

ANY JUROR REQUESTING TO BE EXCUSED FOR ANY PORTION OF THE TERM TO WHICH HE IS SUMMONED, MUST COMPLETE THE FOLLOWING AS APPROPRIATE:

I request to be excused from jury service for the period indicated and for the reasons stated:

1. For all or part of the term for medical reasons:

Nature of Problem Attending Physician

Attach attending Physician's Report

Attach attending Physician's Report

2. During my vacation period, which covers the dates of: _____

Attach Itinerary (to be considered, vacation must be scheduled prior to receiving jury notice)

3. For out of town (or other) business engagements as follows:

Date Nature of Meeting

4. For a special family event:

Date Reason

5. For financial hardship:

(a) For the following period _____

(b) Basis for hardship. State _____
reasons, including dependents
and annual gross income. _____

6. Other:

Date Reason

I hereby certify that the above information is correct.

Name of Juror

Daytime Telephone

PLEASE COMPLETE THIS FORM AND MAIL TO :
GLORIA OWENS, GLOUCESTER CIRCUIT COURT, 7400 JUSTICE DR., RM. 327,
GLOUCESTER, VA 23061