

IN THE CIRCUIT COURT OF COUNTY, MISSISSIPPI

PLAINTIFF

VS.

CIVIL ACTION NO.

DEFENDANT

**DEFENDANT'S FIRST SET OF INTERROGATORIES
AND REQUEST FOR ADMISSIONS AND REQUEST FOR
PRODUCTION OF DOCUMENTS PROPOUNDED TO PLAINTIFF**

COMES NOW, , Defendant, and propounds this, his/her First Set of Interrogatories and Request for Admissions and Request for Production of Documents Propounded to Plaintiff to be answered in accordance with the Mississippi Rules of Civil Procedure.

1. State the names, addresses, and telephone numbers of any and all attorneys contacted or consulted with by you for purposes of seeking services regarding domestic relation matters arising out of your marriage to .

2. For each attorney identified in Question 1, state the reason for seeking out the advice of said counsel.

3. State the date, time and place when you personally first met Defendant, .

4. State the time periods of any marital separations, i.e. periods of time where you lived separately from , during the course of your marriage.

5. For periods of time listed by you in Question 4 above, please list the circumstances, which violated the marital harmony at that time causing said separation.

6. List in detail including the date and time of every conversation you have had with .

7. State the name and date of any professional counselor (psychological or otherwise) you have seen either independently or with during the course of your marriage.

8. State the name of your employer including the address, phone number, and what position you hold.

9. List the names and addresses of any medical doctors you have seen over the course of your marriage to present.

10. List the names of any professional you have seen for treatment of emotional or physical distress during the last ten years.

11. Identify the number of day(s) work you have missed in the last year due to illness.

12. Identify any female/male person with whom you have spent social time with since the time of your divorce.

13. State the name and address of any financial institutions where you have accounts from which you may deposit withdraw moneys. State the type of account, style of account and the account number of each.

14. List the balances of all the bank accounts in which you have had any interest on , on said accounts, including the account number and the name and address of each bank.

15. List each credit card that you have or have had the ability to use during the year , including the account number of each credit card, the date each credit card was used each time during the year , and what the credit card was used for.

16. State the date, time and location of each incident that you had sexual relations with during the year .

17. Please list any person you intend to call as a witness at the trial of this case. For each person you expect to call as a witness, please state the witnesses name and address.

18. State the name and last known address of any expert witness whom you intend to call at the trial of this cause and for each provide the following:

- a. Qualifications;
- b. The subject matter, which the expert will testify on;
- c. The substance of the facts and opinion to which the expert is expected to testify;
and
- d. The summary of the grounds of each opinion of each of the aforesaid experts.

REQUEST FOR ADMISSIONS

1. Admit that the County Court duly granted a dissolution of the marriage of and on on the grounds of irreconcilable differences.
2. Admit that you petitioned the court for a withdrawal of fault grounds from your original complaint of divorce on , .
3. Admit that prior to the final separation which resulted in the above Judgment of Divorce that there were several periods of time during which the parties. and lived separately.
4. Admit that prior to ever meeting there were periods of marital disharmony between and .
5. Admit that at no time from the entry of the Judgment of Divorce has ever refused or been delinquent in payment of child support.
6. Admit that at no time since the separation has refused or waived visitation with his/her children.
7. Admit that presently each month contributes \$ in child support to his/her children.
8. Admit that provides medical, dental and hospital insurance on the minor children and pays one half of all medical, dental, optical and hospitalization expenses of the minor children not covered by said insurance.

PRODUCTION OF DOCUMENTS

1. Please produce copies of all your check stubs, bank statements and any other information for any account that you had with any financial institution during the year .
2. Please produce copies of all your credit card bills for the year .
3. Please produce a copy of your State and Federal income tax return for the years and , and .
4. Please produce copies of your check stubs from your employment during the year .

Respectfully submitted,

Attorney for

PREPARED BY:

Attorney at Law

CERTIFICATE OF SERVICE

The undersigned does hereby certify that a true and correct copy of the above and foregoing Defendant's First Set of Interrogatories and Request for Admissions and Request for Production of Documents Propounded to Plaintiff was mailed this day by United States Mail, first class postage prepaid to .

This the day of , 20 .
