OFFICE USE ONLY: DATE OF JURY SERVICE:	NOTES:

The completed form may be delivered /mailed to the address listed below. If you need to expedite your request, you may fax the completed form for the fax number listed below; however, the ORIGINAL FORM MUST ALSO BE SUBMITTED to our office.

	CHANAE Q. CLEMONS, CLERK OF SUPERIOR COURT CLAYTON COUNTY, GEORGIA 9151 Tara Boulevard, Suite 1JA01, Jonesboro, GA 30236-4912 Office - 770-477-3400; Fax - 770-477-4519 AFFIDAVIT FOR PERMANENT DEFERMENT/ EXCUSAL								
	Pursuant to Authority of Title 15 of O.C.G.A. and Rules of the Supreme Court of Georgia. Jury Revision effective July 1, 2012								
Name				Juror ID#		Date of Birth			
Address		Ci	ity	State	Zip	Phone #			
	OVER 70 YEARS OF AGE: I hereby request that I be permanently deferred under Georgia Laws 1985 Session, Code Section 15-12-1.1(b) relating to exemption from jury service for persons 70 years of age or older. In compliance with the law, I solemnly swear or affirm that I have attained the age of and request that my name be removed from the list of prospective jurors. NON-RESIDENT OF CLAYTON COUNTY: I hereby affirm that I no longer reside in Clayton County, Georgia. My new address is: (Include complete street address, city, state and zip code.) I authorize the Tax Commissioner and Voter Registration of Clayton County to change their records accordingly which will result in the removal of any homestead exemption I may have as well as my ability to vote in Clayton County. NON-CITIZEN OF UNITED STATES: I hereby affirm that I am not a citizen of the United States of America. I affirm that I am a citizen of Attached is a copy of the front of my photo I.D. and my green card. I also authorize Voter Registration to change their records accordingly. I request to be excused from jury duty pursuant to OCGA15-12-4(b).								
	PRIMARY CAREGIVER FOR CHILD: I hereby affirm that I am the primary caregiver having active care and custody of a child six years of age or younger and that I have no available alternative childcare. I request to be excused from jury duty in accordance with OCGA 15-12-1.1(a)(3). I acknowledge and understand that this affidavit is valid only for the current state-wide master jury list, which is revised July 1 of every year.								
	CONVICTED FELON: I hereby affirm that I am a convicted felon. My conviction occurred in the State of To my knowledge, my civil rights have not been restored.								
	ACTIVE MILITARY: I he component of either the on ordered federal duty fifty (50) miles or more the commanding office understand that this aff	e U.S. Armed Force of for a period of 90 of from my home. I ha from the control of the control o	s, U.S. Co days or loo ave attache xcused fro or the curre	east Guard, the G nger & my spous ed a copy of the s m jury duty in ac ent state-wide ma	Georgia National (e is or I am perfoservice member's cordance with Oaster jury list, whi	Guard, or the Georg orming military serv s orders or a writter CGA 15-12-1.1(c)(ich is revised July	gia Air National Guard vice in a location that is n verification signed by 1). I acknowledge and		
This the	day of						, 20		
		,					,		
Signatur	е		Notary My Cor	Public, State of _	· ·				

My Commission Expires: This document must be notarized before submitting for consideration.