County Court	C	ounty, Colorado			
Court Address:					
Plaintiff(s)/Petitioner(s):					
V.					
Defendant(s)/Respondent	t(s):				
	.(0).			JRT USE ONLY	_
Attorney or Party Without	Attorney (Name and Ad	ldress):	Case Number		
Phone Number:	E-mail:				
FAX Number:	Atty. Reg. #:		Division	Courtroom	
PATTERN	INTERROGATORI	ES UNDER C.R.C.	P. 369(g) - B	USINESS	
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The following Pattern Interrogatories are propounded to \_\_\_\_\_\_ (name of Judgment Debtor) pursuant to C.R.C.P. 369(g).

Answer all of the questions and each and every part thereof fully and completely. Your answers must be filed with the Court and a copy mailed to the sender no later than 14 days after you receive them. Use a separate sheet of paper, if necessary. Do not use Post Office boxes for any address provided in your answers unless you request and receive permission from the Court.

1. State the name, business address, home address, business phone, home phone, and date of birth of the person answering these questions, and the relationship to the Business:

Name:		
Home address:		
Business address:		
Home phone:	Business phone:	
Date of Birth:		

2. If the Business is a corporation, list the name, home address, business address, home phone, business phone, and date of birth and the title of each officer, director and shareholder owning 5% or more of the outstanding shares.

Name:	Title:	Date of Birth:
Home address:		
Business address:		
Home phone:	Business phone:	
Name:	Title:	_ Date of Birth:
Home address:		
Business address:		
Home phone:	Business phone:	

3. If the Business is not a corporation, state the form of entity (sole proprietorship, partnership, limited liability company, or otherwise) and list the name, homes address, business address, home phone, business phone, and date of birth and the title of each owner, general or limited partner, or member owning 5% or more of the Business.

Type of entit	ty:				
Name:			Title:	:	Date of Birth:
Home addre	ess:				
Business ad	dress:				
Home phone	e:		Busines	s phone:	
Name:			Title	:	Date of Birth:
Home addre	ess:				
Home phone	e:		Busines	s phone:	
Name:			Title:	:	Date of Birth:
Home addre	ess:				
Home phone	e:		Busines	s phone:	
Provide the	EIN and/or F	ederal Tax Id Num	ber of the Busi	ness.	
			Federal	Tax Id:	
List by yeau cars, truck Business d address of	r, make, mod s, motorcycl luring the las the owner. I	el, purchase price, es, boats, trailers, t four years. If the f the property has	VIN, loan balar and other mo e property is no been transferre	nce, if any, a tor vehicles ot owned b ed to anoth	and current location of any and a s owned, used by or titled in th y the Business, list the name ar ler person or entity, list the nam
List by year cars, truck Business d address of address ar transferee.	r, make, mode s, motorcycle luring the las the owner. I nd telephone	el, purchase price, es, boats, trailers, t four years. If the f the property has number of the t	VIN, Ioan balar and other more property is no been transferre transferee, the	nce, if any, a tor vehicles ot owned b ed to anoth date of tra	s owned, used by or titled in th y the Business, list the name ar er person or entity, list the nam ansfer, and the amount paid b
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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:		
		Account Number (last 4-digits):

7. List any and all real or personal property owned by the Business during the last four years, or in which the Business has an interest, where the purchase price or present value exceeds \$500.00, including a detailed description, purchase price, current value, amount of any loan balance against the property, and the location including the county. If the property has been transferred to another person or entity, list the name, address and telephone number of the transferee, the date of transfer, and the amount paid by transferee.

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:	Lesse	ee's Name:					
	Address:							
	Telephone Number:							
	Lease Payment Amount:	Payment Due Dates:						
	Type of Property:	Lesse	ee's Name:					
	Address:							
	Telephone Number:	Term	of Lease:					
	Lease Payment Amount:	Payment Due Da	tes:					
9.	List every person or entity which owes address and phone number, the amoun 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:	Reason(s) the moneys are owed:						
	Name:	Telephone Number:	Amount Owed:					
	Address:							
	Payment Amount:	Payment Due Dates:						
	Reason(s) the moneys are owed:							
10.	List every person or entity currently u than \$100.00 per month, including the a month, and the billing dates. Name:	address and phone number,						
	Address:	-						
	Amount Billed or Purchased each Month:							
	Name:	Telephon	e Number:					
	Address:							
	Amount Billed or Purchased each Month:							
	Name:	Telephon	e Number:					
	Address:							
	Amount Billed or Purchased each Month:							

### 11. Produce and attach to your answers, copies of the following documents for the last four years:

- a. For corporations, the articles of incorporation, bylaws, and corporate minutes.
- **b.** For partnerships, the partnership agreement.
- c. For limited liability companies, the articles of organization and operating agreement.
- d. For all entities, annual:
  - i. Federal and state tax returns.
  - ii. Profit and loss statements.
  - iii. Balance sheets.
  - iv. Inventory lists.

12. If the Business wishes to propose an arrangement to pay the judgment, state the proposed terms.

## If the Business is no longer in business, answer the following questions:

13. State the date and exact reasons the Business went out of business.

Date: \_\_\_\_\_

Reason(s): \_\_\_\_\_

14. If the Business disposed of any of its assets when it went out of business, describe each item which was disposed of, the name, address and telephone number of the person or entity which took possession of the item, any amounts paid for the item, and the reason for the disposition.

		Amount Paid:	
Name:		Telephone Number:	
Address:			
Description:		Amount Paid:	
Name:		Telephone Number:	
Address:			
Reason for Disposition: _			
15. If the Business has any amount of the loan again	remaining assets, describe each nst that item, if any.	item, including the current value, location	on and
15. If the Business has any amount of the loan again Description:	remaining assets, describe each nst that item, if any.		on and
<b>15. If the Business has any amount of the loan again</b> Description:Location:	remaining assets, describe each nst that item, if any. Current Value:	item, including the current value, location	on and 
15. If the Business has any amount of the loan again Description:         Location:         Description:	remaining assets, describe each nst that item, if any. Current Value:	item, including the current value, locatio	on and
<ul> <li>15. If the Business has any amount of the loan again Description:</li> <li>Location:</li> <li>Description:</li> <li>Location:</li> </ul>	remaining assets, describe each nst that item, if anyCurrent Value:	item, including the current value, locatio	on and 

16. If the Business is in receivership or a trustee has been appointed, provide the name, address and phone number of the receiver or trustee.

Name:	Telephone Number:
Address:	

17. If there are any documents associated with the Business going out of business (e.g., bill of sale, deed in lieu of foreclosure, articles of dissolution), produce and attach them to your answers.

Failure to respond fully, accurately and timely to these interrogatories could result in a citation for contempt of court.

By checking this box, I am acknowledging I am filling in the blanks and not changing anything else on the form.

By checking this box, I am acknowledging that I have made a change to the original content of this form.

# VERIFICATION

### I declare under penalty of perjury under the law of Colorado that the foregoing is true and correct.

Executed on the	day of		.,,	at
(da	ite) (	month)	(year)	(city or other location, and state OR country

(Printed name of Judgment Debtor)

Signature of Judgment Debtor

### CERTIFICATE OF SERVICE BY MAILING (To be performed by Clerk within three days of filing)

I hereby certify that on \_\_\_\_\_(date), I mailed a true and complete copy of the *PATTERN INTERROGATORIES UNDER C.R.C.P. 369(g) - BUSINESS* by placing them in the United States Mail, postage pre-paid to the Defendant at the address listed below.

То: \_\_\_\_\_

Clerk of Court/Deputy Clerk