



## VISITORS TESTING POSITIVE COVID-19 NOTIFICATION FORM

Name:

e-mail:

Phone Number:

What date were you exposed, if known?

What date did you receive the results of your COVID-19 test?

Courthouse:

What date(s) were you at the courthouse?

What time window were you in the courthouse?

Did you have contact with specific individuals in the courthouse?

Were you in the courthouse for a specific case?

If yes, then provide the case name and number:

Where in the courthouse did you go?

1st Floor  
2nd Floor

3rd Floor  
4th Floor

5th Floor  
Stairwell

Did you go to the U.S. Bankruptcy Court Clerk's office?

Did you go into a courtroom?

Did you take the elevator?

If yes, which elevator?

Did you use a restroom?

If yes, which floor?

Men's or Women's?

If you have questions or concerns, please call (702) 527-7001 – voicemail only (please leave contact information) or email [HR@nvb.uscourts.gov](mailto:HR@nvb.uscourts.gov).