	".01.1.0		T	
	mall Claims Court ourt Address:	County, Colorado		
	out / taurooo.			
P	LAINTIFF(S):			
Р	hone: Home	Work		
v				
D	EFENDANT(S):			COURT USE ONLY
Α	ddress:		Case Numl	per:
Р	hone: Home	Work	Division	Courtroom
	MOTION AND	ORDER FOR INTERROGATO	RIES – SH	ORT FORM
		MOTION		
Ju	dgment was entered on: (date) _			
		nt By: □Default □After trial		
	, -	. Pursuant to Rule 518(a), C.R.C.P.		•
Ц	Court finds that the judgment del	btor should be required to answer the	e following int	errogatories.
Da	te:			
		Judgme	nt Creditor's Sig	nature
_		ORDER		
	Pursuant to Rule 518(a), at the rook oRDERED:	equest of the judgment creditor <b>or</b> or	n the Court's	review of the above Motion <b>IT</b>
	That the judgment debtor sha	all answer the following questions	and file th	ne answers with the Court
		after service of these interrogatories	upon the jud	Igment debtor, or in lieu there
	of, pay the judgment in full. or		- 1	(1-1-)
Ч	I hat the judgment deptor answe	r the questions and appear in Court a	at	(date) at (time).
TH	IEM WITHIN 14 DAYS TO TH	D COMPLETELY ANSWER ALL (		
	TATION TO BE ISSUED FOR C SULT IN A FINE OR JAIL SEN	E CLERK OF THE COURT, SMA CONTEMPT OF COURT. A FINDING TENCE.	G OF CONTI	EMPT BY THE COURT MAY
RE		CONTEMPT OF COURT. A FINDING TENCE.	G OF CONTI	EMPT BY THE COURT MAY
RE	SULT IN A FINE OR JAIL SEN	CONTEMPT OF COURT. A FINDING TENCE.	g OF CONTI	EMPT BY THE COURT MAY
Da	te:	CONTEMPT OF COURT. A FINDING TENCE.	G OF CONTI	EMPT BY THE COURT MAY
Da	te:  What is your full legal name:	CONTEMPT OF COURT. A FINDING TENCE.  ———————————————————————————————————	G OF CONTI	EMPT BY THE COURT MAY
Da	te:  What is your full legal name:  List any other names you have	INTERROGATORIES	G OF CONTI	EMPT BY THE COURT MAY
Da	te: What is your full legal name: List any other names you have Home address: Home phone number:	INTERROGATORIES  been known by:  Work phone is	ge Magisti	empt by the court may
Da	te:  What is your full legal name: List any other names you have Home address: Home phone number: Date of birth:	INTERROGATORIES  been known by:  Work phone r Social Security Numb	ge Magisti	empt by the court may
Da	te:  What is your full legal name: List any other names you have Home address: Home phone number: Date of birth:	INTERROGATORIES  been known by:  Work phone is	ge Magisti	empt by the court may
Da	te:  What is your full legal name: List any other names you have Home address: Home phone number: Date of birth: Drivers license number: As to your employment, comple	INTERROGATORIES  been known by:  Work phone r Social Security Numb State: sete the following:	ge Magisti	rate
Da	te:  What is your full legal name: List any other names you have Home address: Home phone number: Date of birth: Drivers license number: As to your employment, comple The employer's/company's nar	INTERROGATORIES  been known by:  Social Security Numb State:  ete the following:  me:	ge Magisti	rate
Da	te:  What is your full legal name: List any other names you have Home address: Home phone number: Date of birth: Drivers license number: As to your employment, completing the employer's/company's nare address of employer.	INTERROGATORIES  been known by:  Work phone r Social Security Numb State: ete the following: ete: terms of Court. A FINDING Judg State: work phone r Social Security Numb state: ete the following: ete:	ge Magisti	rate
Da	What is your full legal name: List any other names you have Home address: Home phone number: Date of birth: Drivers license number: As to your employment, comple The employer's/company's nar Address of employer: Phone number:	INTERROGATORIES  been known by:  Social Security Numb State:  ete the following:  me:	ge Magisti	rate

	The days or days of the month on which	ch you are paid	d:		
3.	As to your bank accounts, complete t bank, saving and loan, credit union or which you are allowed to withdraw to	r other financia	l institution holding any fun-	ds which you have deposited	
	Name of Bank, Savings & Loan/Credit Union		Address/Location City/State	Account Number	
	Name of Bank, Savings & Loan/Credit Union		Address/Location City/State	Account Number	
	Name of Bank, Savings & Loan/Credit Union		Address/Location City/State	Account Number	
	Name of Bank, Savings & Loan/Credit Union		Address/Location City/State	Account Number	
4.	State the full and correct address of all real estate you own or have an interest in:				
	Address	City/Coun	ty State		
	Address	City/Coun	ty State		
	Address	City/Coun	ty State		
5.	As to debts owed to you, complete the money and the amount owed to you:  Name  A	ddress City/State	st the name and address of	every person who owes you  \$Amount owed	
				\$	
	Name A	ddress City/State		Amount owed	
	Name A	ddress City/State		\$ Amount owed	
6.	As to insurance coverage, complete the following: List the name and address of any insurance company, including policy numbers with agent's name providing liability coverage.				
	Name of Insurance Company – Name of Agent	Address/L	ocation City/State	Policy Number	
	Name of Insurance Company – Name of Agent	Address/L	ocation City/State	Policy Number	
	Name of Insurance Company – Name of Agent	Address/l	ocation City/State	Policy Number	
	y checking this box, I am acknowledging I am filli y checking this box, I am acknowledging that I ha				
	I declare under penalty of perjury		IFICATION If Colorado that the foregoing	g is true and correct.	
Ξx∈	ecuted on the day of (date) (month)	,, (year)	at(city or other location, and s	tate OR country	
(Pı	rinted name of Judgment Debtor)		Signature of Judgment	Debtor	

Case Name v v.	Case Number:		
AFFIDAVIT O			
I served a copy of the foregoing Interrogatories, on the following:			
Name D	Place Place	Place	
If the person on whom service was made is not the named party.  At the regular place of abode of the person to be served, I who regularly resides at the place of abode. (Identify relationship	by leaving the Notice with a person over the age of 18 year	ving the Notice with a person over the age of 18 y	ears
At the regular place of business of the person to be s bookkeeper, chief clerk, office receptionist/assistant or partner. (0			tary,
By leaving the Notice with a partner, limited partner, bookkeeper or general agent of the partnership. Limited Liabili served. (Circle title of person that was served).			
By leaving the Notice with an officer, manager, receptionist registered agent for service of process, stockholder or principal title of person that was served).			
I am over the age of 18 years, and I am not an interested party in	this matter.	natter.	
I have charged the following fees for my services in this matter:			
Private process server  Sheriff,County Fee \$ Mileage \$	Signature of Process Server	Signature of Process Server	
	Name (Print or type)	Name (Print or type)	
Subscribed and affirmed, or sworn to before me in the County of	of State of	. State of	
this, 20			
My commission expires:	Notary Public	Notary Public	
CERTIFICATE OF SER (To be performed by Clerk v			
I hereby certify that on (date), I FOR INTERROGATORIES – SHORT FORM, by placing it in the the address(es) listed above.	mailed a true and correct copy of the MOTION AND ORDE United States Mail, postage pre-paid to the Defendant(s)	d a true and correct copy of the MOTION AND ORI ed States Mail, postage pre-paid to the Defendant(	DER s) a
Dated:	Clerk of Court/Deputy Clerk	Clerk of Court/Deputy Clerk	_
☐ (If applicable) Plaintiff notified of non-service on (date)	Clerk's Initials	Clerk's Initials	