

**STATE OF ILLINOIS
IN THE CIRCUIT COURT FOR THE TWENTY-THIRD CIRCUIT**

_____ Case No. _____

vs.

REQUEST FOR EXTENDED MEDIA COVERAGE

NOW COMES the undersigned, who states as follows:

1. This request is being made on behalf of all news media organizations.
2. Extended media coverage is requested in connection with the trial or proceeding scheduled to take place on the _____ day of _____, 20____, _____ a.m./p.m. at the _____ County Courthouse in, _____ Illinois.
3. This request for extended media coverage is for the entirety of this trial or proceeding and all subsequent hearing dates.
4. The type of extended media coverage requested is as follows: (Include type of equipment and number of personnel):

5. This request for extended media coverage is filed (check the appropriate box):
 At least fourteen (14) days in advance of the proceeding identified above; or
 Less than fourteen (14) days in advance of the proceeding identified above because: (list reason(s))

6. Notice of this request needs to be provided to:
 Counsel of record
 Parties appearing without counsel:
 The Court Media Liaison:

I will abide by all the provisions of the Policy for Extended Media Coverage in Circuit Courts of Illinois and Local Rule 1.65 and perform all duties required of me, if I am designated as the Media Coordinator.

I nominate the following person be designated as Media Coordinator:

Respectfully submitted,

Signature

Printed Name

News Media Organization

Mailing Address

City, State Zip

Phone

Email

(Form 1 amended by General Order 18-1; *effective March 30, 2018.*)