

Control Number: 50944



Item Number: 181

Addendum StartPage: 0

PUCT DOCKET NO. 50944

RATEPAYER COMMENTS/REQUESTS TO INTERVENE

If you wish to PROTEST the proposed rate change, you must submit this form and 10 copies to:

Filing Clerk
Public Utility Commission of Texas
1701 North Congress Avenue
P.O. Box 13326
Austin, Texas 78711-3326

Unless protests are received from at least 10% of ratepayers or from any affected municipality, or the Commission Staff requests a hearing, no hearing will be held, and the rates will be effective as proposed.

CUSTOMER INFORMATION (to be completed by customers submitting protests)

| First Name: | Paula | Last Name: | Colwell |
|---|---|---|---|
| | r: <u>830 - 285 - 4302</u> | | |
| Email Address | : Piula and tras polive. | Clor | |
| Address, City, | State: 759 Private Ro | rud 1514 | Bondera TR 78003 |
| Location where | e service is received: Sarvathe mailing address) | as above | |
| Please fill out | the following: | | |
| I wish to be considered evi comments may | dence in this case; and I have no f | hat: I am NOT a urther obligation ablic concerns an | party to this case; my comments are not to participate in the proceeding. Public identify issues to be explored. Pleas |
| party to the cas to attend hearing in the case, I m | se; I am required to respond to all ngs, and if I file testimony, I may l | discovery request to cross-examined party in the case | NTERVENOR, I understand that: I am sts from other parties; I may be required in the hearing; if I file any document; and I acknowledge that I am bound buistrative Hearings (SOAH). |
| Signature of P | rotestant: | | |
| Pare (| ål vell | Da | ate: 25 IV 2020 |
| | Si desea informacion | | |

Hearing- and speech-impaired individuals with text telephones may contact the PUCT's Customer Assistance Hotline

at

512-936-7136

18/