

# JUROR QUESTIONNAIRE/LIST REQUEST FORM

Judge: \_\_\_\_\_ Jury Selection Date: \_\_\_\_\_

Case Name: \_\_\_\_\_

Name of Requester: \_\_\_\_\_

Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Relationship to Case:

Attorney For:                       Plaintiff                       Defendant

Party:                                       Plaintiff                       Defendant

Other - Explain \_\_\_\_\_

Purpose of Request:

To inspect Juror Questionnaires with struck Jury List

To purchase a copy of all Jury Questionnaires, including any received after first pick-up,  
with struck Jury List

To obtain copy of Jury List

I understand the confidential information contained in these juror questionnaires and jury list is to be used solely for the purpose of evaluating potential jurors for jury service for this case and is not to be used or disseminated for any other purpose. The questionnaires and list will remain in my custody as the ordering party. All copies of the questionnaires and jury list, on paper or disk, will be destroyed at the conclusion of the case. The questionnaires or jury list will not reside on any computer.

\_\_\_\_\_  
Signature of Requester

\_\_\_\_\_  
Date

**This request can be approved via facsimile at (803) 765-5283.**

Clerk's Office approval by: \_\_\_\_\_

\_\_\_\_\_  
Deputy Clerk

\_\_\_\_\_  
Date

Panel # \_\_\_\_\_