

**IN THE CIRCUIT COURT OF CHRISTIAN COUNTY, MISSOURI**

JOHN DOE, )  
 )  
 Plaintiff, )  
 )  
 vs. )  
 )  
 JANE DOE, )  
 )  
 and )  
 )  
 INSURANCE COMPANY )  
 )  
 Defendants. )

Case Number: 11CT-\*\*\*\*\*

**PLAINTIFF’S FIRST INTERROGATORIES TO DEFENDANT JANE DOE**

**COMES NOW** Plaintiff, by and through her attorney of record, O’Reilly, Jensen & Preston, LLC, and hereby propounds the following interrogatories to Defendant, to be answered in full, under oath, and in accordance with Missouri Supreme Court Rule.

**DEFINITIONS**

- (a) These Interrogatories are continuing in character so as to require you to file supplemental answers if you obtain further or different information before trial.
- (b) Unless otherwise indicated, these interrogatories refer to the time, place and circumstances of the occurrence mentioned or complained of in the pleadings.
- (c) The pronoun "you" refers to the party whom these Interrogatories are addressed.

**INTERROGATORIES**

1. State the name, address, telephone number, date of birth, and social security number of any person answering or assisting in answering these Interrogatories.

**ANSWER:**

2. Have you ever been known by any other name? If so, give the other name or names, and state where and when you used such names.

**ANSWER:**

3. State your present address and the period during which you have resided at said address.

**ANSWER:**

4. List all other addresses at which you have resided during the past five (5) years, the name of the owner of each residence, and the dates you lived at each address.

**ANSWER:**

5. If you are married at the present time, please state the following:

- (a) Your spouse's full name;
- (b) The date and place of your marriage;
- (c) Whether your spouse is currently living with you and, if not, the date said separation from your spouse occurred; and
- (d) Your spouse's present address, if different from yours.

**ANSWER:**

6. State whether you are currently employed by any person, firm or corporation and, if so, the name and address of your present employer, and also give the name and address of each employer for the past five (5) years with dates included for each such employment.

**ANSWER:**

7. State the name and complete address or, if unknown, the last known address of all witnesses known to you, of those acting on your behalf, or your attorneys, who claim to have witnessed the incident described in Plaintiff's Petition.

**ANSWER:**

8. State the name and complete address or, if none known, the last known address of all persons known to you, those acting on your behalf, or your attorneys, who have talked to the Plaintiff about the facts of the incident referred to in Plaintiff's Petition, or who have heard such Plaintiff make any remark or statement with regards to the incident described in Plaintiff's Petition or Plaintiff's injuries.

**ANSWER:**

9. Did you, or anyone acting on your behalf, secure a statement from Plaintiff? If such a statement was obtained, attach a copy of such statement to your answers to these Interrogatories, give the names and addresses of the persons obtaining the same, the name and address of all persons present when the same was obtained, and give the date and time the same was obtained.

**ANSWER:**

10. State the names and complete present addresses, or if unknown, the last known addresses, of all persons known to you or anyone acting on your behalf who were present at the scene of the incident or accident referred to in Plaintiff's Petition, either at the time of the incident or accident, or within 2 hours thereafter.

**ANSWER:**

11. State the name, address, and telephone number of any person who has knowledge of, or claims to have knowledge of:

- (a) Plaintiff's medical condition;
- (b) Plaintiff's physical condition;
- (c) Plaintiff's ability to function;
- (d) Plaintiff's claim of damages;
- (e) Plaintiff's ability to move;
- (f) Plaintiff's ability to complete tasks;
- (g) Plaintiff's ability to do work;
- (h) Plaintiff's ability to do recreational activities;
- (i) Plaintiff's ability to perform any occupation or occupational duties.

**ANSWER:**

12. For each person identified in your answer to the previous interrogatory, please state:

- (a) The person's relationship, if any, to the Defendant;
- (b) The person's relationship, if any, to the Plaintiff;
- (c) The person's relationship, if any, to the Defendant's insurers; and
- (d) The person's relationship, if any, to the Defendant's attorneys.

**ANSWER:**

13. State whether any photographs were made of the accident scene, and if so, state who made the photographs, when they were made, what photographs were made, the number of photographs, and what they show or depict.

**ANSWER:**

14. State whether any photographs were made of the motor vehicles involved, and if so, state who made the photographs, when they were made, what photographs were made, the number of photographs, and what they show or depict.

**ANSWER:**

15. State whether or not you have been involved in any other personal injury claims or lawsuits and, if so, set out the nature of the claim or lawsuit, including the time and place of the occurrence giving rise to the claim or lawsuit, the name of the person or persons who were involved.

**ANSWER:**

16. Have you ever been convicted of a crime (including traffic offenses, misdemeanors, or felonies)? If so, state the location, nature of the offenses, penalty received for the same, and the name of the Court imposing any such penalty.

**ANSWER:**

17. Describe the weather conditions that existed at the time of the incident referred to in Plaintiff's Petition.

**ANSWER:**

18. State whether you have been involved in any *prior* automobile accidents and, if so, state the day, place of occurrence, and the name of the other party or parties involved.

**ANSWER:**

19. State whether you have been involved in any *subsequent* automobile accident and, if so, state the name, place of occurrence, and the name of the other party or parties involved.

**ANSWER:**

20. State the name of the owner of the vehicle you were driving on the date of the accident in Plaintiff's Petition, and attach a copy of the certificate of ownership or title of each to these answers to Interrogatories.

**ANSWER:**

21. State the name and address, or last known address, of all persons known to you, your agents, or your attorneys who have knowledge or claim to have knowledge of the facts of the incident referred to in Plaintiff's Petition.

**ANSWER:**

22. State whether an investigation was conducted into the facts or causes of the incident as alleged in Plaintiff's Petition by you, your representatives, your attorneys or anyone else with whom you have knowledge. If so, please state:

- (a) The names and address or last known addresses and occupations of each such person conducting such an investigation;
- (b) The date or dates on which said investigation was conducted;
- (c) The name and addresses or last known addresses of all persons interviewed; and
- (d) The name and address or last known address of all persons from whom statements were obtained, and as to each statement, state the date of the statement, whether the statement was written or recorded, and the name and address of each person presently in possession of each statement or copy thereof.

**ANSWER:**

23. State whether any policy or policies of insurance (including any umbrellas or excess policies) exist which may provide coverage to you for any liability which may arise as a result of the incident referred to in Plaintiff's Petition and, if so, for each such policy, state the following:

- (a) The name and address of the insurer;
- (b) The policy number;
- (c) The amount of liability insurance coverage afforded by each such policy;
- (d) The name and address of each and every named insured under such policy; and
- (e) Whether any such insurer is defending you in this matter under a reservation of rights.

**ANSWER:**

24. State whether you or anyone acting on your behalf has or had access to any statements in any form from any person of whom you are aware, or of whom those acting on your behalf are aware, who claims, to have knowledge of the occurrence described in Plaintiff's Petition and, if so, state:

- (a) The name and address of each person from whom any such statement was obtained;
- (b) The date on which each such statement was taken;
- (c) The name and address of the person who took each such statement;
- (d) The name and address of the person or persons who have custody or access to each statement; and
- (e) Whether each such statement was written or oral, and how such statement was recorded.

**ANSWER:**

25. State the names, addresses and telephone numbers of all persons who have followed or in any way conducted surveillance of Plaintiff since the time of the incident referred to in Plaintiff's Petition. For each person:

- (a) State under whose direction such person was acting;
- (b) Whether the person made a report and, if so, the current location of such report;  
and
- (c) The location where such surveillance took place;



- (d) The amount paid by Defendant or its attorneys or insurers to any person referred to in this Interrogatory answer.

**ANSWER:**

26. Do you contest that Plaintiff did or failed to do anything that caused or contributed to cause Plaintiff's damage as alleged in this lawsuit? If so, please describe fully, and not by way of conclusions, how Plaintiff caused or contributed to cause Plaintiff's damages.

**ANSWER:**

27. State whether you were afflicted with or suffering from any medical condition, including any illness, injury, ailment, infirmity, impairment, or disability immediately before or during the alleged incident?

**ANSWER:**

28. Had you ingested any prescription or non-prescription drug, or ingested any alcohol, within twenty-four (24) hours prior to the incident? If so, state the time of ingestion, the specific substance ingested, and the name, address, and phone number of any witness of such ingestion.

**ANSWER:**

29. Did you do anything to cause or to contribute to cause the accident referred to in Plaintiff's Petition?

**ANSWER:**

30. Was there any mechanical condition or defect of the vehicle you were driving that you contend caused or contributed to cause this alleged accident?

**ANSWER:**

31. What was your place of departure, and intended destination, at the time of the accident?

**ANSWER:**

32. State the name and address of who repaired your vehicle involved in the accident referred to in the Petition, how much the repairs were (in dollars), and what repairs were done?

**ANSWER:**

33. Have you ever had your license suspended or revoked? If so, please state the reason for such revocation, the state where this occurred and the length of time it was revoked or suspended.

**ANSWER:**

34. How fast were you traveling immediately prior to the accident?

**ANSWER:**

35. Describe specifically any statements made by Plaintiff that you have knowledge of, after the accident at issue, relating to the accident or Plaintiff's physical condition. Also state the name and address of any witnesses to such statement.

**ANSWER:**

36. Were you wearing glasses, sunglasses, or contact lenses at the time of the accident?

**ANSWER:**

37. Have you ever been prescribed any visual assistive device, including, but not limited to those referred to in the preceding Interrogatory?

**ANSWER:**

38. Were you en route in the course and scope of your employment at the time of the accident?

**ANSWER:**

39. Explain the reason for, and destination of, your travel at the time of the accident?

**ANSWER:**

40. Did you have an appointment, scheduled event, or scheduled meeting of any sort, within one hour before or after the accident? If so, please state the time of such appointment or meeting, and the name and address of the place that you were at or going to.

**ANSWER:**

41. Please give a specific factual account of how the accident occurred.

**ANSWER:**

42. Please provide any statement of Plaintiff that you, your insurance adjuster, or your attorneys, have obtained from Plaintiff at any time since the accident referred to in Plaintiff's *Petition* occurred. For a definition of "statement", please see Missouri Supreme Court Rule 56.01(b)(3).

**ANSWER:**

43. Do you know of any witness to the accident referred to in Plaintiff's *Petition*? If so, please state the name, address, and telephone number of any such witness.

**ANSWER:**

44. Have you discussed the accident at issue with any person named in your answer to the preceding interrogatory? If so, please state the time of such conversation, and provide the subject matter of that conversation.

**ANSWER:**

45. Identify each non-retained expert witness, including a party, whom you expect to call at trial, who may provide expert witness opinion testimony. For each witness, please state:

- (a) The expert's full name;
- (b) The expert's full address; and
- (c) The expert's field of expertise.

**ANSWER:**

46. Identify each retained expert witness, including a party, whom you expect to call at trial, who may provide expert witness opinion testimony. For each witness, please state:

- (a) The expert's full name;

- (b) The expert's full address;
- (c) The expert's occupation;
- (d) The expert's place of employment;
- (e) The expert's qualifications to give an opinion;
- (f) The general nature and subject matter on which the expert is expected to testify;
- (g) The expert's hourly deposition fee; and
- (h) Please attach a copy of the expert's Curriculum Vitae to your answers to these interrogatories.

**ANSWER:**

47. Have you ever been involved in a non-personal injury lawsuit? If so, please describe the type of lawsuit, the full name of all parties involved, the date of such lawsuit, and the county and state where such lawsuit was filed.

**ANSWER:**

48. Have you ever been a witness in a criminal or civil case? If so, please describe the type of case, and why you were called to testify.

**ANSWER:**

49. What is the current location of the vehicle you were driving at the time of the accident?

**ANSWER:**

50. What was the time of the accident?

**ANSWER:**

51. Were you on a cell phone at the time of the accident, or within the thirty (30) minutes prior to or after the time of the accident?

**ANSWER:**

52. If your answer to Interrogatory number 51 is “Yes”, who is your cell phone provider?

**ANSWER:**

53. If your answer to Interrogatory number 51 is “Yes”, who were you contacting?

**ANSWER:**

54. If your answer to Interrogatory number 51 is “Yes”, how long were you on the phone? In conjunction with your answer, please provide a copy of the bill showing calls made and received which are responsive to Interrogatory number 51.

**ANSWER:**

55. Please state if the vehicle you were operating or riding in at the time of the accident is equipped with “On Star” or another in-vehicle security, communications, and diagnostics system, including global positioning systems. If so, please state:

- (a) The company providing such service;

- (b) Whether you were contacted by the company following the accident; and
- (c) Whether emergency services (ambulance, police, paramedics) were summoned for you.

**ANSWER:**

O'REILLY, JENSEN & RPESTON, LLC

By \_\_\_\_\_  
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