

Military Affidavit Carroll County, Georgia

Date of Jury Service:

Juror Name (Print Name)			
Juror Number:	Juror Telephon	e No:	
Juror Address:			
I, Superior/State Cour the list of eligible Tri my active Military Se	t of Carroll County al and Grand Jurors	- •	my name from
I hereby affirm that:			
	:// ırrently reside in Ca	My age is rroll County, GA.	and I
Signatur	re of Juror:		
Signature of CO:			

Upon completion, return this Affidavit to:
 Jury Liaison Officer
Superior/State Court of Carroll County
 311 Newnan Street
 Carrollton, GA 30117
Or Fax to: 770-214-3584