NO. 2,298

| GREGG R. PARKER, ET AL  | § IN THE 112TH JUDICIAL   |
|---|---|
| VS.   | § DISTRICT COURT OF   |
| REMINGTON ARMS CO., INC., ET AL   | § SUTTON COUNTY, TEXAS  |
| FIRST INTERROGATO   | TON ARMS CO., INC.'S<br>ORIES TO PLAINTIFF,<br>NN PARKER  |
| TO: CAROL ANN PARKER, Plaint<br>ANDERSON, Southers, Gold<br>Street, San Antonio, Tex  | iff, and her attorney, JEFFREY C.<br>berg & Lyons, Inc., 126 Villita<br>as 78205.   |
| Rules of Civil Procedure, the submitted to be answered by you signed and sworn to and shall within thirty (30) days of the are served on your attorney of you are requested to answer a | be served on the undersigned e date these Interrogatories f record. The Interrogatories re as follows:                        |
| <ol> <li>State your name, bi<br/>social security number, and d</li> </ol>   | rth date, present address,<br>river's license number.   |
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| 2. Have you ever been so, please state each such na   | known by any other name? If me or names.  |
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|   | you were born and each address<br>e last five (5) years. If you<br>t address, please state the<br>le, and the town and state. |
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| 4. Are you presently m spouse's given name and the n if any.  | arried? If so, give your ames and ages of your children,  |
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| 5. If you have answered the foregoing Interrogatory in the affirmative, please state whether your spouse and/or children are in good health. If not, please state who is not in good health and the reason for such poor health. |
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| 6. Is anyone living with you at the present time besides your spouse and children? If so, what is the relationship of that person or those persons to you?   |
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| 7. Have you ever been divorced? If so, please state:   |
| (a) The approximate date or dates when such divorce or divorces were obtained;   |
|  |
| (b) Where such divorce or divorces were obtained;  |
|  |
| (c) The present names and addresses of any previous spouses.   |
|  |
| 8. Please list each school or college you have attended, the number of years you attended each such school and/or college, and any degrees or certificates of graduation or completion awarded to you.                           |
|  |
| 9. Please state specifically the nature of the injuries you received in the occurrence made the basis of this lawsuit.   |
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| 10. Have you recovered from such injuries? If not, what complaints do you still have?   |
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| 11. If you have been hospitalized since the date of the occurrence made the basis of this lawsuit, for any reason, please state as to each hospitalization: |
| (a) Name and address of the hospital, clinic, sanitarium, nursing home or other institution.  |
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| (b) Date of admission and date of discharge;  |
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|   |
| <ul><li>(c) The name and address of the physician or<br/>other practitioner of the healing arts who admitted you to<br/>the hospital;</li></ul>             |
|   |
|   |
| (d) The total hospital charges; and   |
|   |
| (e) The reason for admittance.  |
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|           | (a)          | The name and address of each;                  |
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|           |              |  |
|           | (b)          | How many times and when you saw each;          |
|           |              |  |
|           |              |  |
|           |              |  |
|           | (c)          | The date when you last saw each;               |
|           |              |  |
|           |              |  |
|           | (4)          | What such has abarred you are each according   |
|           | (4)          | What each has charged you on each occasion;    |
|           |              |  |
|           |              |  |
|           | (e)          | Each diagnosis; and                            |
|           |              |  |
|           |              |  |
|           |              |  |
|           | (f)          | The reason you saw each.                       |
|           |              |  |
|           |              |  |
| 12        | 1 f y        | ou have at any time prior to the occurrence in |
| question  | recei        | ved medical attention for any injury or illnes |
| orease gr |              | e following information:                       |
| illness;  | (a)          | A full description of each such injury or      |
|           |              |  |
|           |              |  |
|           |              |  |
|           | (b)          | The dates of each injury or illness;           |
|           |              |  |

| (c) The name and address of each physician or other practitioner of the healing arts administering treatment for such injury or illness; and  |
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| (d) The name and address of each hospital, clinic sanitarium, nursing home, or other institution in which you were hospitalized for such injury or illness.   |
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| 14. Have you ever served in any branch of military service? If your answer is in the affirmative, please furnish the following information:   |
| (a) Your final rank at time of discharge or retirement and the branch of service to which you were attached;  |
|   |
| (b) The type of discharge received; and   |
|   |
| (c) If you have ever received any type of service related disability, state the nature or reason for such disability, the percentage of disability assigned, and the dates you were eligible for such disability. |
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| 15. With reference to your work history prior to and at the time of the occurrence in question, please furnish the following information:   |
| (a) The name and address of each employer for whom you have worked (if self-employed so state);   |
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| (b) The years or approximate period of time that<br>you worked for each employer, and the details concerning the<br>reason that each such employment was terminated (if self-<br>employed, state the periods of time that you were self-<br>employed and the details concerning the reason for terminating<br>such employment); |
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|   |
| (c) The name of your immediate supervisor while working for each employer;  |
|   |
| (d) Your salary per hour for each employment and your average weekly wage for each employment (if self-employed, state the total amount of income derived from each period of self-employment and your average weekly income therefrom);  |
|   |
| (e) The nature of your employment for each employer and duties that you performed (if self-employed, the nature of such employment and the duties that you performed); and  |
|   |
| (f) Whether any complaints were made to you regarding the manner in which you performed your job; if so, describe in detail.  |
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| l6. With reference to your work history since the date of the occurrence in question, please furnish the following information:   |
| (a) The name and address of each employer for whom you have worked (if self-employed so state);   |
|   |

| (b) The years or approximate period of time that<br>you have worked for each employer, and the details concerning<br>the reason that each such employment was terminated (if<br>self-employed, state the periods of time that you were self-<br>employed and the details concerning the reason for terminating<br>such employment); |
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|   |
| (c) The name of your immediate supervisor while working for each employer;  |
|   |
| (d) Your salary per hour for each employment and your average weekly wage for each employment (if self-employed, state the total amount of income derived from each period of self-employment and your average weekly income therefrom);  |
|   |
|   |
| (e) The nature of your employment for each employer and duties that you performed (if self-employed, the nature of such employment and the duties that you performed); and  |
|   |
|   |
| (f) Whether any complaints have been made to you<br>regarding the manner in which you performed your job; if so,<br>describe in detail.   |
| <u> </u>  |
|   |
| 17. Have you missed any time from work as a result of the occurrence made the basis of this lawsuit? If so, please state the following:   |
| (a) Now much time you have lost from work and whether there were any deductions from your pay as a result of such loss of time; and   |
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| (b) How much in wages or income, if any, you have lost as a result of the occurrence made the basis of this lawsuit.  |
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| 18. What other expenses and/or monetary losses have you had because of the occurrence made the basis of this lawsuit? Explain each in detail.   |
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| 19. Please set forth verbatim the substance and content of all medical reports received by you or your attorney regarding your physical condition since the occurrence made the basis of this lawsuit; or if you prefer, please attach copies of such reports to your answers to these Interrogatories. |
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| 20. Have you ever been arrested? If so, state the date and place of each arrest, the reason for each arrest, and the final disposition of each.   |
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| 21. Have you ever made any claim for damages or injuries received in any accident or occurrence other than the claim asserted in this lawsuit? If your answer is "yes," then please state the following:  |
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| (a) The date of each accident or occurrence giving rise to the claim;   |
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| (b) The name and address of the party against whom the claim was made;  |
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| (c) A brief description of the manner in which the accident occurred;   |
|   |
| (d) A description of the injuries received or claimed in such accidents or occurrences;   |
| (e) The names and addresses of all doctors examining or treating you for such injuries;   |
| (f) The cause number, style, court, county, and state of each lawsuit filed as a result of such claim; and  |
| (g) The final disposition of each claim.  |
| 22. Please state the names and addresses of any and all persons, including experts, having knowledge of facts relevant to the issues of this lawsuit. |
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| 23. Please state the name and address of each person whom you expect to call as an expert witness at the trial of this cause and state $\underline{\text{in}}$ $\underline{\text{detail}}$ the subject matter by which the expert is expected to testify.   |
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| 24. If you will do so without Motion to Produce, please attach a true and correct copy of any and all reports of the experts mentioned in the preceding Interrogatory, including factual observations and opinions, and all photographs that accompany, are included in, or are referred to in said reports.                                    |
|   |
| 25. Do you have any photographs that are material evidence or that constitute or contain or are reasonably calculated to lead to the discovery of material evidence?  |
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| 26. If your answer to the foregoing Interrogatory is in the affirmative, will you agree, without the necessity of a Motion to Produce, to produce and permit the inspection and copying of all photographs that are material evidence or that constitute or contain or are reasonably calculated to lead to the discovery of material evidence? |
|   |
| 27. In connection with the occurrence made the basis of this lawsuit, state the name and current address of Craig Parker, this Plaintiff's brother.   |
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| 28. Describe in detail your version of the occurrence made the basis of this lawsuit.   |
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29. Have you filed any income tax returns with the Internal Revenue Service for the past five years, and if so, state each year for which you have so filed.

30. If your answer to the foregoing Interrogatory is in the affirmative, will you agree, without the necessity of a Motion to Produce, to produce and permit the inspection and copying of all income tax returns, including W-2 forms and all other forms showing income other than wages, that you have filed for the past five years?

31. Will you agree to supplement your answers to these Interrogatories at such time as later information may be acquired by you or your attorney without the necessity of obtaining an order of the court compelling you to do so?

DATED this  $\frac{94}{2\pi d}$  day of January, 1979.

KLEBERG & WEIL 1200 Corpus Christi National Bank Building Corpus Christi, Texas 78401

Telephone: (512)884-3551

Bv:

J. Robert McKissick

ATTORNEYS FOR DEFENDANT, REMINGTON ARMS CO., INC.

## CERTIFICATE OF SERVICE

I hereby certify that a true and correct copy of the foregoing Interrogatories was served on Plaintiff and on Defendants by depositing same with the United States Postal Service, postage prepaid, United States Certified Mail, Return Receipt Requested, addressed to their attorneys of record, on this the 2nd day of January, 1979.

J. Robert McKissick