FORM 6 FIRST INTERROGATORIES (MODIFICATION)

IN THE CIRCUIT COURT OF (COUNTY NAME) COUNTY, MISSOURI

In Re The Marriage Of:)	
)	Case No.
	Petitioner,)	
S.S.#)	
)	
vs.)	
)	
)	
	Respondent.)	
S.S.#	Kespondent.)	

<u>'S FIRST INTERROGATORIES</u> (Motion to Modify Child Support/Maintenance or Paternity Action)

COMES NOW the _____ and propounds the following interrogatories, pursuant to Local Court Rule 68.4(b) to be answered fully and in writing and under oath, within thirty (30) days, as required by law.

These interrogatories are of a *continuing nature, requiring you to serve timely supplemental answers* setting forth any information, within the scope of these interrogatories, which may be acquired by you, your attorneys, investigators, agents, or others employed by or acting in your behalf, following the original answers. Such supplemental responses to be filed and served upon the opposing party within fifteen (15) days after the receipt of such information, but no later than two (2) weeks preceding the date of trial.

INSTRUCTIONS

Type your answers to the following interrogatories in the space provided on this form. If the space provided is not sufficient to completely answer each interrogatory, type your answer to said interrogatory and note on the appendix reference to the interrogatory being answered.

1. State your full name, any name by which you have ever been known, your date of birth, social security number and the address of your *present place of residence*.

ANSWER:

- 2. Please state:
- (a) The annual gross salary or income you received as of the date of the last child support order;
- (b) The annual gross salary or income currently received;
- (c) The approximate dates when you last received either a raise in pay and/or bonus from your employer and the amounts of each;

ANSWER:

3. Does anyone other than you assist in paying your current living expenses. If so, state name and relationship to you.

ANSWER:

4. If you contribute to the support of anyone other than the child(ren) herein, state the name and relationship to you of each said person, the amount you contribute each month, and the reason why you contribute to said person's support.

ANSWER:

Name of Attorney - Bar Number

Address

Attorney for Petitioner/Respondent

VERIFICATION OF ANSWERS TO INTERROGATORIES

STATE OF MISSOURI)
) ss
COUNTY OF)

AFFIDAVIT

______, being first duly sworn according to law, deposes and states that he/she has read and understands the foregoing Interrogatories and Answers to those Interrogatories and that the Answers to those Interrogatories and the facts stated therein are true to the best of his/her knowledge and belief.

Petitioner/Respondent

On the _____ day of _____, ____, the above individual personally appeared before me, a Notary Public in and for said County and State, and signed the above Answers to Interrogatories as his/her own free act and deed.

IN TESTIMONY WHEREOF, I have hereunto subscribed my name and affixed my seal, the day and year above written.

My Commission Expires:

Notary Public

CERTIFICATE OF MAILING

I hereby certify that a copy of the above and foregoing Interrogatories and Answers therein was mailed, first class, postage prepaid, on the ____ day of _____, ___, to _____, Attorney at Law,

Name of Attorney - Bar Number

Address

Attorney for Petitioner/Respondent