO 5-DIGIT

AUTO 5-DIGIT

A

FIRST CLASS MAIL
U.S. POSTAGE
PAID 1 QUINCE
ST. LOUIS, NO '
PERMIT NO. 2556

Service at: 35031
Service from 05/03
Your Last Payment 05/7

Budget balance behind \$23.88 after paying this bill.

Deferred amts/months remaining after this bill: \$211.32/8.

Acct. No. 0636 113 0301 27/6// Date 06/04/1998

Serve from 6/2 -70 1886.00 Deposit

RETURN THIS STUB WITH PAYMENT TO:
AmerenUE

P.O. BOX 66529 ST. LOUIS, MO 63166-6529

Address Service Requested

Amount Due \$227.29 Due By 06/16 Delinquent After 06/25

#### 1.H.callanthadhalladdalalladhaathaallt

WILLIAMS KEITH 3503 ITASKA SAINT LOUIS MO 63111-1427



Union Electric

AHACHMenta Deposits

One Ameren Plaza 1901 Chouteau Avenue PO Box 66149 St. Louis, MO 63166-6149 314.621.3222

February 14, 1998 Note: FeB 14, 1998 15+ Deposet

(Next page)

MAY 12, 1998 2nd Reposet

Williams Keith 3503 Itaska St. Louis Mo. 63111

Dear Customer:

We are pleased to have your new account. A deposit request for \$152.00 will be billed on your next service bill. This deposit will be held in your name and will earn 9.0% per annum in interest. NO REASON Given For this Deposit ReQUEST

If you have any questions, contact our Customer Service Center at 342-1111.

Sincerely yours,

R.D. Sloyd

R. D. Lloyd Customer Representative Customer Relations Department

ACCOUNT NO.

SERVICE ADDRESS

0636 113 0301 2

3503 Itaska

<u>tollomur</u>

0842-D

AMERENUE DEPOSIT AGREEMENT CONFIRMATION

NT MADE ON 05/11/98 CONCERNING D TO YOUR ACCOUNT: TO BE ADDED TO YOUR THIS NOTICE WILL CONFIRM THE \$152.00 DEPOSIT WHICH WAS THIS AGREEMENT CALLS FOR THE MONTHLY BILLS IN 5 INSTALLMENT PLUS I INSTALLMENT OF \$27.00

WITH YOUR NEXT BILL.

RESULT IN DISCONNECTION OF YOUR SERVI

PLEASE NOTE - THIS AGREEMENT IS FOR THIS DEPOSIT ONLY AND DOES NOT APPLY TO ANY OTHER MONIES DUE AMERENUE.

63111

Increased

One Ameren Plaza 1901 Chouteau Avenue PO Box 66149 St. Louis, MO 63166-6149 314.621.3222

FeB. 14, 1998 And Again 3mo. later! May 12, 1998

Williams Keith 3503 Itaska St. Louis Mo, 63111

Dear Customer:

**Ameren** UE

We will include a deposit for \$86.00 on your next bill. This deposit will be held in your name and will earn 9.5% per annum in interest. The deposit is required at this time due to your record of late payment. Had Never Been Disconnected at this foint.

If you have any questions, please contact our Customer Service Center at 342-1111.

Sincerely yours,

R. D. Lloyd

Customer Representative

R.D. Lloyd

Customer Relations Department

ACCOUNT NO.

**SERVICE ADDRESS** 

0636 113 0301 2

3503 Itaska

One Ameren Plaza 1901 Chouteau Avenue PO Box 66149 St. Louis, MO 63166-6149 314.621.3222

7/arrears 470.00 See - Next-



April 12, 1999

Williams Keith 3503 Itaska St. Louis Mo. 63111

Dear Customer:



We will include a deposit for \$470.00 on your next bill. This deposit will be held in your name and will earn 9.5% per annum in interest. The deposit is required at this time due to your record of late payment. Wall occassion of disconnection of oversight
PAICL BILL VERY NEXT DAY!

If you have any questions, please contact our Customer Service Center at 342-1111.

Sincerely yours,

R. D. Lloyd

Customer Representative

R.D. Sloyd

**Customer Relations Department** 

ACCOUNT NO.

SERVICE ADDRESS

0636 113 0301 2

3503 Itaska



P.O. BOX 66529 ST. LOUIS, MO 63166 A HACHMENT #3
STATE SENT OF ACCOUNT

Deposits billed But Never Credited.

63111

For Service At:

3503 ITASKA

ST. LOUIS, MO

PAGE

Mail to:

WILLIAMS KEITH 3503 ITASKA

ST. LOUIS, MO

63111

Date:

MAY 07,1999

Account Number: 063611303012

Type of Account:

SINGLE SERV ELECT

Prepared by: C20963

This is the information requested. Please cut on dotted line and submit upper portion if remitting a payment

|             | Meter                                   |          |                     |      |          | Bills  | Mis  | c. Charges | Payme       | ints                        | Mis  | c. Credits  |
|-------------|---|----------|---------------------|------|----------|--------|------|------------|-------------|-----------------------------|------|-------------|
| Read Date   | Reading                                 | Code     | Use                 | Days | Code     | Amount | Code | Amount     | Date        | Amount                      | Code | Amount      |
| NOV 28,1997 | 07101                                   |          |                     |      |          |        |      |            | MAY 12,1998 | 190.00                      |      | · ·         |
| DEC 31,1997 |   |          | 494                 | 26   |          | 36.06  |      |            | JUL 07,1998 | 150.00                      |      |             |
| FEB 02,1998 | <del></del>                             | E        | 570                 | 30   | L        | 41.60  | LP   | .54        | AUG 04,1998 |                             | MSC  | 7.49        |
| FEB 27,1998 | 08591                                   |          | 401                 | 30   |          | 31.04  | LP   | 1.17       | AUG 04,1998 |                             | MSMC | .31         |
|             | ļ                                       |          |                     |      |          | # 1    | DPB  | 152.00     | SEP 18,1998 | 100.00                      |      |             |
| MAR 17,1998 | 10277                                   |          | 1686                |      | MC       |        |      |            | NOV 02,1998 |                             | DPB  | 238.00      |
|             | 00000                                   |          |                     | *    | MC       |        |      |            | NOV 03,1998 | 164.00                      |      |             |
| APR 02,1998 |   |          | 2244                | 34   | MC       | 117.46 | LP   | 1.66       | DEC 03,1998 | 100.00                      | ,    |             |
| MAY 03,1998 | 01156                                   | .        | 598                 | 30   |          | 43.35  | LP   | 3.44       | JAN 08,1999 | 47.86                       |      |             |
| JUN 02,1998 | 02327                                   |          | 1171                | 30   |          | 106.88 | DLP  | 1.29       | FEB 06,1999 | 141.71                      |      |             |
|             |   |          |                     |      |          |        | RECE | 30.00      | MAR 04,1999 | 142.75                      |      |             |
|             |   |          |                     |      |          | # 2    | DPB  | 86.00      | APR 12,1999 | 142.38                      |      |             |
| JUL 01,1998 | 04153                                   |          | 1826                | 30   |          | 163.31 | DLP  | •76        | MAY10, A99  |                             |      |             |
|             |   |          |                     |      |          |        | LP   | 2.25       | Ine 11 1999 | 70.99                       |      |             |
| AUG 02,1998 | 06777                                   |          | 2624                | 30   |          | 232.06 | DLP  | .20        | , , , , ,   | , , , , , ,                 |      |             |
|             |   |          |                     |      |          |        | LP   | 1.73       |             |                             |      |             |
| AUG 30,1998 | 4                                       |          | 2669                | 30   |          | 235.94 | LP   | 3.21       |             |                             |      |             |
| SEP 28,1998 |   |          | 1376                | 30   |          | 78.71  | LP   | 343.       |             | . المعالمين با با المحمليين |      |             |
| OCT 27,1998 |   |          | 835                 | 30   |          | 56.36  | LP   | 5.17       |             |                             |      |             |
| NOV 29,1998 | 12557                                   | <u> </u> | 900                 | 30   |          | 59.04  | LP   | .10        |             |                             |      |             |
| · · ·       | <u> </u>                                |          | <del></del>         |      |          |        | DLP  | 4.37       |             |                             |      |             |
| JAN 02,1999 | 13304                                   |          | 747                 | 30   |          | 52.67  | LP   | .72        |             |                             |      |             |
|             | <u> </u>                                |          |                     |      |          |        | DLP  | 3.99       |             |                             |      |             |
| JAN 31,1999 | 13952                                   |          | 648                 | 30   |          | 46.48  | LP   | 2.13       |             |                             |      | <del></del> |
|             |   |          | <del></del>         |      |          |        | DLP  | 3.62       |             |                             |      |             |
| MAR 02,1999 | 14594                                   |          | 642                 | 30   |          | 46.10  | LP   | 2.14       |             |                             |      |             |
|             | ļ                                       |          | <u> </u>            |      | <u>L</u> |        | DLP  | 3.24       |             |                             |      |             |
| APR 02,1999 | 15172                                   |          | 578                 | 30   |          | 42.10  | LP   | 2.14       |             |                             |      |             |
|             | 800000000000000000000000000000000000000 |          | ******************* |      |          |        | DLP  | 2.87       |             |                             |      |             |
| TOTALS      |   |          |                     |      |          |        |      |            |             |                             |      |             |

MR Roberts:

Note DPB - " DePosit Hilled Yet, I see NO DPAB - Deposit Applied to Bil.





For Service At:

3503 ITASKA

PAGE

Mail to:

ST. LOUIS, MO

63111

WILLIAMS KEITH 3503 ITASKA ST. LOUIS, MO

63111

Date:

MAY 07,1999

Account Number: 063611303012

Type of Account:

SINGLE SERV ELECT

Prepared by: C20963

This is the information requested. Please cut on dotted line and submit upper portion if remitting a payment

|          |                  | Meter   |                     | Bills |      |          | Misc     | . Charges | Payments |                                       | Mis                                   | Misc. Credits |             |
|----------|------------------|---------|---------------------|-------|------|----------|----------|-----------|----------|---------------------------------------|---------------------------------------|---------------|-------------|
| R        | ead Date         | Reading | Code                | Use   | Days | Code     | Amount   | Code      | Amount   | Date                                  | Amount                                | Code          | Amount      |
| YAN      | 03,1999          | 15698   |                     | 526   | 30   |          | 38.85    | DLP       | 2.49     |                                       |                                       |               |             |
|          |                  |         |                     |       |      |          |          | RECE      | 30.00    |                                       |                                       |               |             |
|          |                  |         |                     |       |      |          | #3       | DPB       | 470.00   |                                       |                                       | h n           |             |
|          |                  |         |                     |       |      |          |          |           |          |                                       |                                       |               |             |
|          |                  |         |                     | ****  |      |          |          |           |          |                                       |                                       |               |             |
|          | <u>.</u>         |         | <u> </u>            |       |      |          |          |           |          |                                       |                                       |               | ···         |
|          |                  |         |                     |       |      |          |          |           |          | 1                                     |                                       |               | <del></del> |
|          |                  |         | <u> </u>            |       |      | <u> </u> |          |           |          |                                       |                                       |               |             |
|          |                  |         | <u> </u>            |       |      |          |          |           |          |                                       | ·                                     |               |             |
|          |                  |         |                     |       |      |          |          |           |          |                                       |                                       |               |             |
|          |                  |         |                     |       |      |          |          |           |          | -                                     |                                       |               |             |
|          |                  |         |                     |       |      |          |          |           |          |                                       |                                       |               | ·           |
|          |                  |         |                     |       |      |          |          |           |          |                                       |                                       |               |             |
| •        |                  |         |                     |       |      |          | -        |           |          |                                       |                                       |               | •           |
|          |                  |         |                     |       |      |          |          |           |          |                                       |                                       |               |             |
|          |                  |         |                     |       |      |          |          |           |          |                                       | *                                     |               | -           |
|          |                  |         |                     |       |      |          |          |           |          |                                       |                                       | 1             | <del></del> |
|          | ·-· <del>-</del> |         |                     |       |      |          |          |           |          |                                       |                                       |               |             |
|          |                  |         |                     |       |      |          |          |           |          | · · · · · · · · · · · · · · · · · · · | · · · · · · · · · · · · · · · · · · · |               |             |
|          |                  |         |                     |       |      |          |          |           |          |                                       |                                       | 1             |             |
|          |                  |         |                     |       |      |          |          |           |          |                                       |                                       |               |             |
|          |                  |         |                     |       |      |          |          |           |          |                                       | · , ·                                 |               |             |
|          |                  |         |                     |       |      |          |          |           |          |                                       | - <del>1</del> - <u>*</u> -           |               |             |
|          |                  |         | $\sqcup $           |       |      |          |          |           |          |                                       |                                       |               | v. ····     |
|          |                  |         | $\sqcup \downarrow$ |       |      |          |          |           |          |                                       | - , <u> </u>                          |               |             |
|          |                  |         | $\sqcup$            |       |      |          |          |           |          |                                       | **                                    |               |             |
|          |                  |         |                     |       |      |          |          |           |          |                                       | ···                                   |               |             |
|          |                  |         |                     |       |      |          |          |           |          |                                       |                                       | <del> </del>  | 7           |
|          |                  |         |                     |       |      |          |          |           |          |                                       |                                       |               |             |
| <u> </u> | OTALS            |         |                     |       |      |          | 1,428.01 |           | 820.66   |                                       | 1,178.70                              |               | 245.8       |

TOTAL CHARGES
TOTAL CREDITS

2,248.67 1,424.50-

TOTAL

824.17

DEFERRED BALANCE BALANCE DUE 141.17-683.00 Service At: 3503 ITASKA A 314) 342-1111

# NOTICE OF SERVICE DISCONNECTION

Date of Notice Amount Past Due Your Last Payment 04/29/1999

\$142.01 \$142.38

Account Number 0636 113 0301 27

Your service will be DISCONNECTED on or after MAY 10TH for failure to pay \$142.01.

AVOID DISCONNECTION by making a minimum payment of \$142.01.

Monthly Amounts 14000 Rurely Fell under per mo

3020000 0636113030127 00142010 00079710 00142010

Service At: 3503 TASKA

Service At: 3503 TASKA

Account Number 0636 113 0301-27

Your service will be DISCONNECTED on or after MAY 10TH for failure to pay \$142.01:

AVOID DISCONNECTION by making a minimum payment of \$142.01.

1030000 0636113030127 00142010 00099910 00142010

Defosit

IN
DIS pote Amerenule (314) 342-1111 NOTICE OF SERVICE DISCO
Date of Notice 06/03/1999

Amount Past Due Your Last Payment 05/10/1999

Account Number 0636 113 0301.27

Your service will be DISCONNECTED on or after JUNE OTH for failure to pay \$540.99

AVOID DISCONNECTION by making a minimum payment of \$540.99.

DISCONNECTION by making a minimum payment of \$540.99.

DISCONNECTION by making a minimum payment of \$540.99.

4030000 0636113030127 00540990 00502140 00540990

PLEASE BRING THIS BILL WITH PAYMENT TO OUR AGENT

TOTAL PAST DUE
PAY BEFORE
WILLIAMS KEITH
3503 ITASKA
Account Number 0636 113 0301 27

try to reconnect it on the day we receive
your payment or the next business day.

Amount
Enclosed \$

4030000 0636113030127 00540990 00502140 00540990

| <b>Ameren UE</b> (314) 342-1111 | NOTICE OF SE                      | RVICE DISCO | NNECTION |
|---------------------------------|-----------------------------------|-------------|----------|
| . A                             | Date of Notice<br>Amount Past Due | 06/29/1999  | \$125,18 |
| Service At: 3503 FFASKA         | Your Last Payment                 | 06/11/1999  | \$70.99  |
| Account Number 6636 113 6361 27 |                                   |             |          |

Your service will be DISCONNECTED on or after JULY 9TH for failure to pay \$125.18.

# AmerenUE 314) 342-1111 NOTICE OF SER EDISCONNECTION Date of Notice Amount Past Due Your Last Payment 01/08/1999 \$47.86 Your service will be DISCONNECTED on or after FEBRUARY 8TH for failure to pay \$141.71 AVOID DISCONNECTION by making a minimum payment of \$141.71

**N**Ameren UE

- (344) 342-1111

NOTICE OF SERVICE DISCONNECTION

Date of Notice Amount Past Due

Your Last Payment

01/27/1999

01/08/1999

\$141.71 \$47.86

Account Number 0636 113 0301 27

Service At: 3503 ITASKA

Your service will be DISCONNECTED on or after FEBRUARY 8TH for failure to pay \$141.71.

AMOID DISCONNECTION by making a minimum payment of \$141.71.

8020000 0636113030127 00141710 00093850 00141710

| <b>M</b> Ameren UE |             | 100 A 40 A | Norice                  | * * * FIN              | AL * * *<br>CE DISCO | <u>NNECTION</u> |
|--------------------|-------------|--|-------------------------|------------------------|----------------------|-----------------|
| Service At: 3503   |             | ¥342-1111<br>A                           | Date of No<br>Amount Pa | tice 0                 | 3/04/1999            | \$142.75        |
| Account Number     |             | 1 27                                     | Your Last               |                        | 2/06/1999            | \$141.71        |
| Your service will  | be DISCONNE | CTED on or after                         | MARCH 10TH              | for failure to         | pay \$142.75         |                 |
|                    |             | naking a minimu                          |                         |                        |                      |                 |
| A VOLD DISCO       |             |  |                         | the strike in the same |                      |                 |

9030000 0636113030127 00142750 00096270 00142750

PLEASE BRING THIS BILL WITH PAYMENT TO OUR AGENT

NOTICE:

If your service is disconnected, we will try to reconnect it on the day we receive your payment or the next business day. TOTAL PAST DUE \$142.75
PAY BEFORE 03/10
WILLIAMS KEITH
3503 ITASKA
Account Number 0636 113 0301 27

Amount Enclosed \$\_\_\_\_\_

9030000 0636113030127 00142750 00096270 00142750

\*\*\* FINAL \*\*

NOTICE OF SERVICE DISCONNECTION

Date of Notice 04/05/1999

Amount Past Due: 11228
Your Last Payment 03/04/1999 514275

Account Number 0636 113 030127

Your service will be DISCONNECTED on or after APRIL 9TH for failure to pay \$142.38.

AVOID DISCONNECTION by making a minimum payment of \$142.38.

3030000 0636113030127 00142380 00096280 00142380

NOTICE OF SERVICE DISCONNECTION

Date of Notice

Service At: 3503 ITASKA

Amount Past Due Your Last Payment

07/07/1998

\$237.14 \$150.00

Account Number 0636 113 0301-27

Your service will be DISCONNECTED on or after SEPTEMBER 4TH for failure to pay \$237.14

VOID DISCONNECTION by making a minimum payment of \$237.14.

4030000 0636113030127 00237140 00114130 00237140

PLEASE BRING THIS BILL WITH PAYMENT TO OUR AGENT

If your service is disconnected, we will try to reconnect it on the day we receive your payment or the next business day.

TOTAL PAST DUE PAY BEFORE WILLIAMS KETH 3503 ITASKA 237.14 09/04

Account Number 0636 113 0301 27

Amount Enclosed \$

4030000 0636113030127 00237140 00114130 00237140

Ameren UE

(314) 342-1111

NOTICE OF SERVICE DISCONNECTION

09/18/1998

Date of Notice Amount Past Due

Your Last Payment

7/1998

\$441.78 \$100.00

Service At: 3503 ITASKA

Account Number 0636 113 0301 27

Your service will be DISCONNECTED on or after NOVEMBER 4TH for failure to pay \$441.78.

AVOID DISCONNECTION by making a minimum payment of \$441.78.

**Ameren** UE

(314) 342-1111

NOTICE OF SERVICE DISCONNECTION

Date of Notice Amount Past Due

09/24/1998

Your Last Payment

09/18/1998

\$289.35 \$100.00

Account Number 0636 113 0301 27

Service At: 3503 ITASKA

Your service will be DISCONNECTED on or after OCTOBER 6TH for failure to pay \$289.35.

AVOID DISCONNECTION by making a minimum payment of \$289.35.

1020000 0636113030127 00289350 00152210 00289350

**Ameren** UE

(314) 342-1111

**NOTICE OF SERVICE DISCONNECTION** 

Date of Notice

10/23/1998

Amount Past Due Your Last Payment

09/18/1998

\$441.78 \$100.00

Account Number 0636 113 0301 27

Service At: 3503 ITASKA

Your service will be DISCONNECTED on or after NOVEMBER 4TH for failure to pay \$441.78.

AVOID DISCONNECTION by making a minimum payment of \$441.78.

Ameren UE

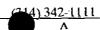
(314) 342-111

NOTICE OF SERVICE DISCONNECTION
Date of Notice 09/30/1998

Date of Notice Amount Past Due

\$289.35

# **7 Ameren UE**



## NOTICE OF SERVICE DISCONNECTION Date of Notice

07/07/1998

\$123.01 \$150.00

Account Number 0636 113 0301 27

Service At: 3503 ITASKA

Amount Past Due Your Last Payment

Your service will be DISCONNECTED on or after AUGUST 7TH for failure to pay \$123.01.

AVOID DISCONNECTION by making a minimum payment of \$123.01.

#### DD50000 0F3F173030751 00753010 00753010 00153010

RETURN THIS STUB TO: AmerenUE P.O.BOX 66301 ST. LOUIS, MO 63166

If your service is disconnected, we will try to reconnect it on the day we receive your payment or the next business day.

TOTAL PAST DUE \$123.01 PAY BEFORE 08/07 WILLIAMS KEITH 3503 ITASKA Account Number 0636 113 0301 27

Amount Enclosed \$

0050000 0636773030752 00753070 00753070 00753070

Your Last Payment

| <b>Ameren</b> UE    |  |
|---------------------|--|
| <b>***Ameren</b> ue |  |

(314) 342-1111

NOTICE OF SERVICE DISCONNECTION

Date of Notice Amount Past Due

07/07/1998

08/26/1998

\$150.00

Service At: 3503 ITASKA

Account Number 0636 113 0301 27

Your service will be DISCONNECTED on or after SEPTEMBER 4TH for failure to pay \$237.14.

AVOID DISCONNECTION by making a minimum payment of \$237.14.

4020000 0636113030127 00237140 QOLL4130 QQ237140

PUTURN THIS STUB TO: AmerenUE P.O.BOX 86301 ST. LOUIS, MO 63166

If your service is disconnected, we will try to reconnect it on the day we receive your payment or the next business day.

TOTAL PAST DUE \$237.14 PAY BEFORE 09/04 WILLIAMS KEITH 3503 ITASKA Account Number 0636 113 0301 27

Amount Enclosed \$

6020000 0636113030127 00237140 00114130 00237140

NOTICE OF SERVICE DISC crvice At: 3503 FTASKA Date of Notice Amount Past Due 08/03/1998 Your Last Payment 07/07/1998 Account Number 0636 113 0301 27
Your service will be DISCONNECTED on or after AUGUST 7TH for failure to pay \$123.01. AVOID DISCONNECTION by making a minimum payment of \$123.01.

9030000 0P3P773030755 00753070 00753070 00753070

PLEASE BRING THIS BILL WITH PAYMENT TO OUR AGENT

TOTAL PAST DUE \$38153

PAY BEFORE 05/08

WILLIAMS KETTH
3503 FIASKA
Account Number 0636-113 0301 27.

Amount
Enclosed \$250.

3030000 0636113030127 00188000 00119120 00381530

| Ameren UE | (314) 342-1111 |
|-----------|----------------|
|           | Δ              |

NOTICE OF SERVICE DISCONNECTION

Date of Notice Amount Past Due Your Last Payment 06/26/1998 05/12/1998

\$227.29 \$190.00

Account Number 0636 113 0301 27

Service At: 3503 ITASKA

Your service will be DISCONNECTED on or after JULY 9TH for failure to pay \$227.29.

AVOID DISCONNECTION by making a minimum payment of \$227.29.

0050500 0P222200 00552200 00552200 00552200

RETURN THIS STUB TO: AmerenUE P.O.BOX 66301 ST. LOUIS, MO 63166

If your service is disconnected, we will try to reconnect it on the day we receive your payment or the next business day. TOTAL PAST DUE \$227.29
PAY BEFORE 07/09
WILJAMS KEITH
3503 ITASKA
Account Number 0636 113 0301 27

Amount
Enclosed \$\_\_\_\_\_

0020000 0636113030127 00227290 00227290 00227290

| <b>2</b>   | * * * FINÂL * * * NOTICE OF SERVICE DISCONNECTION |
|--|---|
| AmerenUE (314) 342-1111 N                        | Date of Notice 07/02/1998                         |
| Account Number 0636/113/0301.27                  | Your Last Payment 05/12/1998 \$190.00             |
| Your service will be DISCONNECTED on or after II | ULY 9TH for failure to pay \$150.00.              |
| AVOID DISCONNECTION by making a minimum          | payment of \$150.00.                              |
|  |   |

103000 0636173030755 0072000 00747540 00720000

4/12/99 I was Home Waiting



OUR ELECTRIC SERVICE

WORKER CALLED TODAY TO

Dogs in your your

Lot able to trien your

elec. Ser. on.

Left on Door Homes
Please call and advise us when it
will be convenient to return.

By #57 V

Date 4 1/2/99 Time 4 : 40 AM
FORM 2158 REV 2/99 STK. NO. 37-21-723

St. Louis City & County residents call 342-1000; outside the St. Louis area call toll-free at 1-800-552-7583.

AHACHMent # 00 6 ST.LOUIS CTY TAX

UDGET ADJUSTMENT

ECONN CHARGE

DEFR LATE PAY @ 1.5%

DEFR MNTHLY AMT

DEPOSIT

PRIOR BALANCE

AMOUNT DUE ON 05/17

683.00

OSB-00404 AUTO 3-DIGIT

Α

Service at: 3503 ITASKA Service from 04/02 to 05/03/99) Days 31 Your Last Payment 04/12/99 \$142.38 Acct. No. 0536 113 0301 27 Bill Date 05/05/19

Due date and delinquent date apply to current charge.

Your new budget amount is \$97.00.

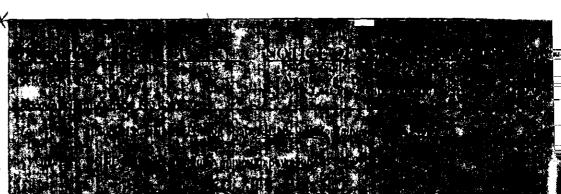
Deferred amts/months remaining after this bill: \$141.17

RETURN THIS STUB WITH PAYMENT TO:

AmerenUE P.O. BOX 66529 ST. LOUIS, MO 63166-6529 Acct. No. **0636 113 0301 27** 

Amount Due \$683.00 Due By 05/17 Delinquent After 05/26 WILLIAMS KEITH 3503 ITASKA SAINT LOUIS MO 63111-1427

\$ \$470.00 \$ 70.99 \$ 540.99 Disconnection For Deposit Amount June 9th, 1999



4030000 0636113030127 00540990 00502140 00540990

| ALL AND THE PARTY AND THE PART | C  | and the second   | 2 to 200 1 2 miles  |   |
|--|--|------------------|---------------------|---|
| AmerenUl   | P.O. BOX 66  | 529 ST. LOI      | JIS, MO 631         | 66-6529   |
|  |  | READING          | HATE                | AMOUNT  |
| 09446 067  | 77 2869  | ACTUAL           | RES 01              | 226.50  |
| ST.LOUIS C   | XAT YT   |                  |                     | 9.44  |
| BUDGET A   | DJUSTMEN   | T                |                     | -123.94   |
| LATE PAY   | CHARGE @   | 1.5%             |                     | 3.21  |
|  |  |                  |                     | 37.00   |
|  |  |                  |                     | 23.39   |
| DOING BAL  | ANCE   |                  |                     | 213.75  |
| I THICH DAL  | AITOL  |                  |                     | 213.73  |
| ******   | 5115 641 66  |                  |                     | 200.05  |
| AMOUNT   | DUE ON 09  | /I <b>5</b>      |                     | 389.35  |
|  |  |                  |                     | i   |
| م. م   |  | al               | 1                   | ļ.  |
| Bill   |  | 9/1              | 100                 | i   |
|  |  | 1,00             | 178                 | ļ   |
|  |  |                  |                     |   |
| Į.   |  |                  |                     |   |
| l  |  |                  |                     |   |
|  | Amerenue<br>PRES RDG PRE<br>09446 087<br>ST.LOUIS C<br>BUDGET A<br>LATE PAY<br>DEEB MNTI<br>DEPOSIT A<br>PRIOR BAL | AMOUNT DUE ON 09 | AMOUNT DUE ON 09/15 | AMBIENDE P.O. BOX 66529 ST. LOUIS, MO 6310 PRES RDG PREV RDG USE READING HATE 09446 06777 2889 ACTUAL RES 01 ST.LOUIS CTY TAX BUDGET ADJUSTMENT LATE PAY CHARGE @ 1.5% DEER-MNTHLY AMT DEPOSIT ARREARS PRIOR BALANCE  AMOUNT DUE ON 09/15 |

Service at: 3503 ITASKA
Service from 08/02 to 08/30/98 Days 28
Your Last Payment 07/07/98 \$150.00
Acct. No. 0636 113 0301 27 Bill Date 09/02/199

Ε

FIRST CLASS MA

U.S. POST/GI PAID 1 OUN CE ST. LOUIS, NO PERMIT NO. 25%

99B-15453

AUTO 5-DIGIT

Due date and delinquent date apply to current charges o...!
Budget balance behind \$377.19 after paying this bill.
Your budget amount has been changed to avoid a large 12 month adjustment. Your new budget amount is \$112.00.
Deferred amte@months.c. we ding after the 15 to 15 to 15.00.



One Ameren Plaza 1901 Chouteau Avenue PO Box 66149 St. Louis, MO 63166-6149 314.621.3222

June 14, 1999

Williams Keith 3503 Itaska St. Louis Mo. 63111 detters reflecting payment was deducted by 13.00 toward 470.00 Deposit

Dear Customer:



Thank you for your deposit payment of \$13.00. Your deposit will earn interest at the rate of 9.5% per year and will be credited to your account.

Your deposit will be eligible for refund one year after full payment is received. Refund of the deposit is subject to payment of your monthly bill for service by the delinquent date.

We appreciate your attention to your credit record. You may learn the status of your deposit by calling 342-1111.

Customer Service Center

ACCOUNT NO.

SERVICE ADDRESS

0636 113 0301 2

3503 Itaska

One Ameren Plaza 1901 Chouteau Avenue PO Box 66149 St. Louis, MO 63166-614 314.621.3222

July 9, 1999

Williams Keith 3503 Itaska St. Louis Mo. 63111 Letter Showing 36.00 deducted toward preprient of 470.00 Deposit

Dear Customer:



Thank you for your deposit payment of \$36.00. Your deposit will earn interest at the rate of 9.5% per year and will be credited to your account.

Your deposit will be eligible for refund one year after full payment is received. Refund of the deposit is subject to payment of your monthly bill for service by the delinquent date.

We appreciate your attention to your credit record. You may learn the status of your deposit by calling 342-1111.

Customer Service Center

ACCOUNT NO.

SERVICE ADDRESS

0636 113 0301 2

3503 Itaska