



## LOUISIANA PUBLIC SERVICE COMMISSION

Located at 602 North Fifth Street, Baton Rouge, LA 70802

Mailing Address P.O. Box 91154, Baton Rouge, LA 70821

Records Division: (225) 342-3157

Facsimile: (225) 342-0877

### ***ELECTRONIC FILING COVER PAGE***

Procedure and related information for making an electronic filing with the Louisiana Public Service Commission is pursuant to Executive Order Number March 24, 2020. Filings made by Electronic Filing no later than 4:30 p.m. on a business day, according to receipt in the inbox of the Records Division email, [lpsc.records@la.gov](mailto:lpsc.records@la.gov), shall be considered filed as of that day. Filings made after 4:30 p.m., on a weekend, or on a holiday shall be considered filed as of the next business day.

**If making an Electronic Filing, the original executed document, two copies, and any applicable filing fee, shall be received in the Commission's office within thirty (30) days of the expiration of Executive Order Number March 24, 2020.**

Should you have any questions concerning this emergency interim measure, please contact Terri Bordelon, by email at [terri.bordelon@la.gov](mailto:terri.bordelon@la.gov) or Kathryn H. Bowman by email at [kathryn.bowman@la.gov](mailto:kathryn.bowman@la.gov).

In order to make an Electronic Filing, please fill in this cover page and attach it to your filing. **Note, filings made by Electronic Filing without this cover page will not be accepted.**

Name of Filer \_\_\_\_\_

Filer's Contact information: E-Mail Address: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Contact information for service list, if different than Filer's Contact information:

Name: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Service List Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Type of Filing: \_\_\_\_\_

Does your Filing contain confidential information pursuant to Commission Rule 12.1? Yes \_\_\_\_ No \_\_\_\_

Is this a filing in an existing Docket? Yes \_\_\_\_ No \_\_\_\_ If yes, provide the Docket Number: \_\_\_\_\_

Synopsis of Filing:

Is the Filing larger than 10 MB? Yes \_\_\_\_ No \_\_\_\_

If yes, please estimate the number of attachment(s) that will be submitted. \_\_\_\_\_

**Once this Form is complete you may start the electronic filing process by clicking [here](#) and attach filing(s).**