

IN THE SUPERIOR COURT OF CLAYTON COUNTY

AFFIDAVIT FOR DEFERMENT
FROM JURY DUTY

Juror Name: _____

Juror Address: _____

I hereby affirm that I am the primary care giver having active care and custody of a child under six years of age and that I have no reasonably available alternative child care and that I request to be deferred from jury duty in accordance with OCGA 15-12-1 (a)(3). By indication of my signature below, I state that I understand that this is a one-time deferment of six months given for the purpose of finding childcare for my child(ren) and that no other deferment will be given.

This _____ day of _____, 20 ____.

Prospective Juror's Signature

This _____ day of _____, 20 ____

Deputy Clerk or Notary Public

(**IF MAILING FORM, YOUR SIGNATURE MUST BE NOTARIZED.**)

PLEASE RETURN TO:

JACQUILINE D. WILLS, CLERK SUPERIOR COURT

ATTN: JURY DIVISION

9151 TARA BOULEVARD, 1JA09

JONESBORO, GA 30236-4912

770-477-3400; fax 770-477-4519

Email: juryclerk@co.clayton.ga.us

****PLEASE NOTE: YOU MAY FAX THIS FORM IN, BUT PLEASE SEND THE ORIGINAL FORM VIA US MAIL SERVICE. THE ORIGINAL FORM MUST BE RECEIVED & RETAINED BY THIS OFFICE.

FOR OFFICE USE ONLY:

Juror ID#: _____

Original date of summons: _____

Set over date: _____

Comments: _____

