ATTODNEY OD DADTY WITHOUT ATTODNEY (Name State Day number and address)	FOR COURT USE ONLY
ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):	FOR COURT USE ONLY
TELEPHONE:	
FAX NO. (Optional):	
ATTORNEY FOR (Name):	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF Glenn	
Glenn County Courthouse	
526 W. Sycamore Street, Willows, CA 95988	
PETITIONER/PLAINTIFF:	
RESPONDENT/DEFENDANT:	
OTHER:	
REQUEST FOR COURTROOM AUDIO/VISUAL	CASE NUMBER:
OTHER: REQUEST FOR COURTROOM AUDIO/VISUAL PRESENTATION EQUIPMENT	CASE NUMBER:

HEARING DATE:

EQUIPMENT REQUESTED:

DVD Player

□ Presentation Laptop Computer

□ Polycom Unit (used for video conference calls/witnesses)

Document Camera Viewer

□ Projector

YOUR OWN DEVICE MUST BE HDMI OR VGA COMPATIBLE. DESCRIBE ANY INTERFACING/COMPATIBILITY REQUIREMENTS BETWEEN THE EQUIPMENT YOU WILL PROVIDE AND THE EQUIPMENT YOU ARE REQUESTING THE COURT PROVIDE:

NUMBER OF POWER HOOKUPS THAT WILL BE REQUIRED FOR ALL YOUR EQUIPMENT:

DESCRIBE ANY ADDITIONAL EQUIPMENT NOT ON THE LIST ABOVE.

REQUESTOR'S SIGNATURE:

Date: _____