

### ATTACHMENT 8 SAMPLE IMAGES

#### #2 Business Card—Managers



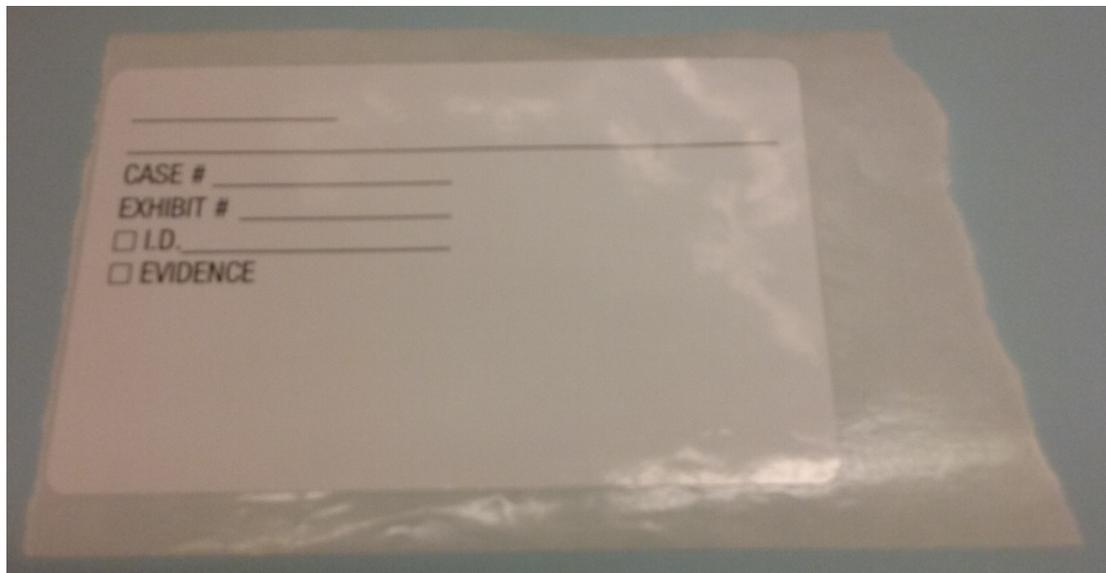
#### #3 Business Card—Other



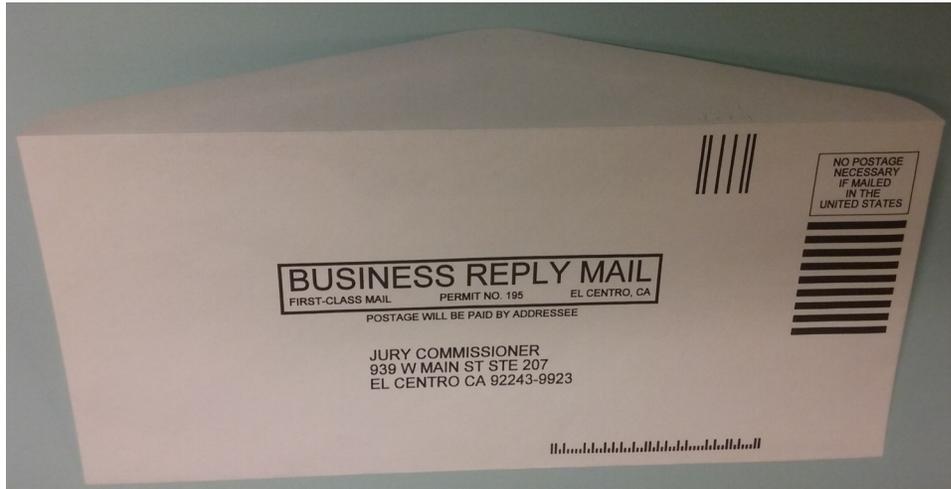
Vendors may view samples at:

Superior Court of California  
County of Imperial  
1625 W. Main St., Ste 200  
El Centro, CA 92243  
Ask for Elsa Rodriguez

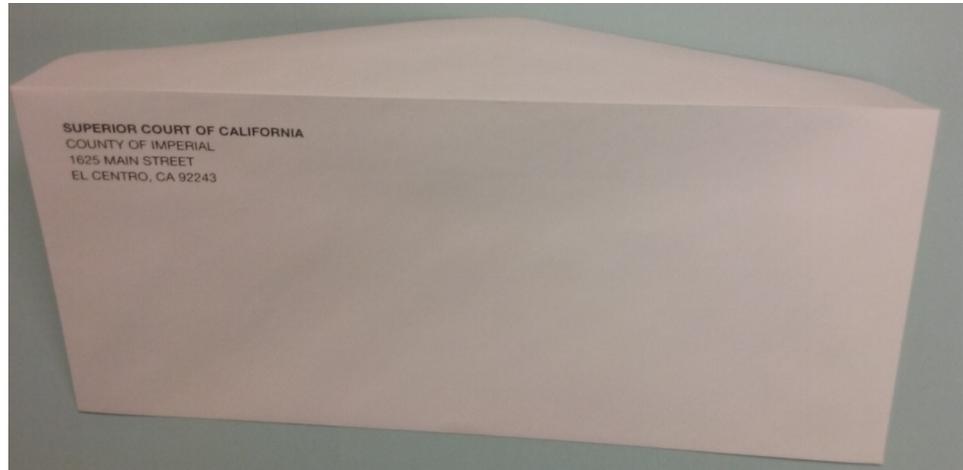
#### #4 Criminal Labels



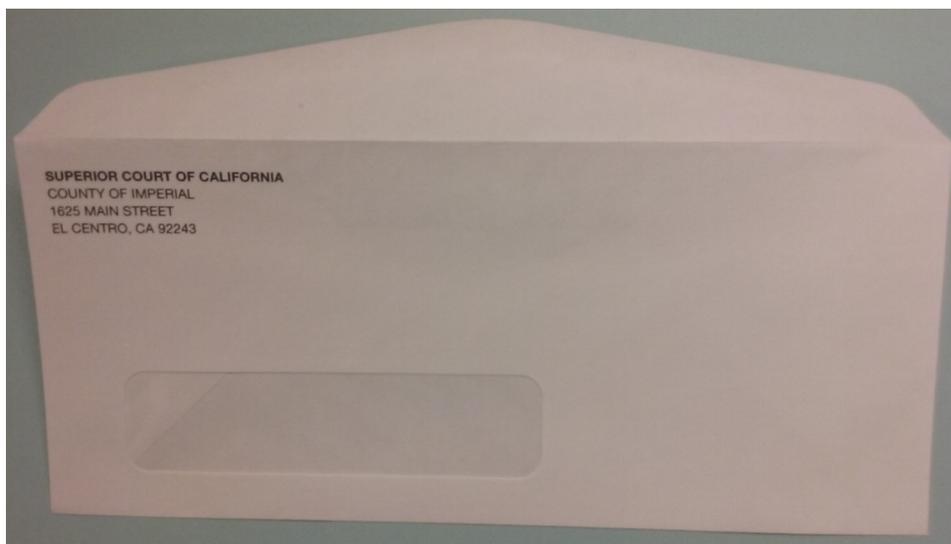
#5 Envelopes—BRE



#6 Envelopes—Regular



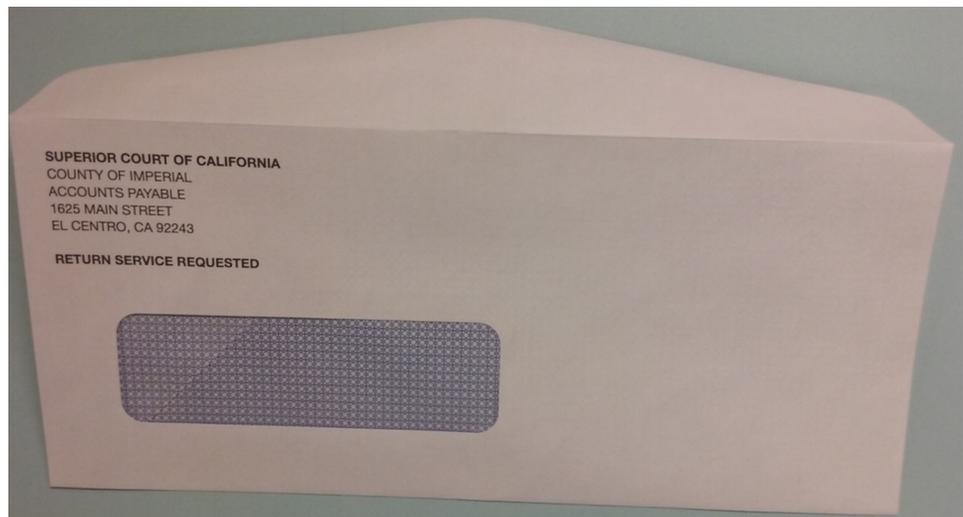
#7 Envelopes—Window



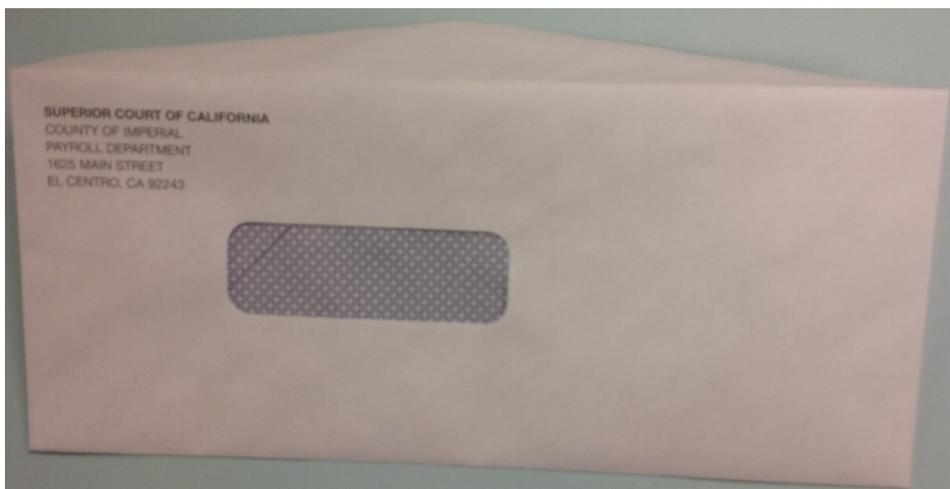
### #8 Envelopes—Bottom Flap



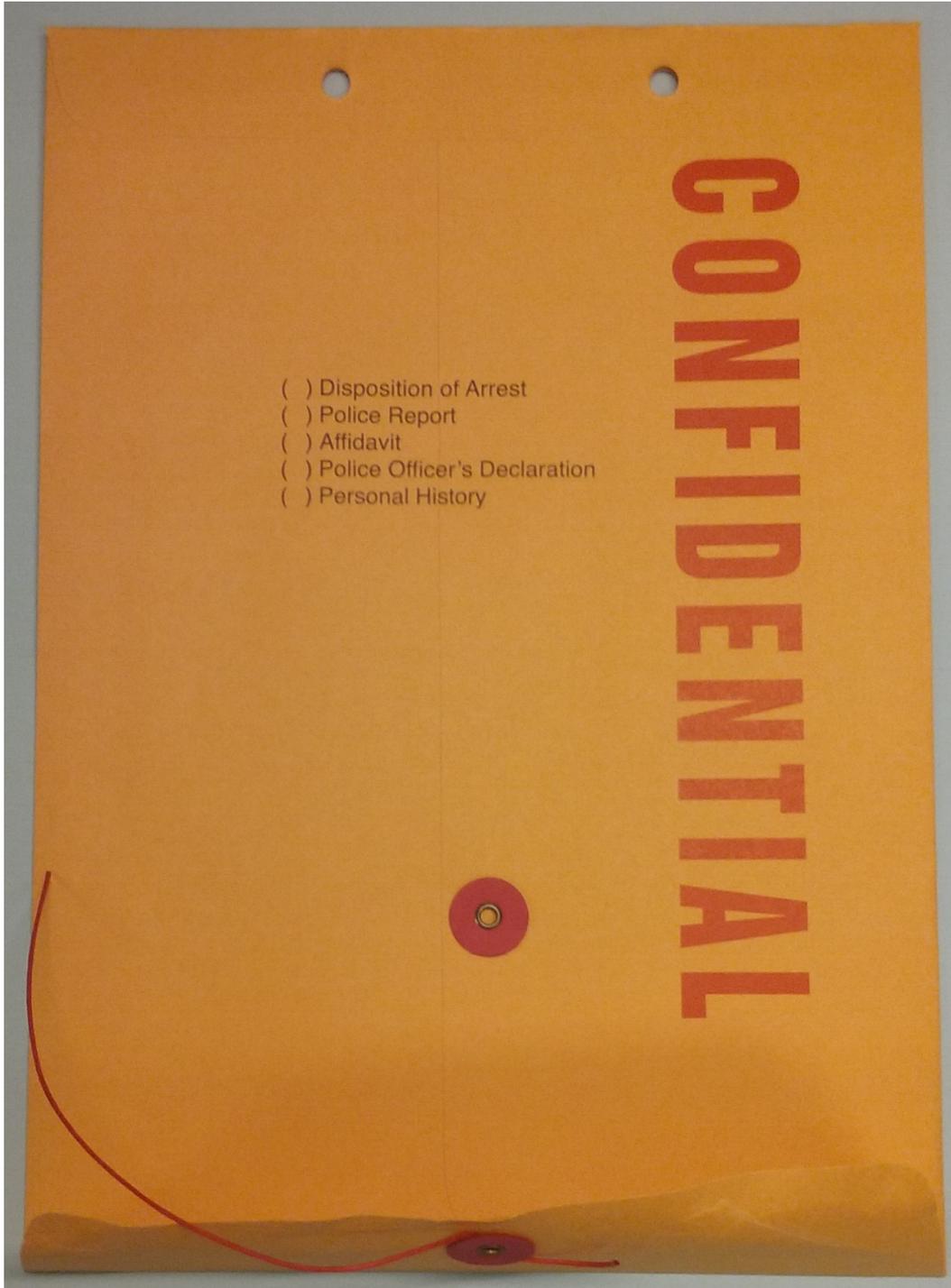
### #9 Envelopes—AP



### #10 Envelopes—PR



#11 Envelopes—Manila Confidential



#12 Jury Summons—Front

<p style="text-align: center;"><b>JURY SERVICE SUMMONS</b>          Superior Court of California, Imperial County          939 Main Street          El Centro, Ca. 92243</p>	
-Detach - - - - - Here - - - - -	
<p><b>YOU ARE HEREBY SUMMONED</b> to serve as a prospective juror for the Superior Court. The right to a trial by a jury of one's peers is a cornerstone of justice. Service on a jury to hear a criminal or civil case is one of the most important civic responsibilities citizens perform. We look forward to your participation in this important and, we hope, rewarding service to our community. If summoned is deceased, please contact the Jury Commissioners Office to update our records.</p> <p style="text-align: center;"><b>ACCESS REPORTING INSTRUCTIONS USING ONE OR BOTH OF THE FOLLOWING METHODS</b></p> <p> <input checked="" type="checkbox"/> By Phone: Call the Automated Phone System  <input checked="" type="checkbox"/> By Internet: visit <a href="http://www.imperialcourts.ca.gov">www.imperialcourts.ca.gov</a> </p> <p><b>LENGTH OF SERVICE:</b> You are required to call in or visit our web site the five (5) working days of your summons for reporting instructions. If instructed to report to the courthouse and are not assigned to a trial, your jury service is completed at the end of that day. If you are assigned to a trial, you must serve for the entire trial as instructed by the Judge. Jurors instructed to report to the Jury Assembly Room must do so ½ an hour before their assigned time.</p> <p style="text-align: center;"><b>You Must Notify Your Employer That You Have Been Summoned For Jury Service.</b></p>	
+ DETACH HERE IF RETURNING AFFIDAVIT - - - - - +	
<p><b>FAILURE TO APPEAR WITHOUT APPROVED EXCUSE OR DEFERRAL IS PUNISHABLE BY CONTEMPT AND OR FINE PURSUANT TO CODE OF CIVIL PROCEDURE §§177.5 AND 209</b></p>	
<p style="text-align: center;"><b>FOR STATISTICAL RECORDS, PLEASE FILL IN APPROPRIATE BOXES: (Fill In Solid ■ )</b></p> <p>         SEX: <input type="checkbox"/> Male <input type="checkbox"/> Female    RACE: <input type="checkbox"/> Hispanic <input type="checkbox"/> White Non-Hispanic <input type="checkbox"/> Black <input type="checkbox"/> American Indian <input type="checkbox"/> Asian <input type="checkbox"/> Other Race       </p> <p style="text-align: center;"><b>AFFIDAVIT OF PROSPECTIVE JURORS</b></p> <p>If you are not qualified to be a juror, are requesting a deferral or excuse; Please fill the appropriate boxes below. Enter any additional information on the back, remember to sign and date this affidavit before returning in the enclosed envelope. You will be contacted only if your request is denied. In order to process your affidavit timely, it must arrive at least six (6) days before your scheduled summons date; otherwise, you must serve as scheduled.</p> <p style="text-align: center;"><b>DEFERRALS MAY ALSO BE REQUESTED USING THE AUTOMATED PHONE SYSTEM</b></p> <p>I AM REQUESTING A DEFERRAL DUE TO: <input type="checkbox"/> Business <input type="checkbox"/> Personal <input type="checkbox"/> Health <input type="checkbox"/> Student / Teacher <input type="checkbox"/> Vacation <input type="checkbox"/> Other</p> <p>If approved, I have selected a specific week to appear within the allowed (6) month period. Monday: _____ (MM-DD-YYYY)</p> <p style="text-align: center;"><b>NOT QUALIFIED</b></p> <p> <input type="checkbox"/> I am not a United States citizen. <input type="checkbox"/> I do not speak English. <input type="checkbox"/> I am not an Imperial County resident. <input type="checkbox"/> Under 18 years of age.  <input type="checkbox"/> I have been convicted of a felony or malfeasance of office and my civil rights have <b>NOT</b> been restored.  <input type="checkbox"/> I am a peace officer as defined in Sections 830.1 &amp; 830.2 of the Penal Code. List agency &amp; title/rank on reverse.       </p> <p style="text-align: center;"><b>REQUEST TO BE EXCUSED</b></p> <p> <input type="checkbox"/> I am physically or mentally incapable to serve as a juror. <input type="checkbox"/> I am age 70 or over with a medical hardship.  <input type="checkbox"/> I am <u>under</u> age 70, unable to serve due to health or age (submit a doctor's statement to verify permanent inability to serve).  <input type="checkbox"/> I will bear a severe hardship having to travel more than 1.5 hours to serve.  <input type="checkbox"/> I will bear an extreme financial burden if required to serve (list employer and occupation for you and your spouse in affidavit).  <input type="checkbox"/> I have a personal obligation to provide personal care between 8:00 am and 5:00 pm Mon-Fri. Comparable care is not practical.  <input type="checkbox"/> I have served in court as a juror within the past 12 months.       </p>	



#13 Receipts

Superior Court of California, County of Imperial **Nº 5218**  
**Official Receipt**

Case # \_\_\_\_\_ Date: \_\_\_\_\_  
RECEIVED FROM \_\_\_\_\_  
The Sum Of \_\_\_\_\_ \$ \_\_\_\_\_  
For \_\_\_\_\_

SUPERIOR COURT  
 CASH  
 CHECK No. \_\_\_\_\_  
 MONEY ORDER No. \_\_\_\_\_  
 CREDIT CARD No. \_\_\_\_\_

DEPARTMENT \_\_\_\_\_  
BY: \_\_\_\_\_

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Superior Court of California, County of Imperial **Nº 5219**  
**Official Receipt**

Case # \_\_\_\_\_ Date: \_\_\_\_\_  
RECEIVED FROM \_\_\_\_\_  
The Sum Of \_\_\_\_\_ \$ \_\_\_\_\_  
For \_\_\_\_\_

SUPERIOR COURT  
 CASH  
 CHECK No. \_\_\_\_\_  
 MONEY ORDER No. \_\_\_\_\_  
 CREDIT CARD No. \_\_\_\_\_

DEPARTMENT \_\_\_\_\_  
BY: \_\_\_\_\_

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Superior Court of California, County of Imperial **Nº 5220**  
**Official Receipt**

Case # \_\_\_\_\_ Date: \_\_\_\_\_  
RECEIVED FROM \_\_\_\_\_  
The Sum Of \_\_\_\_\_ \$ \_\_\_\_\_  
For \_\_\_\_\_

SUPERIOR COURT  
 CASH  
 CHECK No. \_\_\_\_\_  
 MONEY ORDER No. \_\_\_\_\_  
 CREDIT CARD No. \_\_\_\_\_

DEPARTMENT \_\_\_\_\_  
BY: \_\_\_\_\_