

**OFFICE OF THE CIRCUIT CLERK
LINCOLN COUNTY**

**301 S. FIRST STREET ROOM 205
BROOKHAVEN, MS 39601**

OFFICE: 601-835-3435 FAX: 601-835-3482

DUSTIN R. BAIRFIELD, CLERK

Email: dbairfield@co.lincoln.ms.us

JUROR EXCUSE AFFIDAVIT

DATE: _____

NAME: _____ **AGE:** _____ **DOB** _____

ADDRESS: as it appears on jury summons

Home number: _____ Daytime number: _____

Date to appear for Jury Duty: _____ LINCOLN COUNTY

Please state the reason of explanation for need to be excused from Jury Duty. Please be specific in your reason. (For example: Doctor's appointment on Tuesday at 9am, with Dr. John Smith, at M.D. Anderson Medical Center)

I hereby certify that the above listed excuse for jury duty is true and correct. I understand that I have been placed under Oath by the court and my answer is under oath.

Juror Signature

Sworn to and subscribed to before me this the ___ day of _____, 201__.

My commission expires: _____ Notary Public: _____

*****OFFICIAL COURT USE ONLY*****

EXCUSED _____

NOT EXCUSED _____

APPROVED FORM 23RD day of December, 2014

DUSTIN R. BAIRFIELD, CIRCUIT CLERK