

In The Southern Ute Tribal Court
On The Southern Ute Indian Reservation
P.O. Box 737, 149 County Road 517, Ignacio, CO 81137
Court Phone (970) 563-0240 Court Fax (970) 563-9570

_____, *Petitioner/ Plaintiff*) Case No.:
)
Vs.) **Interrogatories**
)
_____, *Respondent/Defendant*)

Pursuant to the Judgment Orders of the Southern Ute Tribal Court you are required to answer the following questions and return the foregoing document to the Court. Filing of this form must be accomplished within twenty-five (25) days from the date of its receipt. Failure to file this form with the Court, or failure to answer any of the questions fully and truthfully may result in the issuance of a **Contempt Of Court** citation with the possibility of subsequent fine assessments.

Please state the following:

1) Full name, street and mailing address:

2) Full name, street and mailing address of your employer (s):

3) The days on which you receive payment from you employer (i.e. biweekly, monthly, 1st and 15th of every month, etc.):

4) Full name, street and mailing address of every bank where you have an account:

5) Any real property you own and the physical address of such property:

6) Full name and address of any person or persons who owes you money as well as the amount of the debt owed to you:

I declare under Penalty of Perjury the information contained within this document is true to the best of my knowledge and belief.

Print Name

Signature/ Date