

CONFIDENTIAL JUROR QUESTIONNAIRE
(PLEASE PRINT AND USE **BLUE** INK)

General Instructions:

This questionnaire is designed to obtain information about your background as it is related to your service as a juror in this case. Its use will substantially shorten the jury selection process. The purpose of these questions is to determine whether prospective jurors can impartially decide this case based upon the evidence presented at trial and the instructions on the law given by the presiding judge. The questions are not intended to unnecessarily inquire into personal matters. All information contained in this questionnaire will be kept confidential and under seal. You are sworn to give true and complete answers and those answers will be available only to the Court and the parties in this case. The questionnaires belong to the Court and all copies will be returned to the Court. You are instructed not to discuss this case or the questionnaire with anyone, including your family and fellow jurors and members of the media.

Although some of the questions may appear to be of a personal nature, please understand that the Court and the parties must learn enough information about each juror's background and experiences to select a fair and impartial jury. Your cooperation is of vital importance. Please answer each question as fully and completely as possible. Your complete candor and honesty is necessary so that both the prosecution and the defense will have a meaningful opportunity to select an impartial jury.

You must answer all the questions, to the best of your ability. If you do not know the answer to a question then write, "I don't know." If the question does not apply to you, write "N/A". Please fill out the entire questionnaire. **DO NOT LEAVE ANY QUESTION BLANK.**

It is important that the answers be yours alone. If you need more space for your responses or wish to make further comments regarding any of your answers, please use the Explanation Sheet at the end of the questionnaire. Put the number of the question you are answering on the Explanation Sheet before you write the response or comment.

Please keep in mind that there are no "right" or "wrong" answers, only complete and incomplete answers. Complete answers are far more helpful than incomplete answers. Remember, you are sworn to give true and complete answers to all questions.

Unless the question states otherwise, the fact that a particular question is asked does not imply that the subject matter of the question is an issue in this case. As you read the questions, you are not to draw any inferences about the issues which must be decided in this case. Do not write on the back of any page. **PLEASE PRINT OR WRITE LEGIBLY**, and be sure to put your juror number on each page. When you have finished answering the Questionnaire, you must sign with your name. On that signature page you are affirming the accuracy of your answers. That page will be removed by Court staff and will not be shown to any party.

Personal Background

A. BASIC DEMOGRAPHIC INFORMATION

1. Name: _____

Age: _____

What is your ethnic background?

- _____ American Indian or Alaska Native
- _____ Asian Indian
- _____ Black/African American, not Hispanic
- _____ Chinese
- _____ Filipino
- _____ Guamanian or Chamorro
- _____ Hispanic/Latino/Spanish
- _____ Japanese
- _____ Korean
- _____ Native Hawaiian
- _____ Other Asian
- _____ Other Pacific Islander
- _____ Samoan
- _____ Vietnamese
- _____ White/Caucasian, not Hispanic
- _____ Other (please specify): _____

Date of Birth: ____ / ____ / ____
Mo. Day Year

Place of Birth: _____

2. Street Address: _____

City: _____ County: _____ Zip: _____

Phone Number: _____ Miles to Court? _____

How long have you lived at your current address? _____

Do you (circle one): Own or Rent ?

3. In what other cities, towns, or communities have you lived, when, and for how long?

4. What is your marital status? (Check all that apply)

- Never Married Divorced
- Married Remarried
- Living with someone Widowed
- Separated

5. If married or living with someone, is he/she: (Check all that apply)

- Currently employed Unemployed Homemaker
- Retired Student Disabled

6. If your spouse/person you live with is currently employed, please answer the following:

- (a) Where does he/she work? _____
 - (b) What is his/her job title? _____
 - (c) What are his/her job responsibilities? _____
- _____

7. If your spouse/person you live with is NOT currently employed, please answer the following:

- (a) Where did he/she work? _____
 - (b) What was his/her job title? _____
 - (c) What were his/her job responsibilities? _____
- _____

8. Please give the following information about each of your children, step-children or foster children (and indicate if a step-child or foster child). If more than 6, request a supplemental sheet from the Jury Coordinator:

Child no. 1: Sex:___ Age:___ Occupation:_____

Present City and State of residence:_____

Child no. 2: Sex:___ Age:___ Occupation:_____

Present City and State of residence:_____

Child no. 3: Sex:___ Age:___ Occupation:_____

Present City and State of residence:_____

Child no. 4: Sex:___ Age:___ Occupation:_____

Present City and State of residence:_____

Child no. 5: Sex:___ Age:___ Occupation:_____

Present City and State of residence:_____

Child no. 6: Sex:___ Age:___ Occupation:_____

Present City and State of residence:_____

9. How many people presently live in your household (including yourself)? _____

10. Please give the following information about each of your parents, brothers, sisters, step-parents, step-brothers, and step-sisters (and indicate if a step-parent or step-sibling). If more than 5, request a supplemental sheet from the Jury Coordinator:

Father: Age:___ Occupation:_____

Present City and State of residence:_____

Mother: Age:___ Occupation:_____

Present place of residence:_____

Sibling no.1: Sex:___ Age:___ Occupation:_____

Present City and State of residence:_____

Sibling no.2: Sex:___ Age:___ Occupation:_____

Present City and State of residence:_____

Sibling no.3: Sex:___ Age:___ Occupation:_____

Present City and State of residence:_____

Sibling no.4: Sex:___ Age:___ Occupation:_____

Present City and State of residence:_____

Sibling no.5: Sex:___ Age:___ Occupation:_____

Present City and State of residence:_____

B. EMPLOYMENT HISTORY

11. Are you currently:

Employed Unemployed Homemaker

Retired Student Disabled

12. If currently employed:
 Employer: _____
 Employer's address: _____
 How long have you been employed by this employer? _____
 Are you a salaried or hourly employee? _____

13. Please describe the kind of work you do: _____

14. Please list any significant jobs you have held in the past 10 years, including volunteer and paid positions (and provide employer's name and approximate dates):

<u>Employer</u>	<u>Job Title/Description</u>	<u>Dates</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

15. Have any of your jobs (including your present position) involved supervising other people?
 _____ Yes _____ No
 If YES, what is the largest number of people you have supervised? _____
 If YES, do you currently supervise or manage others? _____ Yes _____ No

C. EDUCATIONAL EXPERIENCE

16. What was the last grade you attended in school? _____

17. What high school or high schools did you attend? _____

18. If you attended college, vocational or technical school what was your major subject/area of study? _____
 Name of school? _____

19. What degree(s), if any, do you hold? _____

- 20.** Have you, any member of your family, or a close friend had any special training or work experience in any of the following fields? (Circle: self, family, close friend):
- a. Medicine (including Nursing; EMT; etc.) __ YES __ NO (Self/Family/Close Friend)
 - b. Psychology/Counseling/Mental Health/Social Work/Crisis Hotline __ YES __ NO (Self/Family/Close Friend)
 - c. Education/Special Education __ YES __ NO (Self/Family/Close Friend)
 - d. Criminal Justice/Government/Political Science/Sociology __ YES __ NO (Self/Family/Close Friend)
 - e. Law (attorney; paralegal; legal secretary; etc.) __ YES __ NO (Self/Family/Close Friend)
 - f. Forensic Sciences/Pathology __ YES __ NO (Self/Family/Close Friend)
 - g. Biology/Chemistry/Population Genetics __ YES __ NO (Self/Family/Close Friend)
 - h. Religion/Philosophy/Ethics __ YES __ NO (Self/Family/Close Friend)
 - i. Photography/Videography __ YES __ NO (Self/Family/Close Friend)
 - j. Business/Management/Retail Sales __ YES __ NO (Self/Family/Close Friend)
 - k. Security/Investigative Services __ YES __ NO (Self/Family/Close Friend)
 - l. Learning Disorder/Disabilities __ YES __ NO (Self/Family/Close Friend)
 - m. Psychological Disorders __ YES __ NO (Self/Family/Close Friend)
 - n. Child Abuse (emotional; physical; sexual) __ YES __ NO (Self/Family/Close Friend)
 - o. Substance Abuse __ YES __ NO (Self/Family/Close Friend)
 - p. Law Enforcement/Police Work/Criminal Investigation/Corrections (prison guard/correctional officer; jailer; etc.) __ YES __ NO (Self/Family/Close Friend)

If YES to any of the above categories, please explain briefly:

D. MILITARY EXPERIENCE

21. If you were in the military (including National Guard or Reserves):
- (a) When? (state the years): _____
 - (b) What branch? _____
 - (c) Highest rank attained: _____
 - (d) What was your occupational speciality? _____
 - (e) Have you ever participated in a court martial? _____ Yes _____ No
 - (f) Were you ever involved with military law enforcement or investigations?
_____ Yes _____ No
 - (g) What type of discharge did you receive? _____

E. RELIGIOUS ACTIVITIES

22. Are you a member of or participant in any church, synagogue, temple, mosque, religious community, or other religious organization?
_____ Yes _____ No
If YES, what is the organization's name and location? _____

How often do you attend events at this organization? _____

23. What activities, if any, are you presently involved with at your church, synagogue, temple, mosque, religious community, or other religious organization?

24. Have you ever studied religion or held any positions of responsibility in your church, synagogue, temple, mosque, religious community, or other religious organization?
_____ Yes _____ No If YES, please explain: _____

F. SOCIAL RELATIONSHIPS

25. What civic clubs, organizations, societies, unions, professional associations, fraternal organizations, volunteer groups, or other groups have you or your family members joined?

Are you/they presently a member? Yes No

26. What offices do you hold, or have you held in these organizations? Please specify the office and the organization.

G. CIVIC ACTIVITIES

27. Are you registered to vote? Yes No
If YES, do you vote regularly? Yes No

28. Have you, or any member of your immediate family or household ever sought or held any elected or appointed political office? Yes No
If YES, who and what office? _____

29. Other than for a political candidate, have you ever had a bumper sticker on your car?
 Yes No If YES, what did it say? _____

30. What are your hobbies and favorite recreational activities? _____

H. EXPERIENCE WITH LAW ENFORCEMENT AND THE COURTS

31. Have you ever attended court as an observer? Yes No
If YES, please explain: _____

32. Have you ever served on a grand jury? _____ Yes _____ No
If YES, when did you serve? _____
How many times? _____ Which court? _____ State _____ Federal

33. Have you ever served on a regular trial jury? _____ Yes _____ No
If YES, when did you serve? _____
How many times? _____ Which court? _____ State _____ Federal
What type(s) of case(s)?: _____
Was a verdict reached in each case? _____ Yes _____ No
Were you the foreperson? _____ Yes _____ No
If YES, how many times were you the foreperson? _____

34. Have you, or any family members ever studied law? _____ Yes _____ No
If YES, give details: _____

35. Do you know any lawyers, or any federal, state, or county prosecutors or defenders or judges?
_____ Yes _____ No
If YES, who? _____
How do you know them? _____

36. Have you, any family member, or close friend ever applied for a job, been employed by, or connected with, or volunteered with any law enforcement agency? (This includes any Prison, Jail, Detention Center, District Attorney General, ATF, FBI, CIA, DEA, TBI, State Highway Patrol, INS, IRS, Police, Probation Office, Sheriff's Office, U.S. Attorney, U.S. Customs, U.S. Marshal) _____ Yes _____ No

If YES, who and which agency? _____

37. Do you have a case pending in any jurisdiction (state or federal) in which you are a party or witness? _____ Yes _____ No
If YES, please explain: _____

38. Have you, any family member, or close friend ever applied for a job, been employed by, connected with, or volunteered with any Public Defender's Office, or any office or person that does criminal defense work? _____ Yes _____ No
If YES, who and which agency or office? _____

39. Have you or any family member or close friend ever worked as a security guard, or with a detective service? _____ Yes _____ No
If YES, what position(s)? _____
What agency or institution? _____

40. Have you or any family member or close friend ever received any training in law enforcement? _____ Yes _____ No
If YES, please explain:

41. Have you, family members, or friends ever had a particularly good or bad experience with a lawyer (civil lawyer, prosecutor, or criminal defense lawyer)? _____ Yes _____ No
If YES, without mentioning the name of the lawyer, please explain:

42. Have you, a family member, or a close friend ever had a particularly good or bad experience with any member of law enforcement? _____ Yes _____ No
If YES, please explain:

43. Would you tend to give more or less weight to the testimony of a witness who is a law enforcement officer as compared to any other witness due solely as a result of the training or oath taken by the law enforcement officer?
_____ More Weight _____ Less Weight _____ Equal Weight

I. CRIME

44. Have you, any member of your immediate family household, or close personal friend(s) ever been a victim, a witness, or charged with any crime? _____ Yes _____ No

45. If you answered YES to the above, please explain who was involved and whether they were a victim, a witness, or were charged with the crime: _____

46. If you answered YES to Question #44, did the crime(s) involve any of the following:

- a. Carjacking/attempted carjacking _____ Yes _____ No
- b. Robbery/attempted robbery _____ Yes _____ No
- c. Kidnapping/attempted kidnapping _____ Yes _____ No
- d. Use of a firearm during a violent crime _____ Yes _____ No
- e. Murder/attempted murder _____ Yes _____ No
- f. Any other form of physical assault _____ Yes _____ No
- g. Any other crime of violence _____ Yes _____ No

47. If you answered YES to any subpart of question #46, please answer the following:

- a. Was the matter investigated by law enforcement? _____ Yes _____ No
- b. Was the matter handled by the judicial system? _____ Yes _____ No
- c. Was the accused convicted of the crime(s)? _____ Yes _____ No
- d. Do you feel that the case was handled properly? _____ Yes _____ No

If you answered no to subpart (d), please explain why you think the case was not handled properly: _____

48. Have you, any family member, or close personal friend ever experienced any life threatening or potentially violent confrontation with another person? _____ Yes _____ No

If YES, please describe: _____

49. Are you often fearful that you will become a victim of a serious crime? (Check one):

_____ Yes _____ No

If YES, please explain why: _____

50. How much attention have you paid to specific criminal cases that have occurred in this area? (Check one):
 _____ A Lot _____ Some _____ A Little _____ None
 Please explain what case(s) and what was your interest (including interests stimulated by the newspapers, TV, or other media): _____

51. Have you ever written a letter to the editor on the issue of crime, law enforcement, or any other aspect of the criminal justice system? _____ Yes _____ No
 If YES, what was the publication and the topic? _____

52. Have you ever known anyone who has ever been threatened, injured, or killed with a firearm? _____ Yes _____ No If YES, please explain: _____

53. Do you, a family member, or close friend own or possess a firearm(s)?
 _____ Yes _____ No

If YES, please identify the person(s) owning or possessing the firearm: _____
 How many and what type of firearms: _____

Why do you/they own or possess firearms? _____
 Have you/they received any types of firearms training? _____ Yes _____ No
 If YES, when, where, and for what reason? _____

54. Do you have any specific fear of guns that might affect your judgment in a case involving firearms? _____ Yes _____ No
 If YES, please explain: _____

55. Do you know anyone who was present at a place of business as either an employee or customer during the commission of a crime or attempted crime? _____ Yes _____ No
 If YES, please describe: _____

J. QUESTIONS CONCERNING POTENTIAL PUNISHMENT

In this case, Chastain Montgomery, Sr. faces a potential sentence of life imprisonment without the possibility of release or the death penalty, if convicted of capital murder. Procedurally, this trial may proceed in two stages: 1) a trial phase, during which the jury will consider the defendant’s guilt or non-guilt; and 2) a penalty phase, at which the jury will decide whether the appropriate sentence is life imprisonment without parole or death. During the trial phase, the only question for the jury is whether the government has proven the defendant guilty beyond a reasonable doubt. The defendant is presumed innocent at the trial phase and the question of possible punishments must not enter into the jury’s deliberations during this phase of the trial. If the jury finds the defendant guilty on a count for which death is a possible penalty, the case will then proceed to the penalty phase. Should this case proceed to a penalty phase, the court will instruct the jury in detail on the burdens of proof and procedures to be followed.

56. Please circle one number on the scale below that is closest to your opinion about the death penalty in general. (The lower the number, the more strongly you oppose the death penalty.)

Strongly					Neutral							Strongly
oppose	1	2	3	4	5	6	7	8	9	10		in favor

57. Do you have any strong religious, political, or moral beliefs about the use of the death penalty as a punishment for persons convicted of murder?
____ Yes ____ No Please describe your beliefs: _____

58. Do you believe a sentence of life imprisonment without parole can be a severe enough punishment for someone who is convicted of murder? ____ Yes ____ No
Please describe your beliefs: _____

59. Do you believe life imprisonment without parole is a more severe punishment than the death penalty? ____ Yes ____ No
Please explain your answer: _____

60. In this case, the prosecution is asking for the death penalty. With reference to the death penalty, which of the following statements would best represent your opinions? (Circle the letter that applies)

- a. I could never, under any circumstances, return a verdict of death.
- b. I believe that the death penalty is the appropriate form of punishment in some murder cases, but I could never return a verdict of death.
- c. Although I do not believe that the death penalty ever ought to be imposed, as long as the law provides for it, I could vote to impose it if it was warranted in a particular case, depending on the evidence, the law, and what I learned about the Defendant.
- d. I believe that the death penalty is the appropriate form of punishment in some murder cases and I could return a verdict of death if I believed it was warranted in a particular case, depending on the evidence, the law, and what I learned about the Defendant.
- e. I believe that the death penalty is the appropriate form of punishment in all murder cases.

61. How have your views about the death penalty changed in the past few years? (Check one):
 More in Favor Less in Favor No Change

62. Have you read anything, studied, or attended any lectures or meetings about the issue of capital punishment or the death penalty? Yes No
If YES, please explain: _____

63. Have you, any member of your family, or close friend ever: (Check all that apply)
 Belonged to any group or organization that favors or opposes the death penalty?
 Attended a rally, handed out leaflets, or signed petitions about the death penalty?
 Lobbied legislators or campaigned on the issue of the death penalty?
 Become involved in an effort to speed up the rate of executions in Tennessee?
 Traveled to the site of a scheduled execution?
If you checked any of the above, please provide details: _____

64. If the Defendant is found guilty of murder, the defense may during the sentencing phase present mitigating evidence about the Defendant's childhood and background. Could you consider such evidence, if instructed to do so, when making a decision about punishment? Yes No Please explain: _____

K. MEDIA

65. What is your main source of news and information? (Check all that apply):
 Television Newspaper Radio
 News Magazines Internet Conversations with Others

66. How many hours do you spend each week watching television? _____

67. What types of television programs do you enjoy watching? _____

68. Which newspaper(s), magazine(s), or trade publication(s) do you enjoy reading? _____

69. How often do you read your local newspaper (check one)? Daily
 Frequently
 Every now and then
 Seldom
 Never

70. Have you, family member(s), or close friend(s) ever been employed in any capacity with the media or news broadcast industry? Yes No
If YES, please describe: _____

71. Have you ever written a letter to the editor of any newspaper or other publication?
 Yes No
If YES, please state the publication and subject matter: _____

72. Do you write a blog? Yes No

73. Do you read blogs written by other people? Yes No

74. Do you use any social networking service? Yes No
If so, which one or ones? _____

L. PERSONAL

75. Would you characterize yourself as: a Leader
 a Follower
 Neither
 Sometimes a Leader, Sometimes a Follower

76. If you had to name one person who has most influenced your life, who would you select and how did they influence your life? _____

77. Are you, or any member of your family, suffering from or affected by any medical condition that would affect your ability to sit on a jury? _____ Yes _____ No
If YES, please explain: _____

78. Are you currently taking or prescribed any medication? _____ Yes _____ No
If YES, please list: _____

Does the medication you are taking have any effects such as drowsiness, inability to concentrate, etc.? _____ Yes _____ No Please describe: _____

79. Are you under the care of a physician? _____ Yes _____ No
If YES, please describe: _____

80. Are you currently disabled for any reason? _____ Yes _____ No
If YES, describe your disability: _____

81. Are you scheduled for any medical procedure in the next two (2) months?
_____ Yes _____ No
If YES, please describe: _____

82. Do you have any difficulty seeing or hearing? _____ Yes _____ No
If YES, please describe: _____

83. Please list the languages that you speak: _____

Please describe your English language reading skill: _____ Very good
_____ Pretty good
_____ Not very good

84. Is there anything going on in your life or at work that would prevent you from giving this case your full attention? _____ Yes _____ No
If YES, please explain: _____

M. KNOWLEDGE OF THIS CASE

You may have seen or heard something about this case on television or in the newspaper. Among other things, this case is about an alleged shooting at the Post Office in Henning, Tennessee, on October 18, 2010. It is important that you truthfully and fully answer the following questions concerning your knowledge, if any, about this case through the media or any other source.

- 85. Do you recall reading, seeing, or hearing, from any source, about a robbery and shooting at the Henning Post Office on October 18, 2010?
 - _____ Yes
 - _____ No
 - _____ Uncertain about the case

- 86. Before coming here today, did you have any thoughts concerning this case, the crime itself, or the person(s) accused of committing this offense?
 - _____ Yes
 - _____ No
 - _____ Uncertain about the case

If YES, please explain: _____

- 87. Please indicate from what source you received information or learned about this case. (Check as many as apply):
 - _____ Television
 - _____ Newspapers
 - _____ Radio
 - _____ Magazines
 - _____ Internet
 - _____ Conversation with others

If you received information from one of these sources, please describe in detail the information that you received: _____

- 88. What do you recall hearing or reading, if anything, from any source, about the participation of Chastain Montgomery, Sr. in this offense? (Please be specific concerning the information you received and the source of the information.) _____

89. Do you know anyone who currently resides or works in Henning, Tennessee, or Lauderdale County, Tennessee, or anyone who resided or worked in Henning, Tennessee, or Lauderdale County, Tennessee, between June 1999 and the current date? ____ Yes ____ No
If YES, please identify the person, their occupation, and how you know them: _____

90. Within the last year, approximately how often have you had the occasion to visit Henning, Tennessee, or Lauderdale County, Tennessee? _____

91. Do you have any relatives or close friends who have been an employee or customer of the Henning Post Office? ____ Yes ____ No If YES, please identify the person, their occupation, and how you know them: _____

92. Have you, any relative, or close personal friend been employed with the Lauderdale County Sheriff's Department, Tipton County Sheriff's Department, Haywood County Sheriff's Department, Mason Police Department, Ripley Police Department, or Henning Police Department, U.S. Postal Inspection Service, Tennessee Bureau of Investigation, or Federal Bureau of Investigation? ____ Yes ____ No
If YES, please identify the person, their occupation, and how you know them: _____

93. Is there anything else you know about this case or you think you should bring to the Court's attention? ____ Yes ____ No
If YES, please explain: _____

N. RACE AND ETHNIC GROUP EXPERIENCES

94. Are you generally afraid of persons of a different race or ethnic background than your own? ____ Yes ____ No If YES, please elaborate: _____

95. Do you have friends or acquaintances of a race or ethnic background different than your own? ____ Yes ____ No If YES, please elaborate: _____

96. Have you ever been around anyone who exhibited racial, sexual, religious, and/or ethnic prejudice? ____ Yes ____ No If YES, please explain: _____

97. Are you a member of any group or organization that is concerned with racial issues?
_____ Yes _____ No If YES, please identify the group or organization: _____

98. Are you a member of any private club, civic, professional, or fraternal organization, or fraternity/sorority that limits its membership on the basis of race, ethnic origin, gender, or religion? _____ Yes _____ No
If YES, please identify the group or organization: _____

O. EXPERIENCE IN PSYCHIATRY, PSYCHOLOGY, OR MENTAL HEALTH COUNSELING

99. Have you, anyone in your family, or close personal friend(s) ever received inpatient treatment for any type of mental or psychiatric condition or as a treatment for alcoholism or drug abuse? _____ Yes _____ No
If YES, please explain: _____

100. Have you, anyone in your family, or close personal friend(s) ever been employed in any capacity in any type of psychiatric facility or drug or alcohol rehabilitation center?
_____ Yes _____ No
If YES, please describe: _____

101. Have you, anyone in your family, or close personal friend(s) ever received any type of outpatient mental health counseling? _____ Yes _____ No
If YES, please describe: _____

102. Have you, anyone in your family, or close personal friend(s) ever taken any prescription drug or other medication to alleviate the symptoms of any type of nervous or mental health condition? _____ Yes _____ No
If YES, please describe: _____

103. Do you hold the opinion that the treatment provided by a psychologist, psychiatrist, or other qualified mental health professional can be very helpful, somewhat helpful, neutral, not very helpful, or not at all helpful to persons suffering from psychiatric or psychological disorders? (Check only one):

- _____ Very Helpful
- _____ Somewhat Helpful
- _____ Neutral
- _____ Not Very Helpful
- _____ Not at All Helpful

Briefly describe any experience or information that leads you to hold this opinion: _____

104. Have you, anyone in your family, or a close friend been diagnosed as intellectually disabled/mentally retarded? _____ Yes _____ No

If YES, please describe: _____

P. SITTING AS A JUROR ON THIS CASE

105. It is estimated that the trial of this case will last between four (4) and seven (7) weeks. The trial will be in session five (5) days a week (except for holidays) from 9:00 a.m. to 5:00 p.m. Monday through Friday. The jury will **NOT** be sequestered – you can go home on nights and weekends. Jury selection is set to begin on Thursday, June 5, 2014. Do you have anything scheduled during the 7-week period beginning June 9, 2014, that would prevent you from sitting as a juror (for example, a non-refundable airplane ticket or a non-refundable hotel reservation for a vacation)? _____ Yes _____ No

If YES, please explain: _____

106. The following attorneys and/or legal professionals are involved in this case. Please place a check next to the name of anyone whom you may be acquainted with or know:

- | | |
|-------------------------|------------------------------|
| _____ Tony R. Arvin | _____ Stuart J. Canale |
| _____ Lorraine Craig | _____ Donna (Murray) Hankins |
| _____ Michael E. Scholl | _____ Edward L. Stanton, III |
| _____ C. Anne Tipton | _____ Michael S. Warbel |
| _____ Michael Wiseman | |

107. Are you the primary wage earner for your family? _____ Yes _____ No

- 108.** As part of your service on this case, the Court will order you **not** to read, listen to, or watch any accounts of this case reported by television, radio, internet and/or blogs, Twitter, Facebook, or other news media. Will you follow this order?
_____ Yes _____ No
- 109.** If you are selected as a juror in this case, the Court will order you **not** to discuss this case with anyone unless and until permitted to do so by the Court. Will you follow this order?
_____ Yes _____ No
- 110.** If you are selected to serve as a juror in this case, the Court will order you **not** to look into the facts of this case, research, or investigate the facts of this case on your own. Will you follow this order?
_____ Yes _____ No
- 111.** Is there anything else the Court or attorneys should know about you regarding your ability to sit on the jury?
_____ Yes _____ No If YES, please explain: _____
-

COURT'S INSTRUCTIONS TO PROSPECTIVE JURORS

1. You are not to communicate with other jurors **or anyone else, including close friends and family**, regarding any subject connected with the trial, nor to form or express any opinion thereon until the case is fully submitted to the jury.

2. You are to report promptly to the Court any incident involving **an attempt by any person** to improperly influence any member of the jury or a violation by any juror of any of the Court's instructions; and

3. You are not to read, listen to, or view any news reports concerning the case. The case must be decided solely upon the evidence introduced at trial.

CONFIDENTIAL

JUROR NUMBER _____

JUROR'S OATH OR AFFIRMATION

I solemnly swear (or affirm) that I have truthfully answered all questions on the jury questionnaire under penalty of perjury. I further swear (or affirm), under penalty of perjury, that I have followed all the Court's instructions in filling out my questionnaire. I also swear (or affirm) that I will follow the Court's instructions and communicate with no one regarding this case.

Signature of potential juror

Date

CONFIDENTIAL

JUROR NUMBER _____

EXPLANATION SHEET

CONFIDENTIAL

JUROR NUMBER _____

SUPPLEMENTAL SHEET

Question 8 - continuation

Child no. 7: Sex:___ Age:___ Occupation:_____

Present City and State of residence:_____

Child no. 8: Sex:___ Age:___ Occupation:_____

Present City and State of residence:_____

Child no. 9: Sex:___ Age:___ Occupation:_____

Present City and State of residence:_____

Child no. 10: Sex:___ Age:___ Occupation:_____

Present City and State of residence:_____

Child no. 11: Sex:___ Age:___ Occupation:_____

Present City and State of residence:_____

Child no. 12: Sex:___ Age:___ Occupation:_____

Present City and State of residence:_____

CONFIDENTIAL

JUROR NUMBER _____

SUPPLEMENTAL SHEET

Question 10 - continuation

Sibling no.7: Sex:___ Age:___ Occupation:_____

Present City and State of residence:_____

Sibling no.8: Sex:___ Age:___ Occupation:_____

Present City and State of residence:_____

Sibling no.9: Sex:___ Age:___ Occupation:_____

Present City and State of residence:_____

Sibling no.10: Sex:___ Age:___ Occupation:_____

Present City and State of residence:_____

Sibling no.11: Sex:___ Age:___ Occupation:_____

Present City and State of residence:_____

Sibling no.12: Sex:___ Age:___ Occupation:_____

Present City and State of residence:_____

Sibling no.13: Sex:___ Age:___ Occupation:_____

Present City and State of residence:_____

Sibling no.14: Sex:___ Age:___ Occupation:_____

Present City and State of residence:_____

Sibling no.15: Sex:___ Age:___ Occupation:_____

Present City and State of residence:_____

Sibling no.16: Sex:___ Age:___ Occupation:_____

Present City and State of residence:_____

Sibling no.17: Sex:___ Age:___ Occupation:_____

Present City and State of residence:_____

Sibling no.18: Sex:___ Age:___ Occupation:_____

Present City and State of residence:_____