

EAST LIVERPOOL MUNICIPAL COURT

JUROR # _____

JURY QUESTIONNAIRE

PLEASE ANSWER ALL OF THE FOLLOWING QUESTIONS FULLY. THIS DOCUMENT MUST BE RETURNED TO THE EAST LIVERPOOL MUNICIPAL COURT WITHIN FIVE(5) DAYS UPON RECEIPT.

1. Name and Age _____
(First) (Middle) (Last) (Age)

2. Home address _____
Phone number _____
Years of residence _____
Place of birth _____

3. Parent's names _____

4. Last grade of education completed _____

5. Occupation and employer _____

(If retired, write "retired" and give last occupation and employer)

6. Spouse's name, occupation and employer, or last occupation and employer, if retired

7. Marital Status: Married Single Divorced Widowed Separated

8. List names, ages occupation of your children

NAME AGE RESIDE WITH YOU OCCUPATION EMPLOYER
(YES OR NO)

<u>NAME</u>	<u>AGE</u>	<u>RESIDE WITH YOU</u> (YES OR NO)	<u>OCCUPATION</u>	<u>EMPLOYER</u>

9. Have you ever been convicted of a state or federal crime punishable by imprisonment for more than one year? Yes _____ No _____ If yes, describe crime, date, and sentence

10. Have you ever served as a juror prior to this term? Yes _____ No _____
If yes, state when and where.

11. Have you or any member of your family been sued, or have a pending lawsuit of any sort, including divorce or dissolution? Yes _____ No _____
If yes, what type of lawsuit? When filed? What Court? What Outcome?

12. Have you or any member of your family ever suffered any bodily injury? Yes___ No____
If yes, give details:

13. Have you or any member of your family ever been a victim of crime? Yes _____ No ____
If yes, give details

14. Has a claim for personal injury ever been made against you or your family, whether or not a lawsuit was filed? Yes _____ No _____
If yes, please list the relationship and with

15. Are you or any member of your family related to or close friends of any law enforcement officer? Yes _____ No _____
If yes, list what officers and the relationship

16. List names of your doctors and surgeons

17. Name of your attorney or law

18. Are you or any member of your immediate family associated with or employed by any insurance company that writes casualty or liability insurance covering personal injuries? Do you or any members of your immediate family own stock in such companies? Do you or any members of your immediate family have any connections to any type of insurance companies? Yes _____ No _____ If yes, give details

***I AM DISQUALIFIED FROM JURY SERVICE BECAUSE** (Please check one if applicable)

_____ No longer reside in the City of East Liverpool, St. Clair Township,
or Liverpool Township

_____ Served Jury Duty with the past 12 months
Dates of service _____

_____ 75 years of age and over

THE ABOVE QUESTIONS MUST BE ANSWERED FULLY AND TRUTHFULLY. THE INFORMATION SOUGHT IS INFORMATION COMMONLY SOUGHT DURING TRIAL BY THE JUDGE AND ATTORNEYS ON VOIR DIRE EXAMINATION. IF YOU DO NOT RESPOND TO THE QUESTIONNAIRE, THE SAME QUESTIONS WILL BE ASKED OF YOU AT TRIAL.

I do solemnly swear or affirm that the answers to the foregoing questions are true and correct to the best of my knowledge and belief.

Date: _____

Signature