

**Request for Authorization to bring electronic device(s) into the United States District Court for the Eastern District of Virginia**

The following named person(s) is authorized to bring the below described electronic device(s) into the United States District Court for the Eastern District of Virginia on the date(s) specified:

Authorized Person(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Electronic Device(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Purpose and Location Of Use: \_\_\_\_\_  
\_\_\_\_\_

Case No.: \_\_\_\_\_

Date(s) Authorized: \_\_\_\_\_

IT Clearance Waived: \_\_\_\_\_(Yes) \_\_\_\_\_(No)

APPROVED BY:

Date: \_\_\_\_\_  
United States District/Magistrate/Bankruptcy Judge

**A copy of this signed authorization must be presented upon entering the courthouse.**

IT Clearance: \_\_\_\_\_  
IT Staff Member Date(s)

**IT clearance must be completed, unless waived, before court appearance.**