Со	unty Court	County, Colorado		
Co	urt Address:			
Pla	aintiff(s)/Petitioner(s):			
٧.				
De	fendant(s)/Respondent((s):	A 6	OURT USE ONLY
Λ++	ernov or Porty Without	Attorney (Name and Address):	Case Numl	
All	omey or Party Wilhout A	Attorney (Marile and Address).	Case Numi	oer.
	one Number:	E-mail:	Division	Courtroom
FA	X Number: PATTERN I	Atty. Reg. #: NTERROGATORIES UNDER C.F		
			Α,	
	following Pattern Inter gment Debtor) pursuant	rrogatories are propounded to to C.R.C.P. 369(a)		(name o
	y			
		ons and each and every part there		
		Court and a copy mailed to the s		
		parate sheet of paper, if necessary ur answers unless you request and		
		ess address , home address, busines		
	the person answering	these questions, and the relationship	to the Business	:
	Name:		_	
	Home address:			
	Business address:			
	Home phone:			
		Business p	hone:	
	Date of Birth:	•	ohone:	
	Date of Birth:	•	ohone:	
2.	If the Business is a	corporation, list the name, home a	ddress, busines	ss address, home phone
2.	If the Business is a	corporation, list the name, home a	ddress, busines	ss address, home phone
2.	If the Business is a business phone, and o more of the outstandir	corporation, list the name, home a date of birth and the title of each office ng shares.	ddress, busines er, director and	ss address, home phone shareholder owning 5% o
2.	If the Business is a business phone, and o more of the outstandin	corporation, list the name, home addate of birth and the title of each officeng shares.	ddress, busines er, director and	ss address, home phone shareholder owning 5% o _ Date of Birth:
2.	If the Business is a business phone, and o more of the outstandir Name:	corporation, list the name, home addate of birth and the title of each officeng shares. Title:	ddress, busines er, director and	ss address, home phone shareholder owning 5% o Date of Birth:
2.	If the Business is a business phone, and omore of the outstandin Name:	corporation, list the name, home addate of birth and the title of each officeng shares.	ddress, busines er, director and	ss address, home phone shareholder owning 5% o _ Date of Birth:
2.	If the Business is a business phone, and omore of the outstandin Name:	corporation, list the name, home addate of birth and the title of each officeng shares. Title:	ddress, busineser, director and	ss address, home phone shareholder owning 5% o _ Date of Birth:
2.	If the Business is a business phone, and omore of the outstandin Name:	corporation, list the name, home addate of birth and the title of each office ng shares. Title:	ddress, busineser, director and	ss address, home phone shareholder owning 5% o Date of Birth:
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Type of entity:				
				Date of Birth:
Home phone:		Business pl	none:	
Name:		Title:		Date of Birth:
Home address:				
Business address:				
Home phone:		Business pl	none:	
Name:		Title:		Date of Birth:
Home address:				
Business address:				
Home phone:		Business pl	none:	
Provide the EIN and/	or Federal Tax ld Numbe	er of the Busines	s.	
EIN:		Federal Tax	ld:	
all cars, trucks, mot	model, purchase price, vorcycles, boats, trailers,	and other moto	r vehicles o	wned, used by or titled
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6.	List each and every financial institution, including banks, savings and loan associations, credit unions, brokerage houses, or otherwise, where the Business is named on an account or has signature authority, including the name, address and telephone number of the institution, the account number, and the current balance of each account.			
	Name:		Telephone Number:	
	Address:			
	Type of Account:	Current Balance:	Account Number (last 4-digits):	
	Name:		Telephone Number:	
	Address:			
	Type of Account:	Current Balance:	Account Number (last 4-digits):	
	Name:		Telephone Number:	
	Address:			
	Type of Account:	Current Balance:	Account Number (last 4-digits):	
	the property, and the locat	ion including the cour ime, address and telep	current value, amount of any loan balance against ity. If the property has been transferred to another shone number of the transferee, the date of transfer,	
	Description of Property:			
	Purchase Date:	Price:	Current Value:	
			Location (including the County):	
	Transfer Date:	Price Paid:	Name:	
	Address of Purchaser:			
	Telephone Number:			
	Description of Property:			
			Current Value:	
	Loan Balance:		Location (including the County):	
	Transfer Date:	Price Paid:	Name:	
	Address of Purchaser:			
	Telephone Number:			
	Description of Property:			
			Current Value:	
	Loan Balance:		Location (including the County):	
	Transfer Date:	Price Paid:	Name:	
	Address of Purchaser:			

8.	If the Business owns any property which is leased to another person or entity, identify the property and provide the lessee's name, address, and phone number, the term of the lease, the amount of lease payments, and the dates that the payments are due.			
	Type of Property:	Les	see's Name:	
	Address:			
	Telephone Number:	Ter	m of Lease:	
	Lease Payment Amount:	Payment Due D	Pates:	
	Type of Property:	Les	see's Name:	
	Address:			
	Telephone Number:	Ter	m of Lease:	
	Lease Payment Amount:	Payment Due D	oates:	
9.	List every person or entity which owes money to the Business in excess of \$500.00, including the name, address and phone number, the amount owed, if payments are due, the amount and dates they are due, and the reason the moneys are owed.			
	Name:	_ Telephone Number:	Amount Owed:	
	Address:			
	Payment Amount:	Payment Due Dates: _		
	Reason(s) the moneys are owed:			
	Name:	_ Telephone Number:	Amount Owed:	
	Address:			
	Payment Amount:	Payment Due Dates: _		
	Reason(s) the moneys are owed:			
	Name:	_ Telephone Number:	Amount Owed:	
	Address:			
	Payment Amount:	Payment Due Dates: _		
	Reason(s) the moneys are owed:			
10.		e address and phone nur	ducts of the Business averaging more mber, the amount billed or purchased one Number:	
	Address:			
	Amount Billed or Purchased each Month			
	Name:	Telepho	one Number:	
	Address:			
	Amount Billed or Purchased each Month			
	Name:	Telepho	one Number:	
	Address:			
	Amount Rilled or Purchased each Month		Rilling Dates:	

11.	Produce and attach	to your answers, copies of the fol	lowing documents for the last four years:	
	b. For partnershipsc. For limited liabilitd. For all entities, ai.ii.iii.	, the articles of incorporation, bylaws , the partnership agreement. ty companies, the articles of organiza nnual: Federal and state tax returns. Profit and loss statements. Balance sheets. Inventory lists.	·	
12.	If the Business wis	hes to propose an arrangement to	pay the judgment, state the proposed terms.	
	If the Busin	ess is no longer in business	, answer the following questions:	
13.	State the date and	exact reasons the Business went o	out of business.	
	Date:			
				
	<u></u>			
14.	If the Business disposed of any of its assets when it went out of business, describe each item whic was disposed of, the name, address and telephone number of the person or entity which too possession of the item, any amounts paid for the item, and the reason for the disposition.			
	Description:		_ Amount Paid:	
	Name:		Telephone Number:	
	Address:			
	Reason for Disposition	on:		
	Description:		Amount Paid:	
	Name:		Telephone Number:	
	Reason for Disposition	on:		
15.	and amount of the	loan against that item, if any.	each item, including the current value, location	
			Loan Balance:	
	Location:		Loan Balance:	

Location: _____ Loan Balance: _____ Loan Balance:

Description:

16. If the Business is in receivership or phone number of the receiver or trust	a trustee has been appointed, provide the name, address and ee.
Name:	Telephone Number:
Address:	
	d with the Business going out of business (e.g., bill of sale, deed blution), produce and attach them to your answers.
Failure to respond fully, accurately a for contempt of court.	nd timely to these interrogatories could result in a citation
☐ By checking this box, I am acknowledging form.	g I am filling in the blanks and not changing anything else on the
☐ By checking this box, I am acknowledging	g that I have made a change to the original content of this form.
	VERIFICATION
I declare under penalty of perjury under the	he law of Colorado that the foregoing is true and correct.
Executed on the day of	(year), at(year), at
(date) (month)	(year) (city or other location, and state OR country
(Printed name of Judgment Debtor)	Signature of Judgment Debtor
	ATE OF SERVICE BY MAILING led by Clerk within three days of filing)
I hereby certify that on	(date), I mailed a true and complete copy of the PATTERN - BUSINESS by placing them in the United States Mail, postage pre-paid to
To:	
	Clerk of Court/Deputy Clerk