

**DEFENDANTS' STANDARD INTERROGATORIES TO PLAINTIFF  
(Loss of Consortium)**

PROPOUNDING PARTY: Defendants

RESPONDING PARTY: Plaintiff \_\_\_\_\_

SET NUMBER: . One

**INTERROGATORIES**

1. Please state:
  - A. Your full name including first, middle and last names;
  - B. Your address;
  - C. Whether you currently reside with your spouse; and
  - D. Your Social Security number.
  
2. Please state the date of your current marriage and the place of your current marriage.
  
3. Was your marriage ceremonial or common-law?
  - A. If marriage was ceremonial, please state the name, address and official capacity of the person performing the marriage;
  - B. If marriage was common-law, please outline the facts and circumstances relied upon to establish the marriage.
  
4. Did you and spouse have any natural or adopted offspring? If "yes", please state for each offspring:
  - A. Full name including first, middle and last names;
  - B. Address;
  - C. Date of birth; and
  - D. Whether natural or adopted.

5. Have you had any previous marriages? If "yes", please state:

- A. Previous spouse's name;
- B. Previous spouse's address;
- C. Dates of marriage;
- D. Names and ages of children, whether natural or adopted; and
- E. Place, date and circumstances under which marriage was dissolved

or terminated.

6. Has your spouse had any previous marriages? If "yes", please state:

- A. Previous spouse's name;
- B. Previous spouse's address;
- C. Dates of marriage;
- D. Names and ages of children, whether natural or adopted; and
- E. Place, date and circumstances under which marriage was dissolved

or terminated.

7. On the average, how many hours per day did you regularly spend with your spouse prior to his/her current illness?

8. On the average, how many hours per day do you currently spend with your spouse?

9. What hobbies, sports, games, cultural, vocational and other interests did you share with or enjoy in common with your spouse prior to his/her illness?

10. Have you ever been legally separated from your spouse? If "yes", please state the circumstances, duration and dates of each such separation.

11. Have you ever been voluntarily separated from your spouse for reasons due to differences or disputes arising out of the marital relationship? If "yes", please state the circumstances and duration of each such separation.

12. Within the last 10 years have you or your spouse ever filed a civil complaint with any governmental agency against the other for physical abuse? If "yes", please state:

- A. The person initiating the procedure;
- B. A description of the complaint, charge or grievance;
- C. The court or governmental body before which the proceeding was brought; and
- D. The disposition of the proceeding.

13. Within the last 10 years have you or your spouse ever filed a criminal complaint with any governmental agency against the other for physical abuse? If "yes", please state:

- A. The person initiating the procedure;
- B. A description of the complaint, charge or grievance;
- C. The court or governmental body before which the proceeding was brought; and
- D. The disposition of the proceedings.

14. Have you ever seen or consulted with any therapist or counselor or professional about sexual dysfunction or sexual incompatibility in your marriage? If "yes", please state the dates, the names of the parties seen and the circumstances of each such visit or consultation.

15. Please state the name, address and telephone number of every person who assisted you in any way in answering these interrogatories.

16. Either (1) attach all DOCUMENTS evidencing the information sought in these interrogatories and their subparts to your answers to these interrogatories, or (2) attach disks containing such data, or (3) describe such DOCUMENTS with sufficient particularity that they may be made the subject of a request for production of documents.

**ATTACH THE FOLLOWING DOCUMENT TO YOUR RESPONSES:**

[Verification under penalty of perjury]