

UNITED STATES DISTRICT COURT
District of Connecticut
New Haven Division
141 Church Street
New Haven, CT 06510

SUMMONS
FOR JURY
SERVICE

PLEASE READ
FURTHER
INSTRUCTIONS IN
THE INFORMATION
INCLUDED WITH THIS
SUMMONS.



TO: 
JOHN Q. PUBLIC
1111 MAIN STREET
NEW HAVEN, CT 06510


Participant#
100156789

PLEASE BRING THIS UPPER
SECTION WITH YOU WHEN
YOU REPORT FOR JURY
DUTY
DETACH AT PERFORATION FOR JUROR BADGE

THE COURT SUMMONS YOU TO APPEAR FOR JURY DUTY BEGINNING ON THE
DATE, TIME AND PLACE SHOWN BELOW.

Report to: Jury Assembly Room

LOCATION: **New Haven Division**
141 Church Street
New Haven, CT 06510

JUROR

UNITED STATES DISTRICT COURT

DATE:
TIME:
JUROR NUMBER:

PHONE NO. TO CALL:




100156789

**Privacy Act Statement: Your social security number is requested on a voluntary basis under authority of sections 6041 and 6109 of the Internal Revenue Code. If you earn more than \$600 in compensation as a juror, the court must inform the Internal Revenue Service using your social security number, and it is helpful to get your number now. Failure to provide your social security number at this time will not disqualify you from serving as a juror, but it may delay jury service payments to which you become entitled.

JURY INFORMATION FORM
DETACH LOWER HALF, RETURN BY MAIL WITHIN 5 DAYS

* IF YOU HAVE NO HOME PHONE
GIVE PHONE NO. OF SOMEONE
WHO CAN REACH YOU.

1. LAST NAME		FIRST	MIDDLE INITIAL	2. P H O N E		HOME (OR OTHER*)	
STREET		P.O. BOX		WORK (Include EXTENSION)			
CITY		STATE	ZIP	3. HOW LONG HAVE YOU LIVED IN		THIS COUNTY	YRS. MOS.
				THIS STATE			
4. COUNTY	5. PLACE OF BIRTH	6. <input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> SEPARATED OR DIVORCED		7. NO. OF CHILDREN	8. SOCIAL SECURITY NUMBER**		
9. AGE	10. ARE YOU EMPLOYED? <input type="checkbox"/> YES <input type="checkbox"/> NO	11. YOUR OCCUPATION OR BUSINESS					
12. YOUR FIRM OR EMPLOYER'S NAME		13. BUSINESS ADDRESS OR EMPLOYER'S ADDRESS STREET CITY STATE					
14. IF RETIRED, YOUR OCCUPATION BEFORE RETIREMENT				15. SPOUSE'S OCCUPATION (IF SPOUSE RETIRED, OCCUPATION BEFORE RETIREMENT)			
16. ARE ANY CHARGES NOW PENDING AGAINST YOU FOR A STATE OR FEDERAL CRIME PUNISHABLE BY IMPRISONMENT FOR MORE THAN ONE YEAR? <input type="checkbox"/> YES <input type="checkbox"/> NO		17. HAVE YOU BEEN CONVICTED OF A STATE OR FEDERAL CRIME PUNISHABLE BY IMPRISONMENT FOR MORE THAN ONE YEAR? <input type="checkbox"/> YES <input type="checkbox"/> NO		18. IF "YES" WERE YOUR CIVIL RIGHTS RESTORED? <input type="checkbox"/> YES <input type="checkbox"/> NO			
19. DO YOU HAVE ANY PHYSICAL OR MENTAL INFIRMITY WHICH WOULD IMPAIR YOUR CAPACITY TO SERVE AS A JUROR? <input type="checkbox"/> YES <input type="checkbox"/> NO IF ANSWER IS "YES" AND YOU SEEK AN INFIRMITY EXCUSE PLEASE INSERT A LETTER OR A DOCTOR'S STATEMENT		20. ARE YOU A SALARIED EMPLOYEE OF U.S. GOVERNMENT? <input type="checkbox"/> YES <input type="checkbox"/> NO IF "YES", INSERT PROOF THAT YOUR CIVIL RIGHTS WERE RESTORED					
21. ESTIMATED NO. OF MILES ONE WAY FROM YOUR HOME TO COURTHOUSE TO WHICH YOU ARE SUMMONED							
SIGN HERE 		I declare under penalty of perjury that all answers are true to the best of my knowledge and belief.					