## ADMINISTRATIVE OFFICE OF THE COURTS COURTROOM TECHNOLOGY APPLICATION

Person Makir	ng Request:				
County:		I			
Presiding Jud (if applicable)	ge:				
Contact #: _					
	not limited smart boa		•	ould purchase for your courtroom(s), tops. Please provide a cost estimate for	
Priority #1	Item:	F	riority #2	Item:	
	Cost:			Cost:	
Priority #3	Item:	F	riority #4	Item:	
	Cost:	<del></del>		Cost:	
Indiv	idual Completing App	olication	Indivi	dual Completing Application	
	(print name)			(signature)	
	Presiding Judge (print name)		Presiding Judge (signature)		
	County Mayor (print name)		County Mayor (signature)		

Please fax this form to David Weed at (615) 741-6285 on or before September 15, 2012.