



L. Allyson Honaker  
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May 20, 2020

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PUBLIC SERVICE  
COMMISSION

*Via Email to PSCED@ky.gov*

Kent Chandler  
Executive Director  
Kentucky Public Service Commission  
P.O. Box 615  
211 Sower Boulevard  
Frankfort, KY 40602

Re: *In the Matter of Burkesville Gas Company Inc.'s Quarterly Report of Gas Cost Recovery Rate Calculation - Case No. 2020-00159*

Dear Mr. Chandler:

Please find enclosed Burkesville Gas Company, Inc.'s ("Burkesville") Notice of Election to Use Electronic Filing Procedures in accordance with 807 KAR 5:001 Section 8(2).

Please do not hesitate to contact me if you have any questions.

Sincerely,

A handwritten signature in cursive script that reads "L. Allyson Honaker".

L. Allyson Honaker

Enclosures

**NOTICE OF ELECTION OF USE OF ELECTRONIC FILING PROCEDURES**

(Complete All Shaded Areas and Check Applicable Boxes)

In accordance with 807 KAR 5:001, Section 8, Burkesville Gas Company, Inc. gives notice of its intent to file an application for Purchased Gas Adjustment Filing with the Public Service Commission no later than May 28, 2020 and to use the electronic filing procedures set forth in that regulation.

Burkesville Gas Company, Inc. further states that:

- |                                                                                                                                                                                                                                                                | Yes                                 | No                                  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|
| 1. It requests that the Public Service Commission assign a case number to the intended application and advise it of that number as soon as possible;                                                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 2. It or its authorized representatives have registered with the Public Service Commission and are authorized to make electronic filings with the Public Service Commission;                                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 3. Neither it nor its authorized representatives have registered with the Public Service Commission for authorization to make electronic filings but will do so no later than seven days before the date of its filing of its application for rate adjustment; | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| 4. It or its authorized agents possess the facilities to receive electronic transmissions;                                                                                                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 5. The following persons are authorized to make filings on its behalf and to receive electronic service of Public Service Commission orders and any pleadings filed by any party or the Public Service Commission Staff:                                       |                                     |                                     |

Name	Electronic Mail Address
L. Allyson Honaker	allyson@gosssamfordlaw.com
David Thomas Shirey	dtshirey1@gmail.com

- |                                                                                                                                                                                                                                                    |                                     |                          |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|
| 6. It and its authorized representatives listed above have read and understand the procedures for electronic filing set forth in 807 KAR 5:001 and will fully comply with those procedures unless the Public Service Commission directs otherwise. | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|

Signed *L. Allyson Honaker*

Name: L. Allyson Honaker  
 Title: Attorney  
 Address: 2365 Harrodsburg Road Ste B-325  
Lexington, KY 40504  
 Telephone Number: 859-368-7740