IN THE CIRCUIT COURT OF JACKSON COUNTY, MISSOURI AT INDEPENDENCE

RICK CULLEN and)	
REBECCA CULLEN,)	
702 SW 15 th , Apt. 4)	
Blue Springs, MO 64105)	
)	
Plaintiffs,)	
)	
v.)	Case No.
)	Div. No.
DELL R. PRIEST,)	
Serve at:)	
1159 N. 1340 East)	
Shelley, ID)	
)	
and)	
)	
EDWARDS BROS., INC.,)	
Serve Registered Agent:)	
George Peterson)	
485 E. St.)	
Idaho Falls, ID)	
)	
Defendants.)	

PLAINTIFFS' OPENING INTERROGATORIES TO DEFENDANT DELL R. PRIEST

COME NOW, the plaintiffs, pursuant to Mo. R. Civ. P. 57.01, and propound the following interrogatories on defendant Dell R. Priest, to be answered separately and fully in writing, under oath, as required by law within forty-five (45) days after receipt. These interrogatories are continuing in nature and the answers shall be supplemented by the defendant at any time in the future as the facts and information discovered hereafter shall have been ascertained. Said supplemental answers shall be served upon counsel for the plaintiff reasonably after such discovery is made.

<u>NAME</u> 1.	State your full name, date of birth and place of birth:			
	Name:			
	Date of Birth:			
	Place of Birth:			
	Operator's/Chauffeur's License Number:			
	Issuing State:			
RESIDENCE				
2.	State your present residence address and the period during which you have resided at said address:			
	Present Address:			
	From to the present date.			
<u>MARRIAGE</u>				
3.	Are you married at the present time? () Yes () No			
	If "Yes", state:			
	(a) Your spouse's first name and maiden name:			
CRIMES OR	IMPRISONMENT			
4.	Have you ever pleaded guilty to or been convicted of a felony or misdemeanor? (This does not include municipal court convictions) () Yes () No			
	If your answer is "Yes", state:			
	(a) The nature of the offense:			
	(b) The date and court:			

<u>AGENCY</u>

5	5.	Were you at the time of the occurrence or occurrences forming the basis of suit performing any job, task or undertaking for any person, firm or corpora other than yourself? () Yes () No				
		If your	your answer is "Yes", state:			
		(a) The name and address of the person, firm or corporation for whom you were performing some job, task, or undertaking:				
		(b)	The nature of the job, task, or undertaking you were performing for such person, firm or corporation:			
		(c)	Whether or not you were at such time employed by or on the payroll of such person, firm or corporation:			
		(d)	Whether or not you were receiving any compensation from such other person, firm or corporation for the performance of the said job, task or undertaking:			
DATE.	AND '	<u>TIME</u>				
ć	5.	State the petition	he date and time of occurrence of the incident mentioned in plaintiff's n:			

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7.	State the exact location of the occurrence mentioned in plaintiff's petition, giving the name of the street or streets, road, alley or highway on which it occurred or the distances from other identifiable landmarks or points of reference:
DISABILITY	
8.	Were you suffering from any physical disability or impairment at the time of the occurrence mentioned in plaintiff's petition? () Yes () No
	If your answer is "Yes", explain:
STATEMENT	<u>rs</u>
9.	Attach a copy of any recital or statement that you have from this party plaintiff, if an individual, whether it be in writing, reduced to writing, steno type, recorded or otherwise. In the case of a court reporter's transcript, plaintiff must advance fifty percent (50%) of the cost of the same.
	Do you have a statement: () Yes () No
	Attached: () Yes () No
10.	Please state what, if anything, plaintiff said to you or any other persons in your presence about the occurrence mentioned in plaintiff's petition concerning how the occurrence happened and what injuries plaintiff suffered:

WITNESSES

11. State the name and present or last known addresses and employment of all persons known to you or reported to you, your agents, attorneys, or other acting on your behalf.

	(a)	To have witnessed the occurrence mentioned in the pleadings:					
	Name	Address and Employment			l Employment		
	(b)	To have been minutes the	•	scene of the o	ccurrence within thirty (30)		
	Name			Address and	l Employment		
	(c)	If any of the indicate:	f any of the above witnesses are an acquaintance or relative, please ndicate:				
PHOTOGRA	APHS						
12.	State whether any photographs were made at the scene of the occurrence, or of any vehicles involved by anyone other than you, your attorney or agent in anticipation or preparation for litigation. () Yes () No						
	If your answer is "Yes", give the following:						
	Date T	Taken	Name of Pho	tographer	Address of Photographer		
<u>ALCOHOL</u>	OR DRU	<u>JGS</u>					
13.	or othe	er drug, medi	cine or pill durin	g the twelve (ype, or any sedative, tranquilizer (12) hours immediately on? () Yes () No		

$\underline{INSURANCE}$

ANSWER:

14.	Do you have any insurance agreements which will indemnify you, in whole, or in part, against any judgment plaintiff may obtain in the instant action? () Yes () No				
	If your answer is "Yes", state:				
	(a)	The name and address of the company or companies issuing such insurance agreements:			
	(b)	The policy number:			
	(c)	The limits of Personal Injury, Property Damage and Medical Payments Coverage on the date of the occurrence mentioned in plaintiff's petition:			
	(d)	Attach a copy of the Declaration Page or Certificate of Coverage of such policy of insurance to your answer to these interrogatories.			
15.		any photographs, videotapes or motion pictures of plaintiff been taken by anyone acting on your behalf? If your answer is "yes," please state for			
	(a) (b) (c)	The date or dates each photograph, videotape or motion picture was taken. The name, address and job capacity of each person taking any such photograph, videotape or motion picture; The location where each photograph, videotape, or motion picture was taken; and			
	(d)	The present custodian(s) of the negatives of photographs and the original videotape or motion picture.			

- 16. As to each and every person whom you expect to call as an expert witness at trial, please state the following:
 - (a) Full name and address, including street, city, state and zip code;
 - (b) Occupation;
 - (c) Place of employment;
 - (d) Qualifications to give an opinion, or if such is available on the expert's curriculum vitae, such curriculum vitae may be attached to these interrogatory answers;
 - (e) The general nature of the subject matter on which the expert is expected to testify; and
 - (f) The expert's hourly deposition fee.

ANSWER:

HENNING & BOUGH, P.C.

By____

Stephen R. Bough, # 46239 R. Denise Henning, #43327 1044 Main, Suite 500 Kansas City, MO 64105 (816) 221-8442 (816) 221-8449 FAX stephenbough@henningbough.com denisehenning@henningbough.com

ATTORNEYS FOR PLAINTIFF

VERIFICATION

STATE OF	_)	
COUNTY OF) ss:)	
deposes and says:	, of lawful age, being first duly sworn of	on his/her oath,
	ant above-named, that he/she has read the above swers thereto are true and correct according	0 0
	Signature	
SUBSCRIBED and SWC, 2005.	ORN to before me, a Notary Public, this	day of
	Notary Public	
My Commission Expires:		