

To: Clerk of Superior Court

I hereby request that I be excused or deferred from jury duty on the date hereinafter stated. This request is being made in accordance with the provision of O.C.G.A. 15-12-1 as same pertains to unpaid primary caregivers for a person age six or older with physical or cognitive limitations. In compliance with the law I submit to you the following affidavit.

AFFIDAVIT

Comes now, before the undersigned officer duly authorized to administer oaths, the Deponent, who after being duly sworn states that he or she is the unpaid primary caregiver of a person over the age of six years with physical and/or cognitive limitations; that Deponent is the primary caregiver of said person and has no reasonably available alternative care. Wherefore Deponent asks that his or her name be removed from the jury list.

Signature of Deponent

Printed Name of Deponent

Street Address

City

Date Summoned to Appear

Phone Number

Sworn to and subscribed before me this _____ day of _____, 2013.

Notary Public (Seal must be affixed)
Commission Expires: _____

**Mail executed affidavit to: Clerk of Superior Court
875 Lafayette Street
Ringgold, GA 30736**