



Superior Court of California, County of Lassen

Request/Notification for Courtroom Audio/Visual Presentation Equipment

Attorney/Agency name: Requestors name: Telephone number: Cell number: Email:	Date(s) required: Start Time: End Time:
Alternate Contact: Alternate Telephone Number:	Case number: Case name:

Courtroom:	Judicial Officer:
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Type of equipment requested:

- Nomad Multimedia Unit w/Large Screen

Function Needed:

- Overhead Projector
- VCR/VHS Player
- DVD Player
- CD Player
- Telephonic Polycom Unit
- Large Mobile Easel

Other _____

Other _____

Notes: _____

How many power hookups will be required for equipment brought in:

Describe any additional equipment not on the list above:

Internal use only

Received by _____ Date of Testing _____ Testing completed by _____
Date & Time _____ Location _____