

Affidavit for Exemption

PERSONS 70 YEARS OF AGE AND OLDER

_____ County, Georgia

Juror Name: (Print name) _____

Juror Address: _____

Juror Telephone Number: _____

I hereby affirm that I am 70 Years of Age or older, my date of birth is _____ and my age at my last birthday was _____. I currently reside in _____ County. I hereby request the Board of Jury Commissioners of this County to remove my name from the list of eligible grand and trial jurors.

This the _____ day of _____, 20_____.

Signature: _____

the _____ day of _____, 20_____.

Notary Public

My Commission Expires: _____