



**COMPLAINT AGAINST MEDIACOM CABLE SERVICE**

1.) Date: \_\_\_\_\_  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_

2.) What is your Complaint? Include specific details that may be helpful to the Commission.

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3.) State what effort, if any, you have taken to resolve this matter with the Cable Company including telephone calls, correspondence, and the dates, if such are available.

Date Called: \_\_\_\_\_

Whom you dealt with: \_\_\_\_\_

What happened and what was the result:

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4.) Attach any supporting information: (ie., documents, correspondence, or other evidence) to be submitted with your complaint.

Are there attachments: \_\_\_\_ Yes \_\_\_\_ No \_\_\_\_ Number of Pages

5.) You are entitled to be present and speak when the Commission hears this Complaint. Please indicate whether you wish to appear: \_\_\_\_ Yes \_\_\_\_ No

\_\_\_\_\_  
Signature of Complainant

The handling of this complaint by the Commission is subject to the procedure of hearing complaints as found in the Commission's bylaws. Copies of this procedure are on file and available from the City Attorney's Office. A record of any hearing relating to this complaint will be maintained and opened to public inspection.

Mail or deliver to City Attorney, City of Carbondale, 200 South Illinois Avenue, P.O. Box 2047, Carbondale, IL 62901