

County of Montgomery Board of Commissioners
Meeting Space Request Form

Date Requested: _____

Meeting Reason: _____

Meeting Date: _____

Requested By: _____

Agency Representing: _____

Room Requested:

- | | |
|--------------------------|-------------|
| <input type="checkbox"/> | Courtroom A |
| <input type="checkbox"/> | Courtroom B |
| <input type="checkbox"/> | Mailroom |

Purpose:

- | | |
|--------------------------|------------------|
| <input type="checkbox"/> | County Business |
| <input type="checkbox"/> | Deposition |
| <input type="checkbox"/> | Attorney Meeting |
| <input type="checkbox"/> | Committee |
| <input type="checkbox"/> | Other: _____ |

Charge: _____

Details:

Please attach any documentation to be shared.