

**WYOMING PUBLIC SERVICE COMMISSION
REQUIRED COVER SHEET FOR ALL FILINGS AND APPLICATIONS**

Full Company Name _____

d/b/a's, subsidiaries _____

Street Address _____

City State Zip (plus 4 digits)

Mailing Address _____

City State Zip (plus 4 digits)

Contact Person _____

Name

Title

Type of filing (check all that apply)

Rates/Rules/Tariff Change

- Pass-on
- Commodity Balancing Account Adjustment
- General Rate Case
- Rules & Regulations
- Tariffs included? Yes No
- \$5.00 Filing Fee Paid? Yes No
- Service List included? Yes No

Total Amount Requested _____ Increase Decrease Implement New Rate

Amount Requested Per _____ (unit) \$0.5348 Per Dth

Securities, Certificates, Sale/Transfer

- Service List included? Yes No (Must be provided within 5 days of filing)
- \$15.00 Filing Fee Paid? Yes No
- \$100.00 Filing Fee Paid? Yes No

Compliance Filings

- Compliance Filing? Yes No Docket No. _____
- Revision Filing? Yes No Docket No. _____

DO NOT WRITE BELOW THIS LINE FOR PSC USE ONLY!

Docket No. _____ Docket Type _____

Sub No. _____ Type of Case _____

Comm Atty _____ CRS Atty _____

Date Filed _____

Accepted For Filing Yes No

Date Entered _____ Entry by _____ Confirmed