REQUEST TO LISTEN TO A COURT RECORDING		
Reason for Request:		
Style of Cause:		
File Number(s):		
Publication Ban(s):	NLY ONE DATE PER REQUEST):	
Date of Proceedings (or	NLT ONE DATE PER REQUEST):	
Court Proceedings:	☐ Civil	☐ Criminal
Court Type:	☐ Supreme ☐ Court of Appeal ☐	☐ Territorial ☐ Small Claims ☐ Youth Criminal Justice
Name of Justice, Judge Chief Justice	or Justice of the Peace: Chief Judge	☐ Deputy Judge
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☐ Justice	☐ Judge	☐ J/P
Recording Type:	Full Excerpt Specify: (Re	easons, Testimony, Submissions, other, etc)
Party: Yes No Requested by:		
Email Address:	(Name)	Phone Number:
Office Use Only		
ENSURE THAT THE REQUEST COMPLIES WITH COURT ACCESS GUIDELINES		
		room 2 Courtroom 3
Courtroom/Boardroom:		room 5 Supreme Court Boardroom
	Court Circuit:	Territorial Court Boardroom
Recording Times:	(name of co	To:
		
Request Approved	Regue	est Denied
		oo. Donieu
Judge's Sig	nature	Date
Date and time to listen to recording:		
Clerk informed requestor by: Date:		

Date: