

County Court _____ County, Colorado Court Address:  Plaintiff(s)/Petitioner(s):  v. Defendant(s)/Respondent(s):	<b>▲ COURT USE ONLY ▲</b>
Attorney or Party Without Attorney (Name and Address):  Phone Number: _____ E-mail: _____ FAX Number: _____ Atty. Reg. #: _____	Case Number:  Division _____ Courtroom _____
<b>PATTERN INTERROGATORIES UNDER C.R.C.P. 369(g) - BUSINESS</b>	

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 10 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:**

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, direction 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.

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: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Home address: \_\_\_\_\_

Business address: \_\_\_\_\_

Home phone: \_\_\_\_\_ Business phone: \_\_\_\_\_

4. Provide the EIN and/or Federal Tax Id Number of the Business.

EIN: \_\_\_\_\_ Federal Tax Id: \_\_\_\_\_

5. List by year, make, model, purchase price, VIN, loan balance, if any, and current location of any and all cars, trucks, motorcycles, boats, trailers, and other motor vehicles owned, used by or titled in the Business during the last four years. If the property is not owned by the Business, list the name and address of the owner. 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.

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ VIN: \_\_\_\_\_

Purchase Date: \_\_\_\_\_ Price: \_\_\_\_\_ Loan Balance, if any: \_\_\_\_\_

Current Location: \_\_\_\_\_

Name of Owner if not you: \_\_\_\_\_

Address of Owner: \_\_\_\_\_

Name of Person Property Transferred to: \_\_\_\_\_

Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ VIN: \_\_\_\_\_

Purchase Date: \_\_\_\_\_ Price: \_\_\_\_\_ Loan Balance, if any: \_\_\_\_\_

Current Location: \_\_\_\_\_

Name of Owner if not you: \_\_\_\_\_

Address of Owner: \_\_\_\_\_

Name of Person Property Transferred to: \_\_\_\_\_

Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

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): \_\_\_\_\_

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.

Description of Property: \_\_\_\_\_

Purchase Date: \_\_\_\_\_ Price: \_\_\_\_\_ Current Value: \_\_\_\_\_

Loan Balance: \_\_\_\_\_ Location (including the County): \_\_\_\_\_

Transfer Date: \_\_\_\_\_ Price Paid: \_\_\_\_\_ Name: \_\_\_\_\_

Address of Purchaser: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Description of Property: \_\_\_\_\_

Purchase Date: \_\_\_\_\_ Price: \_\_\_\_\_ Current Value: \_\_\_\_\_

Loan Balance: \_\_\_\_\_ Location (including the County): \_\_\_\_\_

Transfer Date: \_\_\_\_\_ Price Paid: \_\_\_\_\_ Name: \_\_\_\_\_

Address of Purchaser: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Description of Property: \_\_\_\_\_

Purchase Date: \_\_\_\_\_ Price: \_\_\_\_\_ Current Value: \_\_\_\_\_

Loan Balance: \_\_\_\_\_ Location (including the County): \_\_\_\_\_

Transfer Date: \_\_\_\_\_ Price Paid: \_\_\_\_\_ Name: \_\_\_\_\_

Address of Purchaser: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

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: \_\_\_\_\_ Lessee's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Term of Lease: \_\_\_\_\_

Lease Payment Amount: \_\_\_\_\_ Payment Due Dates: \_\_\_\_\_

Type of Property: \_\_\_\_\_ Lessee's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Term of Lease: \_\_\_\_\_

Lease Payment Amount: \_\_\_\_\_ Payment Due Dates: \_\_\_\_\_

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. List every person or entity currently using the services or products of the Business averaging more than \$100.00 per month, including the address and phone number, the amount billed or purchased each month, and the billing dates.

Name: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Address: \_\_\_\_\_

Amount Billed or Purchased each Month: \_\_\_\_\_ Billing Dates: \_\_\_\_\_

Name: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Address: \_\_\_\_\_

Amount Billed or Purchased each Month: \_\_\_\_\_ Billing Dates: \_\_\_\_\_

Name: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Address: \_\_\_\_\_

Amount Billed or Purchased each Month: \_\_\_\_\_ Billing Dates: \_\_\_\_\_

**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.**

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<p><b>If the Business is not longer in business, answer the following questions:</b></p>
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**13. State the date and exact reasons the Business went out of business.**

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

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

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**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.**

Description: \_\_\_\_\_ Amount Paid: \_\_\_\_\_

Name: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Address: \_\_\_\_\_

Reason for Disposition: \_\_\_\_\_

Description: \_\_\_\_\_ Amount Paid: \_\_\_\_\_

Name: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Address: \_\_\_\_\_

Reason for Disposition: \_\_\_\_\_

**15. If the Business has any remaining assets, describe each item, including the current value, location and amount of the loan against that item, if any.**

Description: \_\_\_\_\_

Location: \_\_\_\_\_ Current Value: \_\_\_\_\_ Loan Balance: \_\_\_\_\_

Description: \_\_\_\_\_

Location: \_\_\_\_\_ Current Value: \_\_\_\_\_ Loan Balance: \_\_\_\_\_

Description: \_\_\_\_\_

Location: \_\_\_\_\_ Current Value: \_\_\_\_\_ Loan Balance: \_\_\_\_\_

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.**

I do hereby affirm under penalty of perjury that I have read each of the above questions and answered them fully and truthfully.

Dated: \_\_\_\_\_

\_\_\_\_\_  
Judgment Debtor

Subscribed and affirmed, or sworn to before me in the County of \_\_\_\_\_, State of \_\_\_\_\_, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

My Commission Expires: \_\_\_\_\_

\_\_\_\_\_  
Notary Public /Deputy Clerk

**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.

To: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Clerk of Court/Deputy Clerk