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 BUTTE Butte County Courthouse North Butte County Courthouse	
One Court Street, Oroville, CA 95965 1775 Concord Avenue, Chico, CA 95928 (530) 532-7002 (530) 532-7002	
PETITIONER/PLAINTIFF:	
RESPONDENT/DEFENDANT:	
OTHER:	CASS NUMBER
REQUEST FOR COURTROOM AUDIO/VISUAL PRESENTATION EQUIPMENT	CASE NUMBER:
HEARING DATE: EQUIPMENT REQUESTED:	
□ DVD Player □ Multi-Media Presentation Cart (DVD/CD/Document Viewer with Screen) □ Presentation Laptop Computer □ Polycom Unit (used for video conference calls/witnesses) □ Screen (for display from own HDMI or VGA compatible device) □ TV □ Mobile Whiteboard □ Flip Chart with Stand YOUR OWN DEVICE MUST BE HDMI OR VGA COMPATIBLE. DESCRIBE ANY INTE BETWEEN THE EQUIPMENT YOU WILL PROVIDE AND THE EQUIPMENT YOU ARI	•
NUMBER OF POWER HOOKUPS THAT WILL BE REQUIRED FOR ALL YOUR EQUI	PMENT:
DESCRIBE ANY ADDITIONAL EQUIPMENT NOT ON THE LIST ABOVE.	
REQUESTOR'S SIGNATURE:	DATE: