## **REQUEST FOR MEDIA ACCESS TO COURT PROCEEDING**

## **10TH JUDICIAL CIRCUIT COURT**

COUNTY OF \_\_\_\_\_

Plaintiff,

VS.

Case Number \_\_\_\_\_

Defendant / Respondent

## **REQUEST FOR EXTENDED MEDIA COVERAGE**

NOW COMES the undersigned Media Coordinator, who states as follows:

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1. This request is being made on behalf of all news media organizations.

2. I	Extended media	coverage is	requested for	or the [	] trial [	] proceeding _	
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scheduled to commence on \_\_\_\_\_, 20\_\_\_, at [] AM [] PM in

courtroom \_\_\_\_\_ at the \_\_\_\_\_County Courthouse in \_\_\_\_\_,

Illinois. The request for extended media coverage includes every part of such

proceeding and any later proceedings caused by a delay or continuance.

3. The request for extended media coverage is described as follows (include type of equipment and number of personnel):

4. This request for extended media coverage is filed (check appropriate box):

[] at least fourteen (14) days in advance of the proceeding identified above; or

[]	notice cannot be filed within fourteen (14) days of the proceeding because of the
follo	wing reason(s):

5. A copy of this notice shall be provided by the media coordinator to:

Counsel of record:				
_				

Parties appearing without counsel: \_\_\_\_\_

Trial Court Judge and Chief Circuit Judge: \_\_\_\_\_

Court Media Liaison: \_\_\_\_\_

6. I will abide by all provisions of the Policy for Extended Media Coverage in Circuit Courts of Illinois and the Tenth Judicial Circuit Court Local Rule and Extended Media Coverage and perform all duties required of me as the Media Coordinator.

The undersigned media coordinator gives notice of request for extended media

coverage this \_\_\_\_\_day of \_\_\_\_\_\_20\_\_\_\_

Media Coordinator (Print Name)

Signature

News Media Organization:	
Address:	
Telephone:	
Email:	