

**REQUEST FOR TELEVISION MEDIA COVERAGE OF JUDICIAL PROCEEDINGS  
IN THE CIRCUIT COURT OF THE CITY OF VIRGINIA BEACH**

Pursuant to Virginia Code §19.2-266, the undersigned hereby requests cameras in the courtroom on **(Date)** \_\_\_\_\_, for coverage of the proceedings in the following case:

\_\_\_\_\_ v. \_\_\_\_\_

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

**Media Organization Making Request:** \_\_\_\_\_

**Name of Representative:** \_\_\_\_\_

**Phone #:** \_\_\_\_\_

**Email:** \_\_\_\_\_

I understand that if there are multiple requests for media coverage in this case, the court will refer all second and subsequent requests to the Regional Coordinator, listed below, as designated by the Virginia Association of Broadcasters and/or the Virginia Press Association, who will facilitate all pooled coverage.

Regional Coordinator: Typhanny I. Wiggins  
Organization: WAVY TV 10/FOX 43 TV  
Phone: 757-396-6180  
Email: [Typhanny.Wiggins@wavy.com](mailto:Typhanny.Wiggins@wavy.com)

I agree to abide by all of the requirements of Virginia Code §19.2-266 concerning media coverage of judicial proceedings.

\_\_\_\_\_  
**Date** \_\_\_\_\_  
**Name of Person making request**

**EMAIL REQUEST TO: [nlcatoe@vbgov.com](mailto:nlcatoe@vbgov.com)**

\_\_\_\_\_  
**FOR COURT USE ONLY** \_\_\_\_\_

- APPROVED. First (or only one) request made.
- POOLED COVERAGE APPROVED. A prior (or multiple) request(s) made for the same judicial proceeding. Your request is referred to the above-named Regional Coordinator who will facilitate the pooled coverage and who will be the sole contact with the court.
- DENIED.

\_\_\_\_\_  
**Date** \_\_\_\_\_  
**Name of Judge**