You MUST Answer ALL questions & Sign the Questionnaire

1.	Age Place of birth:			Years	of residence in E	esidence in Erie Co:	
2.	Marital Status:	[] Single	[] Married	[] Separated	[] Divorced	[] Widowed	
3.	Education (check hi	ghest level completed):	[] Grade School	[] High School	[] College	[] Post Grad.	
4.	Your occupation and employer						
5.	Your Spouse's occupation and employer						
	(If you or your spouse is retired, write "RETIRED" and give last occupation & employer on the line above) (If you are a widow / widower, give late spouse's last occupation & employer on the line above)						
6.	List members of your immediate family (Spouse and Children only):						
	Relationship Age		Occupation		Emplo	Employer	
7.		ember of your family list				s []No	
8.	-	ember of your family list				s []No	
9.	Have you previously	y served as a juror?			[] Ye	s []No	
10.	Have you or any me	ember of your family list	ted above been sued	or sued another per	son? [] Ye	s []No	
11.	1. Are you related to or a close friend of any law enforcement officer? [] Yes [] No					[] No	
12.	2. Name of your Attorney Name of your Physician						
13.	Name your Automo	bile / Homeowner Insur	rance Co	· · · · · · · · · · · · · · · · · · ·			
14.	Name your Health I	nsurance Co					
15.	Please list two (2) p	hone numbers where the	e Court may contact	you:			
	()		and	()	-		
**	*******	*******	*****	******	******	******	
[]	I am over the Age of	f 75 years and <u>do not</u> w	ish to serve.				
[]	I am <u>not</u> a <i>Resident</i>	of Erie Co. and cannot	serve:	(current residence)			
[]	I have a planned Vacation and cannot serve on these days:				(Sec	(See attached documents)	
[]	I have a Medical con	ndition(s) and cannot se	erve, (See attached do	cuments)			
				SIGNATURE			