

12. List living members of your family: (spouse and children only.)

| Name | Relationship | Age | Living with you | | Occupation | Employer |
|------|--------------|-----|-----------------|----|------------|----------|
| | | | Yes | No | | |

13. Have you ever been convicted of a felony? Yes___ No___ (If yes, describe nature of crime.)

14. Have you served as a juror prior to this term? Yes___ No___ (If yes, when and where?)

15. Have you or any member of your family listed above been sued or sued another person? Yes___ No___
If yes, complete the following: Type of lawsuit _____, When? _____
What Court? _____

16. Have you or any member of your family listed above ever suffered any bodily injury? Yes___ No___
If yes, explain: _____

17. Have you or any member of your family listed above been a victim of a crime? Yes___ No___ If yes,
describe type, date and place of crime. _____

18. Has a claim for personal injury ever been made against you or your family not involving a law suit?
Yes___ No___.

19. Are you related to or a close friend of any law enforcement officer, including the Prosecuting Attorney
or any members of his staff? Yes___ No___

20. Do you have any medical training beyond first aid? If so, explain _____

21. Do you drive an automobile? Yes___ No___

22. Name of your physicians or surgeons _____

23. Name of your attorney _____

STATE OF OHIO, COUNTY OF WILLIAMS, SS:

I solemnly affirm that the answers to the foregoing questions are true and correct to the best of my
knowledge and belief.

Dated: _____ Signature: _____