## PETIT JURY SUMMONS

You are hereby summoned to be available for the RICHLAND COUNTY COMMON PLEAS COURT, 3 <sup>rd</sup> floor of the County Administrati on Building, 50 Park Avenue East, Mansfield, Ohio 4490 2. Your jury service is for a period of three weeks. You will not be needed every day.

You must call a pre-recorded answering unit after 5:00 p.m. on the DAY BEFORE YOUR DATE OF SERVICE INCLUDING YOUR FIRST DAY OF SERVICE. The phone number for Courtroom #1, Judge Naumoff is 419-774-5590. The phone number for Courtroom #2, Judge Brent N. Robinson is 419-774-3527. Keep this portion and return the questionnaire.

## **JUROR QUESTIONNAIRE**

You are important to our jury system. Without you the jury system cannot work the way the authors of the Constitution wanted. It is one of the most important duties of citizenship.

It is also a rewarding experience which will give you an opportunity to participate directly in the administration of justice. While it may require some adjustment of your normal schedule to serve as a juror, we believe that you will enjoy the opportunity to see your courts in action, to learn more about our system of justice, and participate in one of the fundamental principles of our American heritage.

PLEASE ANSWER <u>ALL</u> QUESTIONS <u>COMPLETELY</u> AND SIGN AND RETURN THIS QUESTIONNAIRE <u>WITHIN 5 DAYS</u> to the Richland County Common Pleas Court, Jury Commission, 50 Park Avenue East, 3<sup>rd</sup> Fl, Mansfield, Ohio 44902, EVEN IF YOU CLAIM A JUR OR EXCUSE. FAILURE TO RETURN THE QUESTIONNAIRE OR ANSWER IT COMPELTELY AND HONESTLY COULD RESULT IN CONT EMPT OF COURT CHARGES. Direct questions to the bailiff at 419-774-5571 or by emailing juryquestions@richlandcourtsoh.us

Name:	_	Badge/Juror No	Date of Birth:
Address:			
Home Phone:	Work No.:	Work No.: Emergency:	
Years of education completed:		Marital Status:	
Your occupation:			
Spouse's occupation:		Spouse's Employer:	
Have you ever served as a juror?		If yes, when and what kind of case(s)?	
agency that deals in automobil	claims? our immediate family an e insurance, homeowner	employee or stockholder in a	any insurance company or insurance ident insurance?
If yes, name the company and	the connection to you or		
Have you or any family memb	er ever been a defendant		
I certify that the information g	iven on this form is corre	ect and complete to the best of	my knowledge.
Signature:	ure: Date:		
NOTE: The Ohio Supreme Co	ourt has decided that you	ur responses (other than your j	phone number) on this form may be you may request a hearing before the

judge, with the attorneys for the case present, to determine whether the response may be kept private.