

Informal Complaint Preliminary Information

Natural Gas Purchasing, Selling, Shipping, Transportation, or Gathering Practices

Contact Name for Complainant: _____

Company Name: _____

Company Address: _____

Company Phone/Fax/E-mail: _____

Contact Name for Respondent: _____

Company Name: _____

Company Address: _____

Company Phone/Fax/E-mail: _____

Description of Complaint: _____

How long has the problem described in the complaint existed? _____

Has complainant contacted the party that is the subject of the complaint? _____

If answer is "No", why not? _____

If answer is "Yes", then what response did the complainant receive? _____

