

## Interrogatories to «Opposing party's party designation»

The «Client's party designation» serves upon the «Opposing party's party designation» the following Interrogatories pursuant to Trial Rule 33 of Indiana Rules of Procedure . The «Opposing party's party designation» shall serve a copy of the answers and objections within a period designated by the «Client's party designation», not less than thirty (30) days after the service thereof or within such shorter or longer time as the court may allow. All information is to be divulged which is in your possession or control or within the possession and control of your attorney. Where an Interrogatory calls for an answer in more than one part, each part should be separated in the answer so that the answer is clearly understandable. You are reminded that all answers must be made separately and fully, and that an incomplete or evasive answer is a failure to answer. You are under a continuing duty to seasonably supplement your response with respect to any questions.

### PRELIMINARY STATEMENT

I. **Definitions.** As used in these Interrogatories, the terms listed below, shall be defined as follows:

- a. "With particularity" - refers to a complete detail account of what happened. It should include, when appropriate, all dates, times, and amounts; the identifications of all documents; all written and oral communications relevant thereto. If such details are the same for more than one interrogatory, repetition is not necessary, providing you supplied complete details in your answer to another interrogatory, and in its subsequent answer refers to the interrogatory number at which the details were previously supplied.
- b. "Written communication" - means without limitation, correspondence, letters and telegrams even if not received.
- c. "Documents" - means without limitation, all records, plans, drawings, papers, minutes, agreements, contract, and memoranda.
- d. "Health Care Providers" — includes all medical personnel, doctors, chiropractors, nurses, therapists, counselors, school counselors, hospitals, or clinics.
- e. "Seen" — includes all biological, adopted, or stepchildren.
- f. "Mistreated" — includes both physical and psychological mistreatment.

II. **Documents Furnished in Lieu of Details.** In lieu of the descriptions and details requested with relation

to documents and written communications, a copy of said document or written communication may be supplied in lieu of such information.

III. **Other Monthly Income.** All income you receive which should include, but not be limited to dividends, interests, rents, royalties, pensions, retirements, social security, disability, unemployment and other workman's compensation.

IV. **Total Income.** The income that you reported on your tax return.

V. **Multiple questions.** Each interrogatory is intended to and does, request each and every part in particular thereof, to be answered as though it was the subject of, and were asked by a separate interrogatory.

VI. **Instructions of Grammar and Syntax.** Grammar and syntax as used in these interrogatories, shall be construed and interpreted to give proper meaning and consistency to its context. By way of illustration and not by way of limitation, the singular may be construed to include the plural, the plural to the singular and the use of any gender or tense may be construed to include all genders and tenses.

VII. **Interrogatories Continuing:** These interrogatories shall be continuing so as to require supplemental or further answers if the <Opposing party's party designation> obtains further information between the time in which the answers are served and the time of trial.

VIII. **Additional Space:** If there is insufficient space to answer your question please attach additional pages.

Respectfully submitted,

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Samuel C. Hasler, 11971-48  
Attorney for <Client's party designation>  
<MY ADDRESS1>  
Anderson, IN <MY ZIP CODE>  
765-641-7906

### Certificate of Service

I hereby certify that a copy of the foregoing has been furnished to <IF Does opposing party have an attorney?>

<Opposing attorney name>, attorney for <Opposing party's party designation>,<ELSE> <Opposing party's name><END IF> <How served on opposing party> on \_\_\_\_\_.

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Samuel C. Hasler

## INTERROGATORIES

1. State your:
  - a. Full name and address
  - b. Employer (all employers)
  - e. Address of Employer
  - f. Occupation
  - g. Shift you work

ANSWER:

2. Are you married or living with another person? If so, state the following for your spouse's or person you are living with:
  - a. Name and address
  - b. Employment and Job Title
  - c. Hours of employment

ANSWER:

3. For all of your children, please state:
  - a. Name(s) and age(s)
  - b. With whom each child lives and current address

ANSWER:

4. Since the previous visitation order, have you refused or denied visitation? If so, state:
  - a. Date(s) of each refusal or denial
  - b. The circumstances
  - c. Reasons for the refusal or denial
  - d. Date(s) of each makeup for missed visitation

ANSWER:

5. Do you see changes in your children's behavior either immediately before or after visitation? If so, explain.

ANSWER

6. Are your children currently seeing, or have they seen, health care providers since the last custody order? If so, state:

- a. The healthcare providers name and address
- b. Who was treated
- c. Reason for and date of each treatment
- d. Is there ongoing treatment? Explain
- e. What medication is or has been taken

ANSWER:

7. Are you currently seeing, or have you seen, a health care provider since the last custody order?

- a. The healthcare providers name and address
- b. Reason for and date of each treatment
- c. Is there ongoing treatment? Explain
- d. What medication is or has been taken

ANSWER:

8. Have you taken any illegal substances since the last order of custody? Please state:

- a. Drug ingested
- b. Amount and date of ingestion
- c. All witnesses to the above

ANSWER:

10. Do you or your current spouse have a criminal record? If so, indicate:

- a. Conviction date
- b. Crime in which you were convicted
- c. Court of conviction

d. Date of conviction

ANSWER:

I HEREBY AFFIRM UNDER THE PAINS AND PENALTIES OF PERJURY THAT THE ABOVE AND FOREGOING REPRESENTATIONS ARE TRUE TO THE BEST OF MY KNOWLEDGE.

DATED THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, <Year:1990>.

\_\_\_\_\_  
sing party's name:LIKE THIS><Oppo