

EARLY COUNTY
AFFIDAVIT FOR PERSONS 70 YEARS OF AGE OR OLDER
EXEMPT FROM JURY SERVICE

To: Clerk of the Board of
Jury Commissioners

I hereby request that my name be removed from the jury list pursuant to O.C.G.A. 15-12-1(b) relating to exemption from Jury service for persons 70 years of age or older. In compliance with the law I submit to you the following affidavit.

AFFIDAVIT

Comes now, before the undersigned officer duly authorized to administer oaths, the Deponent, who after being sworn states and affirms that he or she has attained the age of _____ years (DOB being _____ / _____ / _____) and wishes his/her name be removed from the jury list and jury pool.

Signature

Printed Name

Address

City, State, Zip Code

Sworn to and subscribed before me
This _____ day of _____, 20____

Notary Public

My Commission Expires _____

(Seal must be affixed)