FORMAL COMPLAINT FORM

Attach extra pages as necessary.

BEFORE THE PUBLIC SERVICE COMMISSION OF THE STATE OF MISSOURI

A Felber Your nan

Complainant,

Ameren Missouri

(Utility's name here)

Respondent,

File No.

(PSC fills this in)

FORMAL COMPLAINT

1_Complainant resides a	ŧ.	÷	Ţ
(City)	(State)	(Zip ⁻ C	ode)

- 2. The utility service complained of was received at:
 - a. Complainant's address listed in paragraph 1.
 - b. A different address:

(Address where service is provided, if different from Complainant's address)

3. Respondent's address is:

1901 Chouteau Auc dress of complainant) Saint Louis MO (Address of complainant)

4. Respondent is a public utility under the jurisdiction of the Missouri Public

Service Commission.

6. Complainant now requests the following relief:

(Explain what you want the Commission to do: the specific results you are seeking in this complaint.)

Ameren Missouri Mecaly Shurde Gervic
with multiple payment posted to
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America Rich Cledite & + 4 Bit payment
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for Todyment. American was made busite
and the over 200 engils to resolve
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7. The relief requested is appropriate because Respondent has violated a

statute, tariff, or Commission regulation or order, as follows:

(Explain why the Commission should grant the relief you seek: the facts that constitute a violation of a statute, tariff, or Commission regulation or order.)

Service re-chiV <u>Cepre</u> 17.90 omes 404 anc as ñ e le and ormation Cor

- 8. The Complainant has taken the following steps to present this matter to
- the Respondent:

See off

(Please describe in detail what steps you have already taken to resolve this complaint.)

Call **\^1**Λ ise fo ste Mestic ANV/ Cra MOU SONA 'NC ena **R**cie 711125 Date Signature Frihrs Complainant's Printed Full Name

Alternate Contact Number

Complainant's E-mail Address

Attach additional pages, as necessary. Attach copies of any supporting documentation. Do not send originals of any supporting documentation.