

INSTRUCTIONS FOR COMPLETING REQUEST FOR JURY DUTY PAY

PLEASE READ CAREFULLY

INCORRECT AND/OR INCOMPLETE SUBMISSION FORMS WILL BE RETURNED

1. Complete the attached form and obtain all required signatures.
2. Attach a copy of the Jury Duty Summons.
3. Complete the **Juror Service Certificate** supplied to you by the Court Clerk and give it to your employer.

Under the Employer's Rights, Duties, and Penalties Article 71, Title 13 of the Colorado Revised Statutes, all regularly employed trial or grand jurors shall be paid regular wages, but not to exceed fifty dollars per day by the Employer for the first three days of juror service or any part thereof. Compensation after the first three days of service shall be made by the state at the rate of fifty dollars per day.

4. Juror is responsible for collecting all monies from contractor and State. The Executive Board will automatically deduct these monies when they approve the claim.
5. Forward completed request, copy of the Jury Duty Summons and completed **Juror Service certificate.**
6. Under schedule shift hours only (4-10's or 5-8's). Overtime is not paid on Jury Duty per Local Union 68 Bylaws, Article XII.

The Executive Board will have full responsibility and authority governing all jury duty payments.

Any claim found to be fraudulently submitted, may subject submitting member to charges being filed against him/her, per the IBEW Constitution, Revised Article XXV, Section 1, Subsection e.

REQUEST FOR JURY DUTY PAY

Name Card # Yellow Ticket Recpt # and Quarter paid thru

Street Address City, State, Zip Code Home Phone #

Employer Job & Location

The following left hand column must be completed and accompanied by a Juror Service Certificate or the Court Clerk's Signature.

Dates/Hours Spent on Jury Dury

MONTH-DAY-YEAR A.M. to P.M.

Scheduled Shift Hours Indicate

MONTH- DAY-YEAR A.M. to P.M.

[Blank lines for dates and hours spent on jury duty]

[Blank lines for scheduled shift hours]

Hours Lost MONTH- DAY-YEAR A.M. to P.M. TOTAL

Hours Worked (If Any) MONTH- DAY-YEAR A.M. to P.M.

[Blank lines for hours lost]

[Blank lines for hours worked]

(If additional space is needed, please use second page.)

Court Clerk/Official Signature

(Title) (Date)

I hereby swear that all information as stated above is accurate and complete

(Member's Signature) (Date)

(Supervisor's Signature) (Date)

(IBEW, Local No.) (Card No.)

Note: Supervisor's signature is for verification of lost time only.

DO NOT WRITE BELOW THIS LINE

APPROVED/DISAPPROVED BY EXECUTIVE BOARD:

DATE

CHAIRMAN'S SIGNATURE

PAID BY CHECK #

DATED

AMOUNT PAID

REQUEST FOR JURY DUTY PAY
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Please use this page if you need extra space.

Dates & Hours Spent On Jury Duty

MONTH-DAY YEAR A.M. to P.M.

Scheduled Shift Hours-Indicate

MONTH-DAY-YEAR A.M. to P.M.

Hours Lost

MONTH-DAY YEAR A.M. to P.M. P.M. TOTAL

Hours Worked (If Any)

MONTH-DAY-YEAR A.M. TO P.M.
