

IN THE UNITED STATES DISTRICT COURT  
FOR THE EASTERN DISTRICT OF MISSOURI

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

Plaintiff : \_\_\_\_\_

v.

Defendant : \_\_\_\_\_

**PARTY RESPONSE REGARDING VIDEO RECORDING**

A request has been made for the following proceeding to be video recorded under the Judicial Conference Committee on Court Administration and Case Management Guidelines for the Cameras Pilot Project in the District Courts (available at [www.uscourts.gov/multimedia/cameras](http://www.uscourts.gov/multimedia/cameras)).

\_\_\_\_\_

(Describe proceeding.)

Date of scheduled proceeding: \_\_\_/\_\_\_/\_\_\_\_\_ (mm/dd/yyyy)

Check the appropriate box(es) below and on the next page to indicate whether you consent to the recording of some or all of this proceeding:

I consent to the recording of this entire proceeding.

I consent to the recording of some, but not all, of this proceeding.

➔ Explain the specific parts of the proceeding for which you do not consent to recording, and your reasons:

Part of proceeding	Reason Not to Video Record
_____	_____
_____	_____
_____	_____

I consent to the recording of this proceeding. The following witnesses have expressed a preference not to be recorded, for the reasons indicated.

➔ Name the specific witnesses for whom you do not consent to recording, and explain your reasons:

Witness Name	Reason Not to Video Record
_____	_____
_____	_____
_____	_____

I do not consent to the recording of any of this proceeding.

➔ Explain your reasons for not consenting:

\_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name (please print)

\_\_\_\_\_  
Position (e.g., Attorney for [plaintiff/defendant])

\_\_\_/\_\_\_/\_\_\_\_ (mm/dd/yyyy)  
Date

**NOTICE: DO NOT FILE FORM E2 IN CM/ECF. Save completed Form E2 to pdf.  
Email Form E2 to: Cameras in the Courtroom Administrator at  
[moedml\\_camera@moed.uscourts.gov](mailto:moedml_camera@moed.uscourts.gov).**