

**COUNTY OF TRINITY
OFFICE OF THE JURY COMMISSIONER
P.O. BOX 1117, WEAVERVILLE, CA 96093
TELEPHONE: (530) 623-1369**

GRAND JURY QUESTIONNAIRE

=====

NAME: _____ AGE: _____

MAILING ADDRESS: _____

EMAIL: _____ PHONE: _____

1. Are you a citizen of the United States? Yes No

2. What is your occupation and the name of your employer? If retired, please indicate so and state your previous occupation.

3. How long have you resided in Trinity County? _____

IF YOU ANSWER "YES" TO ANY OF QUESTIONS 4-11 BELOW, PLEASE EXPLAIN BELOW

4. Do you have prior Grand Jury experience? Yes No

5. Do you have prior Trial Jury experience? Yes No

6. Have you ever been convicted of a felony? Yes No

7. So far as you know, would your employer object to your serving on the Grand Jury? Yes No

8. Have you ever received unfair treatment from county government? Yes No

9. Do you presently have ideas about ways to improve county government? Yes No

10. Do you wish to be excused from Grand Jury service? Yes No

11. Is there any reason you cannot devote the time required by Grand Jury service? Yes No

Explanation of "Yes" answers to Questions 4-11: _____

I certify under penalty of perjury that the answers I have given to the foregoing questions are true and correct.

DATE: _____ SIGNATURE _____

RETURN TO: **JURY COMMISSIONER**
PO BOX 1258
WEAVERVILLE, CA 96093
Or email to:
sholliday@trinitycounty.org