**IN THE IOWA DISTRICT COURT FOR POLK COUNTY**

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| --- |
| IN RE THE MARRIAGE OF JOHN DOE AND JANE DOE |
| Upon the Petition ofJOHN DOE,Petitioner,And Concerning,JANE DOE,Respondent. | CASE NO. \*\*\*\*\*\*\*\* **INTERROGATORIES****PROPOUNDED UPON****RESPONDENT** |

COMES NOW, Petitioner, John Doe, by and through his attorney of record, Jim Doe, pursuant to Rule 1.509 of the Iowa Rules of Civil Procedure, and propounds the following Interrogatories to Respondent, Jane Doe.

 The Interrogatories are directed to the knowledge of Respondent, his attorney or other representatives. The Interrogatories are continuing in nature and shall be supplemented pursuant to Rules 1.503(4) and 1.508(5) of the Iowa Rules of Civil Procedure.

**INSTRUCTIONS**

**Responses are due within 30 days of the date you were served with these documents.**[[1]](#footnote-1)\* Any objections or privileges the Answering Party may wish to assert should be stated in writing and served by the due date. It is not a valid objection to assert that the information is already available to the Requesting Party.

All terms in these discovery requests are to be construed in their broadest sense. The examples given are not exhaustive as to all possible definitions.

If asked to IDENTIFY A PERSON, give the person’s name, last known residence and business address, telephone numbers, and company affiliation at the date of the transaction referred to.

“PERSON” includes a natural person, firm, association, organization, partnership, business, trust, limited liability company, corporation and public entity.

“DOCUMENT” includes all data, whether on paper or in electronic form, regardless of how it may be stored, produced, or reproduced.

“ASSET” or “PROPERTY” includes ANY interest in REAL or PERSONAL property. REAL PROPERTY means real estate. PERSONAL PROPERTY can include such things as automobiles, furniture, antiques, as well as such things as cash value insurance, securities, bonds, patents and loans or contract rights owed to you. It also includes, but is not limited to, any interest in a pension, profit-sharing, stock option, stock grant, or retirement plan, whether vested or not, as well as bank accounts, credit union accounts, brokerage accounts, stocks, bonds, mutual funds, Employee Savings Plans or any other rights to claim.

When referring to an asset, you are required to give your best estimate as its value at the time of your response. You are also required to list all encumbrances (including but not limited to debts, mortgages, and liens.) against the asset, and provided all particulars to such encumbrances and produce copies of all relevant documents regarding the encumbrances.

“DEBT” includes any obligation (including but not limited to debts paid since the date of separation in divorce and meretricious relationship cases). DEBT also includes all amounts owed to another person or entity and can include change cards, contracts or loans.

“INCOME” includes money from any source, whether wages, self- employments, dividends, interest, capital gains, support, state aid, etc., whether or not taxable. It also includes overtime and bonuses.

“INVESTMENTS” include such things as stocks, bonds options, precious metals or gems, antiques, collectibles or interest in businesses.

“SUPPORT” means any benefit or economic contribution to the living expenses of another person, or from another to you, including but not limited to gifts.

You must furnish all information you have or can reasonably find out, including all information (not privileged) reasonably available to you or your attorney. For example, you should get bank statements from your bank, if reasonable. If you don’t know the answer to a

question, you should state that you do not know the answer. Answers should be complete and straightforward.

If an interrogatory is answered by referring to a document, the document must be attached as an exhibit to the response and referred to in the response. If the document has more than one page, refer to the page and section where the answer can be found. See Civil Rule 33(c).

If any interrogatory cannot be answered completely, answer as much as you can, state the reason you cannot reasonably answer the rest, and state any information you have about the unanswered portion.

These instructions do not constitute legal advice. If you do not understand these questions and do not already have an attorney, you may wish to consult with an attorney before answering the questions.

**As soon as the answering party learns that an answer may be inaccurate or incomplete, that party should supplement the answer.**

**The Answering Party must sign on the last page before submitting the answers.**

Jim Doe AT0000000000

1200 VW

West Des Moines, IA 50266

Telephone: 515.222.1400

Facsimile: 515.222.1408

E-Mail: mark@hawkeyedivorce.com

ATTORNEY FOR PETITIONER

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| --- |
| **CERTIFICATE OF SERVICE** |
| The undersigned certifies that the foregoing instrument was served upon all parties to the above cause or to each of the attorneys of record herein at their respective addresses disclosed on the pleadings on October 18, 2018. |
| By | [ ]  | U.S. Mail | [ ]  | FAX |  |
|  | [ ]  | Hand Delivered | [ ]  | E-Mail |  |
|  | [ ]  | Certified Mail | [ ]  | Other: |  |
| Signature: |  |
|  |  |

Original to:

Respondent and/or Respondent’s Attorney

INTERROGATORY NO. 1. List the following:

1. Your full name;
2. Your date of birth;
3. Your birthplace;
4. Your social security number;
5. Your driver’s license number
6. State/Country that issued your driver’s license;
7. Your current work address;
8. Any other names you have ever used;
9. The date(s) you used each name;
10. The highest grade of education you have completed;
11. Any degree(s) you have;
12. Any professional or trade license(s) you have.

ANSWER:

INTERROGATORY NO. 2. List the following regarding all of your prior marriages:

1. Date of marriage;
2. Date marriage ended;
3. Spouse’s name and current address/phone number;
4. Country/state where decree entered.

ANSWER:

INTERROGATORY NO. 3. In regards to all of your children list the following:

1. Name;
2. Date of Birth;
3. Name and address/phone of other parent.

ANSWER:

INTERROGATORY NO. 4. Have you ever been or do you anticipate being a party to any other legal or administrative proceeding? If yes, state:

1. Name of proceeding;
2. Jurisdiction and court/tribunal;
3. Case number;
4. Brief description.

ANSWER:

INTERROGATORY NO. 5. For anyone who lives with you at your present address (other than children), state:

1. Name;
2. Age;
3. Relationship to you;
4. Gross monthly income.

ANSWER:

INTERROGATORY NO. 6. Do you provide financial support to anyone other than children of your present relationship or the opposing party?. If yes, state:

1. Name(s) of supported person(s);
2. Age(s) of supported person(s);
3. Address(es) of supported person(s);
4. Amount of monthly support;
5. Date(s) support obligation(s) end(s).

ANSWER:

INTERROGATORY NO. 7. Within the last twelve months, have you received financial support from anyone other than the opposing party? If yes, state:

1. Name of person for whom support received;
2. Age of person for whom support received;
3. Relationship of person for whom support received;
4. Amount received;
5. Source of support each month.

ANSWER:

INTERROGATORY NO. 8. Have you served any branch of the military of the United States or any other country? If yes, state:

1. Branch of service;
2. Date(s) of service;
3. Discharge type;
4. Benefits to which you are entitled or will become entitled as a result of your service.

ANSWER:

INTERROGATORY NO. 9. For the last twelve (12) months, state for each:

1. Name and address of employer(s);
2. Date you stared working;
3. Job title(s);
4. Job description;
5. Pay period(s) (weekly, every other week, twice per month, monthly);
6. Rate(s) of pay (including bonuses, overtime, and commissions).

ANSWER:

INTERROGATORY NO. 10. Have you worked any overtime in the last (12) months? If yes, state:

1. Amount of overtime you worked in each of the last 12 months;
2. Your overtime earnings each of the last 12 months;
3. Anticipated availability of overtime work in next 12 months.

ANSWER:

INTERROGATORY NO. 11. Have you missed any time from work in the last twelve (12) months? If yes, state:

1. Amount of time you missed;
2. Reason you missed this time;
3. Amount of lost earnings;
4. Sick/vacation/disability taken.

ANSWER:

INTERROGATORY NO. 12. Do you except any bonuses, raises or promotions during the next? If yes, state which one, the amount and when you expect it:

ANSWER:

INTERROGATORY NO. 13. If you are eligible for a bonus or raise, state:

1. How it is calculated or determined;
2. When it is expected.

ANSWER:

INTERROGATORY NO. 14. Have you received any bonuses or raises from your present employer in the past two (2) years? If yes, state:

1. Date;
2. Bonus or Raise;
3. Amount.

ANSWER:

INTERROGATORY NO. 15. State the following as of the date of separation:

1. Accrued vacation;
2. Accrued sick leave;
3. Accrued comp time.

ANSWER:

INTERROGATORY NO. 16. Summarize your employment benefits, as follows:

1. Life Insurance
	1. Name of Insurer;
	2. Face amount of policy;
	3. Amount of premiums or payments made by you per month;
	4. Beneficiaries for each policy.
2. Hospital, Medical and Dental Insurance
	1. Type of insurance;
	2. Name of insurer;
	3. Dependents covered.
3. Other
	1. Cafeteria plan (amount currently in plan, purposes);
	2. Disability (insurer, amount);
	3. Paid vacation (amount per year);
	4. Paid sick leave (amount per year);
	5. Retirement/pension/deferred compensation (plan name);
	6. Stock options or grants;
	7. Clubs/use of car or computer/discounts.

ANSWER:

INTERROGATORY NO. 17. What do you pay (not your employer’s portion) for medical/dental/vision coverage:

1. Medical
	1. For yourself;
	2. For your spouse;
	3. For each child;
	4. For any other dependents.
2. Dental
	1. For yourself;
	2. For your spouse;
	3. For each child;
	4. For any other dependents.
3. Vision
	1. For yourself;
	2. For your spouse;
	3. For each child;
	4. For any other dependents.

ANSWER:

INTERROGATORY NO. 18. Are you presently retired, otherwise unemployed or receiving social security benefits of any type? If yes, state:

1. Reason for your unemployment or receipt of social security benefits;
2. Date you were last employed;
3. Summarize your efforts to obtain employment;
4. The amount of benefits you receive (including but not limited to pension/retirement, survivor’s benefits, disability, social security, and deferred compensation).

ANSWER:

INTERROGATORY NO. 19. State your employment history for the last years (5 years if left blank), as follows:

1. Each prior employer;
2. Each position;
3. Each salary.

ANSWER:

INTERROGATORY NO. 20. Have you received any income, gifts (over $250), or benefits not identified above, in the past twenty-four (24) months whether or not taxable? If yes, state:

1. Description;
2. Amounts received;
3. How often received.

ANSWER:

INTERROGATORY NO. 21. State your current average monthly expenses in each of the following categories OR attach a completed Financial Affidavit.

1. Housing Expense – Average Monthly
	1. Mortgage or rent payments;
	2. Installment Payments for other mortgages or encumbrances;
	3. Property taxes & insurance (if not in monthly payments);
	4. Other (yard work, assessments, etc.).
2. Utilities Expenses- Average Monthly
	1. Heat (gas & oil);
	2. Electricity;
	3. Water, sewer & garbage;
	4. Telephone;
	5. Internet;
	6. TV cable/satellite.
3. Household Food & Supplies Expenses- Average Monthly (for persons):
	1. Food;
	2. Supplies;
	3. Pets;
	4. Meals eaten out.
4. Children’s Expenses- Average Monthly
	1. Daycare & babysitter;
	2. Children’s clothing & shoes;
	3. Children’s lessons, activities & clubs;
	4. Children’s school expenses (including lunches but not tuition);
	5. Children’s tuition;
	6. Children’s haircuts, allowances, personal expenses.
5. Transportation Expenses- Average Monthly
	1. Vehicle payments or leases;
	2. Vehicle insurance & license;
	3. Vehicle gas, oil & maintenance;
	4. Parking, tolls;
	5. Taxis and public transportation.
6. Health Care Expenses- Average Monthly
	1. Health insurance for yourself;
	2. Health insurance for your children;
	3. Health insurance for anyone else;
	4. Identify;
		1. Uninsured medical expenses;
		2. Uninsured dental expenses;
		3. Uninsured drugs, prosthetics, etc.
7. Personal (Adult) Expenses- Average Monthly
	1. Clothing;
	2. Cleaning;
	3. Cosmetics;
	4. Clubs;
	5. Recreation;
	6. Travel;
	7. Education (including but not limited to tuition);
	8. Books, magazines, newspapers, photos, etc.;
	9. Gifts;
	10. Charitable Contributions and tithing
		1. Identify
	11. Life insurance;
	12. Court-ordered support or maintenance;
		1. For (name[s])
	13. Savings programs (401k, etc.);
	14. Other;
		1. Identify
8. Other

ANSWER:

INTERROGATORY NO. 22. Describe all property in which you or the other party have or had during these time periods:

1. at the time you started living together,
2. at the time of marriage,
3. at the time of separation,
4. today. Check the appropriate box for community property, separate property, or jointly owned property. (If you own interest together with another party, name that party.)

ANSWER:

(a) Property owned when you started living together:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| TYPE | DESCRIPTION | Comm’y | Separate | Joint | VALUE |
| Real Estate: |  |  |  |  |  |
| Furniture, Furnishing, Appliances: |  |  |  |  |  |
| Jewelry, Antiques, Art, Collections: |  |  |  |  |  |
| Vehicles: |  |  |  |  |  |
| Boats, Trailers, Aircraft: |  |  |  |  |  |
| Savings Accounts: |  |  |  |  |  |
| Checking Accounts: |  |  |  |  |  |
| Credit Union, Other Accounts: |  |  |  |  |  |
| Cash: |  |  |  |  |  |
| Tax Refund: |  |  |  |  |  |
| Life Insurance: |  |  |  |  |  |
| Annuities: |  |  |  |  |  |
| Stocks, Bonds, Secured Notes, Mutual Funds, Other Securities: |  |  |  |  |  |
| Retirement and Pension Plans: |  |  |  |  |  |
| Profit Sharing, Annuities, IRAs, Deferred Compensation, Survivors Benefits: |  |  |  |  |  |
| Accounts Receivable and Unsecured Notes: |  |  |  |  |  |
| Business Interests: |  |  |  |  |  |
| Airline Miles: |  |  |  |  |  |
| Patents, Trademarks, Copyrights: |  |  |  |  |  |
| Property held by others: |  |  |  |  |  |
| Other Assets: |  |  |  |  |  |

(b) Property owned in existence at the time of marriage:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| TYPE | DESCRIPTION | Comm’y | Separate | Joint | Value |
| Real Estate: |  |  |  |  |  |
| Furniture, Furnishing, Appliances: |  |  |  |  |  |
| Jewelry, Antiques, Art, Collections: |  |  |  |  |  |
| Vehicles: |  |  |  |  |  |
| Boats, Trailers, Aircraft: |  |  |  |  |  |
| Savings Accounts: |  |  |  |  |  |
| Checking Accounts: |  |  |  |  |  |
| Credit Union, Other Accounts: |  |  |  |  |  |
| Cash: |  |  |  |  |  |
| Tax Refund: |  |  |  |  |  |
| Life Insurance: |  |  |  |  |  |
| Annuities: |  |  |  |  |  |
| Stocks, Bonds, Secured Notes, Mutual Funds, Other Securities: |  |  |  |  |  |
| Retirement and Pension Plans: |  |  |  |  |  |
| Profit Sharing, Annuities, IRAs, Deferred Compensation, Survivors Benefits: |  |  |  |  |  |
| Accounts Receivable and Unsecured Notes: |  |  |  |  |  |
| Business Interests: |  |  |  |  |  |
| Airline Miles: |  |  |  |  |  |
| Patents, Trademarks, Copyrights: |  |  |  |  |  |
| Property held by others: |  |  |  |  |  |
| Other Assets: |  |  |  |  |  |

(c) Property owned at the time of separation:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| TYPE | DESCRIPTION | Comm’y | Separate | Joint | Value |
| Real Estate: |  |  |  |  |  |
| Furniture, Furnishing, Appliances: |  |  |  |  |  |
| Jewelry, Antiques, Art, Collections: |  |  |  |  |  |
| Vehicles: |  |  |  |  |  |
| Boats, Trailers, Aircraft: |  |  |  |  |  |
| Savings Accounts: |  |  |  |  |  |
| Checking Accounts: |  |  |  |  |  |
| Credit Union, Other Accounts: |  |  |  |  |  |
| Cash: |  |  |  |  |  |
| Tax Refund: |  |  |  |  |  |
| Life Insurance: |  |  |  |  |  |
| Annuities: |  |  |  |  |  |
| Stocks, Bonds, Secured Notes, Mutual Funds, Other Securities: |  |  |  |  |  |
| Retirement and Pension Plans: |  |  |  |  |  |
| Profit Sharing, Annuities, IRAs, Deferred Compensation, Survivors Benefits: |  |  |  |  |  |
| Accounts Receivable and Unsecured Notes: |  |  |  |  |  |
| Business Interests: |  |  |  |  |  |
| Airline Miles: |  |  |  |  |  |
| Patents, Trademarks, Copyrights: |  |  |  |  |  |
| Property held by others: |  |  |  |  |  |
| Other Assets: |  |  |  |  |  |

(d) Property owned today:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| TYPE | DESCRIPTION | Comm’y | Separate | Joint | Value |
| Real Estate: |  |  |  |  |  |
| Furniture, Furnishing, Appliances: |  |  |  |  |  |
| Jewelry, Antiques, Art, Collections: |  |  |  |  |  |
| Vehicles: |  |  |  |  |  |
| Boats, Trailers, Aircraft: |  |  |  |  |  |
| Savings Accounts: |  |  |  |  |  |
| Checking Accounts: |  |  |  |  |  |
| Credit Union, Other Accounts: |  |  |  |  |  |
| Cash: |  |  |  |  |  |
| Tax Refund: |  |  |  |  |  |
| Life Insurance: |  |  |  |  |  |
| Annuities: |  |  |  |  |  |
| Stocks, Bonds, Secured Notes, Mutual Funds, Other Securities: |  |  |  |  |  |
| Retirement and Pension Plans: |  |  |  |  |  |
| Profit Sharing, Annuities, IRAs, Deferred Compensation, Survivors Benefits: |  |  |  |  |  |
| Accounts Receivable and Unsecured Notes: |  |  |  |  |  |
| Business Interests: |  |  |  |  |  |
| Airline Miles: |  |  |  |  |  |
| Patents, Trademarks, Copyrights: |  |  |  |  |  |
| Other Assets: |  |  |  |  |  |

INTERROGATORY NO. 23. For any real estate listed in response to Interrogatory 22, state:

1. Address/Description of property;
2. Date acquired;
3. Purchase price;
4. Down payment and source;
5. Current value;
6. Encumbrances (principal amount);
7. Encumbrance holders;
8. Monthly payments;
9. Description of improvements made;
10. Date of each improvements;
11. Coast and source of funds for each improvement.

ANSWER:

INTERROGATORY NO. 24. Do you claim any item listed in your separate property or the separate property of the other party? If yes, state for each item:

1. Description of Separate Property
2. Reason Why It Is Separate Property

ANSWER:

INTERROGATORY NO. 25. In the past 24 months, have there been any appraisals or offers to purchase any item of property listed above? If yes, identify the item and state the amount and source of the appraisal or offer. Attach a copy of each appraisal or offer.

ANSWER:

INTERROGATORY NO. 26. For any disability, retirement, profit sharing, or deferred compensation plans, state:

1. Name of each plan;
2. Type of plan;
3. Name of employer who contributed to each plan (if any);
4. Date your employment commenced with each employer who contributed to plan;
5. Date you separated employment from each employer who contributed to plan;
6. Present value of your interests in each plan;

Name, address, and phone number of administrator.

ANSWER:

INTERROGATORY NO. 27. For any stock purchase rights (including but not limited to stock options, stock grants, etc.), whether or not vested, state:

1. Dates when rights may be exercised;
2. Maximum and minimum number of shares to be purchased;
3. Price per share or basis of computation of price.

ANSWER:

INTERROGATORY NO. 28. Is there any property held by anyone other than you or opposing party in which either of you has any interest? If yes, describe the property.

ANSWER:

INTERROGATORY NO. 29. Have you sold or transferred any property worth over $1,000 in the last year? If yes, state:

1. Description of property;
2. Transferred to;
3. Money received.

ANSWER:

INTERROGATORY NO. 30. Are you a member of any clubs or associations? If yes, state:

1. Name of Club/Association;
2. Date joined;
3. Fees/Dues;
4. Deposits and Interests payable to you upon termination of membership.

ANSWER:

INTERROGATORY NO. 31. Does anyone (including but not limited to family members) owe you or the marital community any money, goods or services? If yes, state:

1. Name and address of obligor;
2. Amount owed;
3. Date obligation incurred;
4. Terms of obligation.

ANSWER:

INTERROGATORY NO. 32. Do you or the martial community have any claims against any other person or company? If yes, state the nature and estimated value of each claim:

ANSWER:

INTERROGATORY NO. 33. In the last two years did you have or did you store anything in a safe or safe deposit box? If yes, state:

1. Location of safe or safe deposit box;
2. Name under which safe deposit box was rented;
3. Date on which any item removed;
4. Description of items removed;
5. Current inventory.

ANSWER:

INTERROGATORY NO. 34. Do you claim the right to be reimbursed by opposing party or the martial community for any expenditure?

ANSWER:

INTERROGATORY NO. 35. Do you claim reimbursement credits for payments made by you on community debts since the date of separation? If yes, identify:

1. The creditor and state the date of the payments;
2. The amount paid;
3. The source of funds used to make the payments;
4. Any amounts you have added to the debt since the separation from opposing party.

ANSWER:

INTERROGATORY NO. 36. Do you claim the opposing party dissipated or wasted any martial or joint assets?

1. Description of each asset;
2. Value of each asset;
3. Basis for you claim that asset was dissipated or wasted.

ANSWER:

INTERROGATORY NO. 37. Have you suffered an injury or loss of any type of which you may or should receive compensation? If yes, state:

1. Date of injury;
2. Person who caused injury;
3. Nature of injury;
4. Has a claim been filed;
5. With whom?;
6. Claim number;
7. Court name and case number;
8. Amount you believe you should receive.

ANSWER:

INTERROGATORY NO. 38. List all of your debts for the following time periods:

1. At the time you started living together;
2. At the time of marriage;
3. At the time of separation;
4. At present.

Check the appropriate box for community debt, separate debt, or joint debt. If you owe a debt with another party, name that party.

ANSWER:

(a) Debt at the time you started living together:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| CATEGORY | DESCRIPTION | ACCOUNT NUMBER | Comm’y | Separate | Joint | AMOUNT OWED |
| Student Loans: |  |  |  |  |  | $ |
| Credit Loans: |  |  |  |  |  | $ |
| Secured Loans: |  |  |  |  |  | $ |
| Unsecured Loans: |  |  |  |  |  | $ |
| Judgements: |  |  |  |  |  | $ |
| Taxes: |  |  |  |  |  | $ |
| Support Arrears: |  |  |  |  |  | $ |
| Other Debts: |  |  |  |  |  | $ |

(b) Debt at the time of marriage:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| CATEGORY | DESCRIPTION | ACCOUNT NUMBER | Comm’y | Separate | Joint | AMOUNT OWED |
| Student Loans: |  |  |  |  |  | $ |
| Credit Loans: |  |  |  |  |  | $ |
| Secured Loans: |  |  |  |  |  | $ |
| Unsecured Loans: |  |  |  |  |  | $ |
| Judgements: |  |  |  |  |  | $ |
| Taxes: |  |  |  |  |  | $ |
| Support Arrears: |  |  |  |  |  | $ |
| Other Debts: |  |  |  |  |  | $ |

(c) Debt at the time of separation:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| CATEGORY | DESCRIPTION | ACCOUNT NUMBER | Comm’y | Separate | Joint | AMOUNT OWED |
| Student Loans: |  |  |  |  |  | $ |
| Credit Cards: |  |  |  |  |  | $ |
| Secured Loans: |  |  |  |  |  | $ |
| Unsecured Loans: |  |  |  |  |  | $ |
| Judgements: |  |  |  |  |  | $ |
| Taxes: |  |  |  |  |  | $ |
| Support Arrears: |  |  |  |  |  | $ |
| Other Debts: |  |  |  |  |  | $ |

(d) Debt at present time:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| CATEGORY | DESCRIPTION | ACCOUNT NUMBER | Comm’y | Separate | Joint | AMOUNT OWED |
| Student Loans: |  |  |  |  |  | $ |
| Credit Cards: |  |  |  |  |  | $ |
| Secured Loans: |  |  |  |  |  | $ |
| Unsecured Loans: |  |  |  |  |  | $ |
| Judgements: |  |  |  |  |  | $ |
| Taxes: |  |  |  |  |  | $ |
| Support Arrears: |  |  |  |  |  | $ |
| Other Debts: |  |  |  |  |  | $ |

INTERROGATORY NO. 39. For any debt identified in interrogatories 38(a) and 38(b) that was paid during the time you lived together or during marriage, state:

1. The amount paid;
2. The source of funds for the payment(s).

ANSWER:

INTERROGATORY NO. 40. Do you claim any debt listed is your separate obligation or the separate obligation of the other party? If yes, state for each item:

1. Description of separate obligation;
2. Reason why it is a separate obligation.

ANSWER:

INTERROGATORY NO. 41. For every health care professional (including but not limited to any professional who provided mental health care or counseling) who has treated any of your minor children in the last five years, state:

1. Name of each professional;
2. Address;
3. Telephone number;
4. Name of child seen;
5. Date of each visit;
6. Reason for seeing the child.

ANSWER:

INTERROGATORY NO. 42. Have you taken any controlled substances, including but not limited to prescription drugs in the past twelve (12) months? If yes, state:

1. Name(s) of any controlled substances you used during the past twelve months;
2. Frequency with which you have taken each substance;
3. Date you began to take each substance;
4. Name, address, and telephone number of provider who prescribed the substance(s) and the reason prescribed;
5. Date you last used each substance;
6. Name, address, and telephone number of each pharmacy where you purchased substances.

ANSWER:

INTERROGATORY NO. 43. Have you consumed alcohol at all within the past twelve (12) months? If yes, state:

1. The amount of alcohol you typically drink;
2. What kind of alcohol you typically drink;
3. Your regular pattern of usage, including whether you have been too intoxicated to legally operate a motor vehicle.

ANSWER:

INTERROGATORY NO. 44. Have you ever been arrested, charged with, or convicted of a criminal offense or been investigated in any criminal matter? If yes, state:

1. Name, address and telephone number of the police department/authority who arrested/investigated you;
2. Nature of (alleged) offense;
3. Disposition of case including sentence/discipline imposed;
4. Date of occurrence;
5. Names, addresses and phone numbers of any persons involved in case (for example victim, witnesses, other defendants, attorney’s prosecutors, investigators, etc).

ANSWER:

INTERROGATORY NO. 45. During your relationship with the other party (a) were the police ever contacted concerning you or your family or household, or (b) did the police come to your residence concerning anything that happened in your household? If yes, state:

1. The date(s) the police were called;
2. Why the police were called;
3. Who called the police (name, address and telephone number);
4. Whether a police report was ever filed;
5. Name, addresses.

ANSWER:

INTERROGATORY NO. 46. For each person who has personal knowledge concerning any fact relating to the care of you child(ren) and for each individual named in the preceding interrogatory, state what knowledge he/she has that is relevant to this case:

1. Name, address, and phone number;
2. Relationship of the person to the person to the parties and the child(ren);
3. A summary of the person’s relevant knowledge;

ANSWER:

INTERROGATORY NO. 47. Provide a proposed parenting plan if you have not already done so.

ANSWER:

INTERROGATORY NO. 48. Are you opposed to joint decision making? If yes, state why.

ANSWER:

INTERROGATORY NO. 49. What parenting functions have you performed in the past 24 months?

ANSWER:

INTERROGATORY NO. 50. Do you anticipate any change in your residence or work in the past 24 months that may affect the residential schedule for the children? If so, describe in detail the anticipated change, and how you think it may affect the schedule.

ANSWER:

INTERROGATORY NO. 51. Do you contend the other parent is an unfit parent or has problems that negatively impact his/her parenting abilities? If yes, state:

1. The facts that support your contention;
2. The name, address, phone number of each person who has information to support your contention and the information known to the person.

ANSWER:

INTERROGATORY NO. 52. Do you believe there is a basis for restrictions of any sort on the other parent’s parenting of any minor child? If yes, state:

1. The facts that support your contention;
2. The name, address, phone number of each person who has information known to the person.

ANSWER:

INTERROGATORY NO. 53. Has CPS (or any other agency) in any jurisdiction charged with investigating child abuse or neglect ever been contacted about you, the other parent, or a new spouse or companion of you or the other parent? If yes, state:

1. The facts surrounding agency involvement;
2. Who contacted CPS (if known);
3. Approximate date of the contact;
4. The name(s) and relationship(s) to you of the children that were the subject(s) of the investigation;
5. The outcome of the investigation;
6. The current status of CPS involvement;
7. Which CPS office was involved.

ANSWER:

INTERROGATORY NO. 54. If this is a modification case, has the parenting plan been followed? If yes, state:

1. How;
2. Why.

ANSWER:

INTERROGATORY NO. 55. Do any of your children have any special needs? If yes, state:

1. Name of each child with a special needs;
2. Describe the special needs;
3. Names and addresses of professionals with knowledge of special needs;
4. Expected duration;
5. Current monthly costs for special need;
6. Expected future costs.

ANSWER:

INTERROGATORY NO. 56. Do or will any of your children attend private school? If yes, state:

1. Name of child(ren);
2. Name of private school;
3. Tuition/fees;
4. Financial aid received;
5. Reason why child is attending private school.

ANSWER:

INTERROGATORY NO. 57. Are any of your children in college, university, trade school, or other post-secondary educational institution, or are any child(ren) expected to attend? If yes, state:

1. Name of child(ren);
2. Name, address, and telephone number of college, university, trade school, or other post-secondary educational institution;
3. Degree, certificate, or special skill that will result from education;
4. Year education is expected to be completed;
5. Annual tuition, fees, and other costs (specify);
6. Date(s) of financial aid applications;
7. Financial aid and scholarships received;
8. How have the tuition, fees, and other costs been paid?

ANSWER:

INTERROGATORY NO. 58. Have you ever consulted a mental health professional concerning yourself? If yes, state:

1. Name, address, and telephone number of each professional you saw;
2. Reason(s) seen;
3. Date(s) or timeframe when seen;
4. Result of Treatment.

ANSWER:

INTERROGATORY NO. 59. Have you ever consulted, been treated, or been recommended treatment for any problem relating to drugs, alcohol and/or any mental health condition? If yes, for each recommendation or period of treatment state:

1. Name, address and phone number of the person who recommended treatment;
2. Reason for the recommendation;
3. Date treatment began;
4. Date treatment ended;
5. Diagnosis during treatment;
6. Result of treatment.

ANSWER:

INTERROGATORY NO. 60. Since the date of the last support order in this case, have you had a change in income? If yes, state all reasons why your income has changed.

ANSWER:

INTERROGATORY NO. 61. Since the date of the last support order in this case, have the circumstances of you, the other party, or the child(ren) changed in a manner that is material to this case? If yes, state:

1. Describe the changed circumstances;
2. What was the date the circumstances changed? (If you do not know the date, you should approximate.).

ANSWER:

INTERROGATORY NO. 62. Since the date of the last support order in this case, have the circumstances of you, the other party, or the child(ren) changed in a manner this is material to this case? If yes, state:

1. Name of each person;
2. Date you started living together;
3. Date you stopped living together (if applicable);
4. Employer of each person;
5. Job title of each person;
6. Income of each person;
7. Do you pool resources?;
8. Medical/dental insurance available from each person for you and/or your children.

ANSWER:

INTERROGATORY NO. 63. Are you owed (or have you overpaid) any child support, special expenses (such as uninsured medical or dental expenses or daycare expenses), spousal maintenance or other expenses? If yes, state for each:

1. Amount owed/overpaid;
2. Reason it is owed/overpaid.

ANSWER:

INTERROGATORY NO. 64. Are you responsible for any additional children since the last order was entered? If yes, state:

1. Child(ren)’s name(s);
2. Birthdate(s);
3. Father’s name(s);
4. Mother’s name(s);
5. Support received in your household for this child(ren);
6. Support paid by your household for this child(ren).

ANSWER:

INTERROGATORY NO. 65. For each business in which you have an interest, state:

1. Name of business, including and dba;
2. Description of business;
3. Ownership structure (e.g., partnership, corporation, sole proprietor, etc.);
4. Exact nature of your interest (including percentage or number of shares/units);
5. Date you acquired your interest;
6. Your contributions for which you received you interest (financial and otherwise);
7. Name and address of company accountant;
8. Your percentage share of profits each year;
9. The state where the business is incorporated or registered;
10. All states where the business does business.

ANSWER:

INTERROGATORY NO. 66. Describe the fixed assets used in each of the businesses listed above and the current value of those assets.

ANSWER:

INTERROGATORY NO. 67. Are you an officer or director of any corporation? If yes, state the name of the corporation, the date you acquired the position, and the present term of the position.

ANSWER:

INTERROGATORY NO. 68. Have you solicited or received any offers or inquiries, whether formal or informal, to purchase any of the businesses listed above? If yes, give details, including but not limited to the identity of all persons with knowledge.

ANSWER:

INTERROGATORY NO. 69. Do any businesses listed above have an interest in any patent, trade mark, trade secret, or process? If yes, describe.

ANSWER:

INTERROGATORY NO. 70. State:

1. Name, address, and telephone number of the accountant for the business;
2. Name, address, and telephone number of the custodian of records for the business.

ANSWER:

INTERROGATORY NO. 71. For each investment and loan you made to each business, state:

1. Date(s);
2. Amount(s);
3. Source(s) of funds.

ANSWER:

INTERROGATORY NO. 72. Has there been any kind of valuation or appraisal of the business of your interest in the business? If yes, give details.

ANSWER:

INTERROGATORY NO. 74. Prior to the date of your marriage, did you live with your spouse? If yes, state:

1. Beginning and ending dates for each period when you resided together;
2. Addresses where you resided together (for each period);
3. Arrangements for sharing expenses for each period when you resided together.

ANSWER:

INTERROGATORY NO. 75. Are you currently separated from the opposing party? If yes, state:

1. Date of separation;
2. Reason for separation;
3. Start and end dates of any prior separations.

ANSWER:

INTERROGATORY NO. 76. Were any agreements between you and your spouse made before or during your marriage of after your separation that affect the disposition of assets, debts, or support in this proceeding? If yes, for each agreement state the terms, the date made, whether it was written or oral and attach a copy of the agreement or describe its content.

ANSWER:

INTERROGATORY NO. 77. With respect to any gifts you made in the last 24 months worth more than $250, state:

1. Description of gift;
2. Value;
3. Name and address of recipient.

ANSWER:

INTERROGATORY NO. 78. Have you paid or do you owe any deposit, retainer, or fees to any attorney in regard to this action? If yes, state:

1. Name and address of each attorney;
2. The amount paid;
3. The amount owed;
4. The date(s) services were rendered.

ANSWER:

INTERROGATORY NO. 79. Since the date of the last order, have you filed any case under the Bankruptcy Code? If yes, state:

1. Date and place of filing;
2. Case number;
3. Names of co-petitioner(s);
4. Date and outcome of the final disposition.

ANSWER:

INTERROGATORY NO. 80. Do you have any condition that could impeded your ability to work or care for a child? If yes, state:

1. Description of condition;
2. Prognosis;
3. Treating health care provider name and address.

ANSWER:

INTERROGATORY NO. 81. Do you believe thatyou or the Requesting Party were unable to have a child because of contraceptive/birth control use, sterility, or impotence? If yes, state:

1. Person(s) unable to have a child;
2. Reason(s);
3. Name and address of health care provider(s) with knowledge of sterility/contraceptive.

ANSWER:

INTERROGATORY NO. 82. Have you ever stated at any time to any person that someone else is the father of the subject children? If yes, state:

1. Who made statement;
2. Name and address of each person to whom said;
3. Date of each statement;
4. Name of person said to be the father.

ANSWER:

INTERROGATORY NO. 83. Where were you first advised of the pregnancy, or believed there may be a pregnancy?

ANSWER:

INTERROGATORY NO. 84. Do you believe the Requesting Party to be the parent of one or more of your children? If yes, state:

1. Name of each child;
2. Date of birth for each child;
3. Reasons for you belief;
4. Date of first sexual intercourse with Purported Parent;
5. Date of last sexual intercourse with Purported Parent;
6. Date(s) of intercourse most likely to have resulted in pregnancy(ies).

ANSWER:

INTERROGATORY NO. 85. Did you have sexual intercourse with anyone other than Requesting Party within twelve (12) months prior to the date of birth of any child identified above? If yes, state:

1. Name of each partner;
2. Address and phone number of each partner;
3. First date of sexual intercourse with each partner;
4. Last date of sexual intercourse with each partner.

ANSWER:

INTERROGATORY NO. 86. Could someone other than the Requesting Party be the father of the child(ren) at issue? If yes, state:

1. Name and address of the other possible father;
2. Date(s) the other possible farther had intercourse with the mother;
3. Name and address of all persons who know of the intercourse.

ANSWER:

INTERROGATORY NO. 87. Have you at any time told anyone that you did not know the identity of the subject child’s/children’s father, or that someone other than the Requesting Party was the subject child’s/children’s father? If yes, state:

1. Name of each person to whom you made such statement;
2. Address of each person;
3. When you made the statement;

ANSWER:

INTERROGATORY NO. 88. When did you first advise the Requesting Party that:

1. You were pregnant;
2. Respondent was the father of your child;
3. Respondent should contribute support.

ANSWER:

INTERROGATORY NO. 89. Were you married at the time of your pregnancy with this child or within ten (10) months of the child’s birth? If yes, state:

1. Name of spouse;
2. Address of spouse;
3. Date of Separation;
4. Date of divorce/dissolution.

ANSWER:

INTERROGATORY NO. 90. Who is listed on the child(ren)’s birth certificate for the father?

ANSWER:

INTERROGATORY NO. 91. Have you made any prior attempts to establish paternity of this child(ren)? If yes,

1. Name of other father;
2. Efforts made;
3. Result.

ANSWER:

INTERROGATORY NO. 92. Have you ever stated that you were the father of the subject children (orally or in writing)? If yes, state:

1. Who made the statement;
2. Date of statement;
3. Who heard or read the statemen.

ANSWER:

INTERROGATORY NO. 93. Have the subject children ever lived in the same residence with you? If yes, state when.

ANSWER:

INTERROGATORY NO. 94. Have you provided money for some or all of the costs of pregnancy or birth of the subject children? If yes, state:

1. Date(s);
2. Amount(s);
3. Reason(s).

ANSWER:

INTERROGATORY NO. 95. Have you ever made gifts to the subject children? If yes, state:

1. What did you give?;
2. Date(s);
3. Reason(s).

ANSWER:

INTERROGATORY NO. 96. Have you provided any money for the child or to the child’s biological mother? If yes, state:

1. Date(s) paid;
2. Amount(s) paid;
3. Reason to each payment.

ANSWER:

INTERROGATORY NO. 97. Have you ever paid money to any state for child support for the subject children? If yes, state:

1. Name and address of agency;
2. Date(s);
3. Amount(s);
4. Case or reference number.

ANSWER:

INTERROGATORY NO. 98. After first learning of the pregnancy, did you do anything (before the action) to disestablish yourself as the parent? If yes, state:

1. Steps you took to disestablish yourself;
2. Date(s) when you took these steps;
3. Results of steps taken.

ANSWER:

INTERROGATORY NO. 99. Have you ever visited the child after birth? If yes, state:

1. When;
2. How long was each visit;
3. How frequently did you visit.

ANSWER:

INTERROGATORY NO. 100. Did you sign a paternity affidavit? If yes, state:

1. Date you signed it;
2. Reason you signed it;
3. If you dispute its validity, state the reasons why you dispute its validity;
4. City and State where signed;
5. Do you have a copy? If so, please attach. If no, please state where located.

ANSWER:

INTERROGATORY NO. 101. Have you and the other party ever lived together? If yes, state:

1. Date(s) you lived together, (identify any periods of time during which cohabitation was interrupted or during which you were separated);
2. Address(es) you lived together;
3. Names of persons who know you were living together;
4. Name(s) of all person(s) (if any) to whom you were married when you lived together;
5. Name(s) of all persons (if any) whom you dated while you lived together;
6. Any other address you used for residential purposes during the time you lived together;
7. Any other address you used to receive mail during the time you lived together.

ANSWER:

INTERROGATORY NO. 102. Was your relationship with the other party exclusive?

ANSWER:

INTERROGATORY NO. 103. Did you or the other party ever discuss the possibility of marriage? If yes, state:

1. Approximate date(s) for each discussion;
2. What was said;
3. For each discussion, names of all persons who were present;
4. Names, address, and phone numbers of all persons who knew about the discussions.

ANSWER:

INTERROGATORY NO. 104. Did you or the other party ever purchase or give the other party an engagement ring (or similar symbol of engagement)? If yes, state:

1. If given, to whom was the ring given?;
2. If purchased, who purchases the ring?;
3. Where purchased and purchase price;
4. Source of funds for purchases;
5. Date purchased;
6. Date given;
7. Where is the ring now?

ANSWER:

INTERROGATORY NO. 105. Did you and the other party have any joint accounts? If yes, state:

1. Financial institution;
2. Reason for account;
3. Approximate date established.

ANSWER:

INTERROGATORY NO. 106. Did you and the other party purchase anything together that cost more than $ ($2,000 if not filled in)? If yes, state:

1. Description of item purchased;
2. Purchase date;
3. Purchase price;
4. Summary of any agreement you and the other party had concerning ownership.

ANSWER:

INTERROGATORY NO. 107. Did you jointly hold with the other party any assets or liabilities not identified above, including but not limited to investment accounts, credit accounts, real estate, credit cards, mortgages, leases? If yes, state:

1. Identity of each item;
2. Date the item became held in both names;
3. Value when it became held in both names.

ANSWER:

INTERROGATORY NO. 108. Did you or the other party have a Will or a Power of Attorney? If yes, state:

1. Type of document;
2. For power of attorney, name who held the power?;
3. For your or the other party’s Will, name the beneficiaries.

ANSWER:

INTERROGATORY NO. 109. During the time you resided with the opposing party, did you pool resources or services for joint projects with the opposing party? If yes, state:

1. Purpose for each joint project;
2. State date for each project;
3. End date for each project;
4. Resources/services that were pooled.

ANSWER:

**ANSWERING PARTY TO COMPLETE:**

I certify and declare under penalty of perjury under the laws of the State of Iowa that I have completed the above responses, know the contents thereof, and believe the dame to be true. Except where I have specifically objected, I have provided true, correct, and complete copies or originals of all requested documents in my possession or control and all documents to which I have access.

 The responses and objections comply with the requirements imposed by the Civil Rules and the local rules:

 DATED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CITY WHERE SIGNED:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Answering Party

Subscribed and sworn to by Answering Party before me on this day of , 2017.

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Notary Public

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Lawyer for Answering Party (Bar#\_\_\_\_\_\_\_\_\_)

1. \* If you are the non- petitioning party and these interrogatories are served within ten (10) days from the services of the petition, the responses are due forty (40) days from the date of service of the Petition. [↑](#footnote-ref-1)