

**AMERICAN ARBITRATION ASSOCIATION  
SUPPLEMENTARY PROCEDURES FOR  
CONSUMER-RELATED DISPUTES**

**GRAND RAPIDS ENERGY CLAIM FORM**

**How to file a claim; consumers should:**

- Fill out this form and retain one copy for your records.
- Mail a copy of this form to the AAA, to:  
AAA's Case Filing Services, 1101 Laurel Oak Road  
Suite 100, Voorhees, NJ 08043.
- Send a copy of this form to Grand Rapids Energy: It will pay any required fee.

**How to file a claim; businesses should:**

- Fill out this form and retain one copy for your records.
- Mail a copy of this form and your check or money order made payable to the AAA, to:  
AAA's Case Filing Services, 1101 Laurel Oak Road  
Suite 100, Voorhees, NJ 08043. Please consult Section C-8 of the Supplementary Procedures for Consumer-Related Disputes for the appropriate fee.
- Send a copy of this form to the consumer by registered mail, return receipt requested.

- 1** How is this claim being filed? Check only one.
- By request of the consumer (A copy of the arbitration agreement **must** be attached. A copy of this form **must** also be sent to the business)
- By request of the business (A copy of the arbitration agreement **must** be attached. A copy of this form **must** also be sent to the consumer by registered mail return receipt requested)
- or-
- By mutual agreement ("submission") of the parties (both parties **must** sign this form)

**2** Briefly explain the dispute.

**3** Do you believe there is any money owed to you?  Yes  No If yes, how much? \_\_\_\_\_

**4** Are you seeking any other relief?  Yes  No  
If yes, what is it?

**5** Preferred hearing locale (if an in-person hearing is held) \_\_\_\_\_

**6** Amount enclosed: NOT APPLICABLE FOR THE CONSUMER

**7** Fill in the following information:

**Consumer**

Name of Consumer \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Telephone \_\_\_\_\_

Fax \_\_\_\_\_

Email Address \_\_\_\_\_

Signature of Consumer \_\_\_\_\_

Representative \_\_\_\_\_

Firm \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Telephone \_\_\_\_\_

Fax \_\_\_\_\_

Email Address \_\_\_\_\_

**Business**

Name of Business Grand Rapids Energy Attn: Trish McFadin

Address P.O. Box 78760

City/State/Zip Atlanta, GA 30357

Telephone (404) 685-4000

Fax (404) 685-4118

Email Address customerservice@grandrapidsenergy.com

Signature of Business \_\_\_\_\_

Representative \_\_\_\_\_

Firm \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Telephone \_\_\_\_\_

Fax \_\_\_\_\_

Email Address \_\_\_\_\_