IN THE UNITED STATES DISTRICT COURT FOR THE SOUTHERN DISTRICT OF IOWA

	, Plaintiff) Case No:
V.)
	, Defendant)
-	REQUEST TO EXEMPT WITNESS(ES) FROM VIDEO RECORDING ding described below has been approved by the parties and the presiding Judge for video nder the Judicial Conference Committee on Court Administration and Case Management
•	for the Cameras Pilot Project and the Court's Administrative Order Implementing the Pilot
J	
(Descr	ibe proceeding.)
Date of	scheduled proceeding:/ (mm/dd/yyyy)
I hereby recoproceeding	quest that the testimony of the following witness(es) not be recorded during this
	Witness Name
	Indicate reason(s) not to video record (check all that apply): Proprietary Information (Trade Secret/Patent/Copyright)
	Confidential Financial Information Personal Medical/Psychiatric Information Non-public Figure Exposure (Embarassment/Ridicule) Other (Please explain)
	

Indica	ate reason(s) not to video record (chec	ck all that apply):
	Proprietary Information (Trade Sec.	ret/Patent/Copyright)
	Confidential Financial Information Personal Medical/Psychiatric Information	mation
	Non-public Figure Exposure (Emba	
	Other (Please explain)	
Witne	ess Name	
ndica	ate reason(s) not to video record (chec	ck all that apply):
	Proprietary Information (Trade Sec	ret/Patent/Copyright)
	Confidential Financial Information	
	Personal Medical/Psychiatric Information Non-public Figure Exposure (Emba	
	Other (Please explain)	
sign	this form on behalf of the party I repr	resent and the witnesses I may call.
		Signature
		Name (please print)
		Name (please print) Position (e.g., attorney of record

I submit