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Attorneys for Plaintiff
LINA CHARRY, ESQ.

SUPERIOR COURT OF THE STATE OF CALIFORNIA
COUNTY OF SAN DIEGO, CENTRAL DIVISION

ZHALA TAWFIQ, LINA CHARRY, PARIS
KARGAR, 3 Brother TACO SHOP, INC., dba
TRES TAQUERIA,

Plaintiffs,

v.

MISS MIDDLE EAST BEAUTY PAGEANT
USA, INC., a California non-profit
corporation; BESSMON KALASHO, an
individual; JESSICA KALASHO, an
individual; BESSMON KALASHO AND
JESSICA KALASHO, a married couple, dba
"Miss Middle East USA Beauty Pageant";
MIDDLE EASTERN CHAMBER OF
COMMERCE fka SAN DIEGO EAST
COUNTY CHALDEAN AMERICAN
CHAMBER OF COMMERCE, a suspended
California non-profit corporation; ELIE
MALOUF, an individual; STEPHANIE
MALOUF, an individual; DOES 3-10,
INCLUSIVE,

Defendants.

CASE NO. 37-2017-00019692-CU-FR-CTL

Jury Trial Demanded
General Civil Unlimited
Complaint Filed – May 31, 2017
Trial Date – August 10, 2018

PLAINTIFF LINA CHARRY'S
REQUESTS FOR ADMISSIONS TO
BESSMON KALASHO [SET ONE]

I/C Judge: Honorable Timothy B. Taylor

PROPOUNDING PARTY: Plaintiff LINA CHARRY
RESPONDING PARTY: Defendant BESSMON KALASHO
SET: ONE

Pursuant to California Code of Civil Procedure §§ 2033.020, *et seq.*, Plaintiff Lina Charry
hereby demands that Defendant BESSMON KALASHO admit the truth of the following matters.

REQUEST FOR ADMISSIONS ON
BESSMON KALASHO

1 Pursuant to Cal. Code Civ. Proc. § 2033.250, BESSMON KALASHO shall serve a written
2 response admitting the truth of the following matters, under oath, within 30 days after service
3 hereof.

4 DEFINITIONS

5 As used herein, "DEFENDANT" or "YOU" or "YOUR" shall mean Defendant BESSMON
6 KALASHO, an individual.

7 As used herein, "PLAINTIFF" shall mean Plaintiff Lina Charry, an individual.

8 As used herein, "JESSICA" shall mean Defendant JESSICA KALASHO, an individual.

9 As used herein, "CHAMBER" shall mean Defendant MIDDLE EASTERN CHAMBER OF
10 COMMERCE fka SAN DIEGO EAST COUNTY CHALDEAN AMERICAN CHAMBER OF
11 COMMERCE, a California non-profit corporation.

12 As used herein, "PAGEANT INC" shall mean Defendant MISS MIDDLE EAST BEAUTY
13 PAGEANT USA, INC., a California non-profit corporation.

14 As used herein, "PAGEANT" shall mean "Miss Middle East USA Beauty Pageant", a sole
15 proprietorship.

16 As used herein, "COMPLAINT" shall mean the second amended complaint filed by
17 PLAINTIFF in this action on November 3, 2017.

18 As used herein, "PERSON" or "PERSONS" shall mean individuals, corporations,
19 partnerships, groups, associations, businesses, labor organizations or governmental agencies.

20 As used herein, "CONCERNING" shall mean anything that constitutes, contains, embodies,
21 reflects, identifies, states, refers to, deals with, or is in any manner whatsoever pertinent to that
22 subject.

23 As used herein, "COMMUNICATION" or "COMMUNICATIONS" shall mean and refer
24 to any type of oral, written, or electronic statement between two or more persons in which
25 information, facts, statements, conversations, or opinions were exchanged, imparted, or received.
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27 REQUESTS FOR ADMISSION

28 REQUEST FOR PRODUCTION NO. 1:

Admit YOU are an owner of CHAMBER.

REQUEST FOR ADMISSIONS ON
BESSMON KALASHO

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REQUEST FOR PRODUCTION NO. 2:

Admit YOU are an owner of PAGEANT INC.

REQUEST FOR PRODUCTION NO. 3:

Admit YOU are an owner of PAGEANT.

REQUEST FOR PRODUCTION NO. 4:

Admit YOU are an officer of CHAMBER.

REQUEST FOR PRODUCTION NO. 5:

Admit YOU are an officer of PAGEANT.

REQUEST FOR PRODUCTION NO. 6:

Admit YOU are a director of CHAMBER.

REQUEST FOR PRODUCTION NO. 7:

Admit YOU are a director of PAGENT.

REQUEST FOR PRODUCTION NO. 8:

Admit YOU were a founder of CHAMBER.

REQUEST FOR PRODUCTION NO. 9:

Admit YOU were a founder of PAGEANT INC.

REQUEST FOR PRODUCTION NO. 10:

Admit YOU were a founder of PAGEANT.

REQUEST FOR PRODUCTION NO. 11:

Admit YOU did not invest any capital in CHAMBER when YOU formed CHAMBER.

REQUEST FOR PRODUCTION NO. 12:

Admit YOU did not invest any capital in PAGEANT when YOU formed PAGEANT.

REQUEST FOR PRODUCTION NO. 13:

Admit YOU did not create separate bank accounts for CHAMBER.

REQUEST FOR PRODUCTION NO. 14:

Admit YOU did not create separate bank accounts for PAGEANT INC.

REQUEST FOR PRODUCTION NO. 15:

Admit YOU did not create separate bank accounts for PAGEANT.

REQUEST FOR PRODUCTION NO. 16:

Admit YOU had access to all bank accounts for CHAMBER at all times.

REQUEST FOR PRODUCTION NO. 17:

Admit YOU had access to all bank accounts for PAGEANT INC at all times.

1 **REQUEST FOR PRODUCTION NO. 18:**

2 Admit YOU had access to all bank accounts for PAGEANT at all times.

3 **REQUEST FOR PRODUCTION NO. 19:**

4 Admit YOU had insufficient capital to operate CHAMBER at the time it was formed.

5 **REQUEST FOR PRODUCTION NO. 20:**

6 Admit YOU had insufficient capital to operate PAGEANT INC. at the time it was formed.

7 **REQUEST FOR PRODUCTION NO. 21:**

8 Admit YOU had insufficient capital to operate PAGEANT at the time it was formed.

9 **REQUEST FOR PRODUCTION NO. 22:**

10 Admit YOU did not create a capital account for CHAMBER when YOU founded it.

11 **REQUEST FOR PRODUCTION NO. 23:**

12 Admit YOU did not create a capital account for PAGEANT when YOU founded it.

13 **REQUEST FOR PRODUCTION NO. 24:**

14 Admit YOU co-mingled YOUR assets with CHAMBER's assets.

15 **REQUEST FOR PRODUCTION NO. 25:**

16 Admit YOU co-mingled YOUR assets with PAGEANT INC's assets.

17 **REQUEST FOR PRODUCTION NO. 26:**

18 Admit YOU co-mingled YOUR assets with PAGEANT's assets.

19 **REQUEST FOR PRODUCTION NO. 27:**

20 Admit YOU appropriated CHAMBER funds for personal use.

21 **REQUEST FOR PRODUCTION NO. 28:**

22 Admit YOU appropriated PAGEANT INC funds for personal use.

23 **REQUEST FOR PRODUCTION NO. 29:**

24 Admit YOU appropriated PAGEANT funds for personal use.

25 **REQUEST FOR PRODUCTION NO. 30:**

26 Admit YOU deposited personal funds in CHAMBER bank accounts.

27 **REQUEST FOR PRODUCTION NO. 31:**

28 Admit YOU deposited personal funds in PAGEANT INC bank accounts.

REQUEST FOR PRODUCTION NO. 32:

 Admit YOU deposited personal funds in PAGEANT bank accounts.

REQUEST FOR PRODUCTION NO. 33:

 Admit YOU never held annual meetings of shareholders for CHAMBER.

1 **REQUEST FOR PRODUCTION NO. 34:**

2 Admit YOU never held annual meetings of shareholders for PAGEANT

3 **REQUEST FOR PRODUCTION NO. 35:**

4 Admit YOU never held annual meetings of directors for CHAMBER.

5 **REQUEST FOR PRODUCTION NO. 36:**

6 Admit YOU never held annual meetings of directors for PAGEANT.

7 **REQUEST FOR PRODUCTION NO. 37:**

8 Admit YOU do not have minutes from any corporate meeting.

9 **REQUEST FOR PRODUCTION NO. 38:**

10 Admit YOU operated a Facebook account for an individual commonly known as "Ben
George" at the website www.facebook.com/ben.george.967.

11 **REQUEST FOR PRODUCTION NO. 39:**

12 Admit YOU operated a Facebook account for an individual commonly known as "Melissa
Pierson" at the website <http://www.facebook.com/profile.php?id=100009491748798>.

13 **REQUEST FOR PRODUCTION NO. 40:**

14 Admit YOU operated a Facebook account for an individual commonly known as "Robert
Forbes" at the website <http://www.facebook.com/robert.singer.9210>.

15 **REQUEST FOR PRODUCTION NO. 41:**

16 Admit YOU operated an Instagram account commonly known as "zhala_tawfiq_fanpage".

17 **REQUEST FOR PRODUCTION NO. 42:**

18 Admit YOU operated a Facebook account for an individual commonly known as "Robert
19 Singer".

20 **REQUEST FOR PRODUCTION NO. 43:**

21 Admit YOU operated an Instagram account commonly known as "Sam_Yousif1977".

22 **REQUEST FOR PRODUCTION NO. 44:**

23 Admit YOU have had legal disputes with PLAINTIFF dating back to 2014.

24 **REQUEST FOR PRODUCTION NO. 45:**

25 Admit in or about June 4, 2015, YOU used social media to launch an online poll inquiring
26 who was the best attorney in San Diego (hereinafter referred to as "Attorney ranking poll" and/or
"YOUR poll").

27 **REQUEST FOR PRODUCTION NO. 46:**

28 Admit in or about June 4, 2015, YOU posted on social media accounts YOU control that
YOUR poll results showed PLAINTIFF was voted "the worst Attorney in San Diego."

REQUEST FOR ADMISSIONS ON
BESSMON KALASHO

1 **REQUEST FOR PRODUCTION NO. 47:**

2 Admit in or about June 4, 2015, YOU posted on social media accounts YOU control that
3 PLAINTIFF "scored the worst in [honesty, service and results]" in YOUR poll.

4 **REQUEST FOR PRODUCTION NO. 48:**

5 Admit in or about June 4, 2015, YOU had more than 5,772 followers on social media
6 accounts YOU control.

7 **REQUEST FOR PRODUCTION NO. 49:**

8 Admit in or about June 4, 2015, YOUR board members shared YOUR poll in order to
9 disseminate its contents to the public at large.

10 **REQUEST FOR PRODUCTION NO. 50:**

11 Admit in or about June 4, 2015, YOUR social media accounts YOU control were not
12 private.

13 **REQUEST FOR PRODUCTION NO. 51:**

14 Admit all of YOUR posts on social media accounts YOU control regarding PLAINTIFF
15 were false.

16 **REQUEST FOR PRODUCTION NO. 52:**

17 Admit YOU knew at the time YOU made the posts that all of YOUR posts on social media
18 accounts regarding PLAINTIFF were false.

19 **REQUEST FOR PRODUCTION NO. 53:**

20 Admit YOU posted false information on YOUR social media accounts about PLAINTIFF for
21 the purpose of causing harm to PLAINTIFF.

22 **REQUEST FOR PRODUCTION NO. 54:**

23 Admit YOU posted false information on YOUR social media accounts about PLAINTIFF for
24 the purpose of causing emotional distress to PLAINTIFF.

25 **REQUEST FOR PRODUCTION NO. 55:**

26 Admit YOU posted false information regarding PLAINTIFF on YOUR social media
27 accounts for the purpose of retaliation against PLAINTIFF for prior disputes between PLAINTIFF
28 and YOU.

REQUEST FOR PRODUCTION NO. 56:

 Admit YOU engaged in fraudulent business practices by posting false information on
 YOUR social media accounts for the purpose of harming PLAINTIFF's personal reputation.

1 **REQUEST FOR PRODUCTION NO. 57:**

2 Admit YOU engaged in fraudulent business practices by posting false information on YOUR
3 social media accounts for the purpose of harming PLAINTIFF's business.

4 **REQUEST FOR PRODUCTION NO. 58:**

5 Admit YOU used false information on social media accounts YOU control to harm
6 PLAINTIFF's reputation for the purpose of harming PLAINTIFF'S personal reputation.

7 **REQUEST FOR PRODUCTION NO. 59:**

8 Admit YOU used false information on social media accounts YOU control to harm
9 PLAINTIFF's reputation for the purpose of harming PLAINTIFF'S business.

10 **REQUEST FOR PRODUCTION NO. 60:**

11 Admit YOU published false information on social media accounts YOU control to inflict
12 severe emotional distress on PLAINTIFF.

13 **REQUEST FOR PRODUCTION NO. 61:**

14 Admit YOU published false information on social media accounts YOU control with the
15 intent to cause harm to PLAINTIFF.

16 **REQUEST FOR PRODUCTION NO. 62:**

17 Admit that in publishing false information on social media accounts YOU control, YOU
18 acted with malice towards PLAINTIFF.

19 **REQUEST FOR PRODUCTION NO. 63:**

20 Admit YOU intentionally created and published a fabricated poll on YOUR social media
21 accounts.

22 **REQUEST FOR PRODUCTION NO. 64:**

23 Admit YOU falsely announced that PLAINTIFF was voted as the "worst attorney in the
24 County."

25 **REQUEST FOR PRODUCTION NO. 65:**

26 Admit YOU used fake Internet profiles under YOUR control to make false claims that
27 PLAINTIFF performed sexual acts in public.

28 **REQUEST FOR PRODUCTION NO. 66:**

 Admit the statements published on YOUR social media accounts regarding PLAINTIFF
 were made with the intent to harm PLAINTIFF's personal reputation.

REQUEST FOR PRODUCTION NO. 67:

 Admit the statements published on YOUR social media accounts regarding PLAINTIFF
 were made with the intent to harm PLAINTIFF's business reputation.

REQUEST FOR ADMISSIONS ON
BESSMON KALASHO

1 **REQUEST FOR PRODUCTION NO. 68:**

2 Admit YOU posted a comment on YOUR Facebook page from a person that does not exist,
3 "Robert Singer," stating: "I can tell you who the worst [attorney in San Diego] is, Lina Charry."

4 **REQUEST FOR PRODUCTION NO. 69:**

5 Admit YOU posted a comment on YOUR Facebook page from a person that does not exist,
6 "Melissa Pierson," stating: "When she wasn't failing her exams, she was sleeping with the guys!"

7 **REQUEST FOR PRODUCTION NO. 70:**

8 Admit that two minutes after YOU posted a comment on YOUR Facebook page from a
9 person that does not exist, "Melissa Pierson," stating: "When she wasn't failing her exams, she was
10 sleeping with the guys!" YOU changed the word "she" to "Lina Charry".

11 **REQUEST FOR PRODUCTION NO. 71:**

12 Admit YOU changed the word "she" to "Lina Charry" in the post YOU published on
13 YOUR Facebook page from a person that does not exist, "Melissa Pierson," so that the public
14 would be aware that the post was about PLAINTIFF.

15 **REQUEST FOR PRODUCTION NO. 72:**

16 Admit YOU posted a comment on YOUR Facebook page from a person that does not exist,
17 "Melissa Pierson," stating: "When Lina Charry wasn't failing her exams, she was sleeping with the
18 guys!" to refer to PLAINTIFF taking the California Bar Exam.

19 **REQUEST FOR PRODUCTION NO. 73:**

20 Admit YOU do not know whether or not PLAINTIFF has ever failed the California Bar
21 Exam.

22 **REQUEST FOR PRODUCTION NO. 74:**

23 Admit YOU did not attempt to determine whether or not PLAINTIFF had ever failed the
24 California Bar Exam prior to posting the comment that she had.

25 **REQUEST FOR PRODUCTION NO. 75:**

26 Admit YOU wanted people to believe PLAINTIFF had failed the California Bar Exam.

27 **REQUEST FOR PRODUCTION NO. 76:**

28 Admit YOU used someone else's photographs to create a person that does not exist,
 "Melissa Pierson".

REQUEST FOR PRODUCTION NO. 77:

 Admit YOU used someone else's photographs to create a person that does not exist,
 "Robert Singer".

REQUEST FOR PRODUCTION NO. 78:

REQUEST FOR ADMISSIONS ON
BESSMON KALASHO

1 Admit YOU used YOUR fake account of "Robert Singer" to post a question on YOUR
2 social media account.

3 **REQUEST FOR PRODUCTION NO. 79:**

4 Admit YOU used YOUR fake account of "Robert Singer" to post the question, "Do you
5 guys know who scored the absolute worst?" on YOUR social media account.

6 **REQUEST FOR PRODUCTION NO. 80:**

7 Admit YOU responded to YOUR own question of "Do you guys know who scored the
8 absolute worst?" by commenting, "Yes, Lina Charry
9 <http://members.calbar.ca.gov/fal/Member/Detail/281508>".

10 **REQUEST FOR PRODUCTION NO. 81:**

11 Admit YOU used the social media account for "Robert Singer" to knowingly spread false
12 and negative information about PLAINTIFF.

13 **REQUEST FOR PRODUCTION NO. 82:**

14 Admit YOU used control of the Instagram account for "Sam_Yousif1977" to knowingly
15 spread false and negative information about PLAINTIFF.

16 **REQUEST FOR PRODUCTION NO. 83:**

17 Admit YOU used the fake account of "Sam_Yousif1977" to post the following question on
18 YOUR social media page, "Who was the worst rated attorney?"

19 **REQUEST FOR PRODUCTION NO. 84:**

20 Admit YOU answered YOUR own question to "Who was the worst rated attorney?" by
21 posting, "Lina Charry was the worst. She works at Law Office of Jennifer Hasso. Her Lic #281508.
22 Lina Charry scored the lowest in all categories. Thanks to hundreds of people who voted ☺"

23 **REQUEST FOR PRODUCTION NO. 85:**

24 Admit that PLAINTIFF did not score the lowest in all categories of YOUR Attorney
25 ranking poll.

26 **REQUEST FOR PRODUCTION NO. 86:**

27 Admit that PLAINTIFF did not score the lowest in any categories of YOUR Attorney
28 ranking poll.

REQUEST FOR PRODUCTION NO. 87:

Admit that PLAINTIFF was not voted on at all in YOUR Attorney ranking poll.

REQUEST FOR PRODUCTION NO. 88:

Admit that there were not hundreds of people who voted in YOUR Attorney ranking poll.

REQUEST FOR PRODUCTION NO. 89:

REQUEST FOR ADMISSIONS ON
BESSMON KALASHO

1 Admit that there were not even 100 people that voted in YOUR Attorney ranking poll.

2 **REQUEST FOR PRODUCTION NO. 90:**

3 Admit YOU used the social media account for "Melissa Pierson" to knowingly spread false
4 and negative information about PLAINTIFF.

5 **REQUEST FOR PRODUCTION NO. 91:**

6 Admit YOU engaged in unfair business practices by posting false information on YOUR
7 social media accounts for the purpose of harming PLAINTIFF's business.

8 **REQUEST FOR PRODUCTION NO. 92:**

9 Admit YOU engaged in unfair business practices by posting false information on YOUR
10 social media accounts for the purpose of harming PLAINTIFF's personal reputation.

11 **REQUEST FOR PRODUCTION NO. 93:**

12 Admit YOU used YOUR fake account "Ben George" to post the following comment on
13 YOUR page, "The funniest thing is that you have this girl commenting. Funny thing is that she
14 slurped it up 2 weeks ago in the parking lot across my Fluxx. LMAO
15 <https://www.facebook.com/profile.php?id=678424822&fref=ts>".

16 **REQUEST FOR PRODUCTION NO. 94:**

17 Admit <https://www.facebook.com/profile.php?id=678424822&fref=ts> is a link that leads to
18 PLAINTIFF'S social media account.

19 **REQUEST FOR PRODUCTION NO. 95:**

20 Admit YOU posted the following comment, "The funniest thing is that you have this girl
21 commenting. Funny thing is that she slurped it up 2 weeks ago in the parking lot across my Fluxx.
22 LMAO <https://www.facebook.com/profile.php?id=678424822&fref=ts>" as retaliation against
23 PLAINTIFF.

24 **REQUEST FOR PRODUCTION NO. 96:**

25 Admit YOUR post of, "The funniest thing is that you have this girl commenting. Funny
26 thing is that she slurped it up 2 weeks ago in the parking lot across my Fluxx. LMAO
27 <https://www.facebook.com/profile.php?id=678424822&fref=ts>" is false.

28 **REQUEST FOR PRODUCTION NO. 97:**

Admit YOU knew that YOUR comment, "The funniest thing is that you have this girl
commenting. Funny thing is that she slurped it up 2 weeks ago in the parking lot across my Fluxx.
LMAO <https://www.facebook.com/profile.php?id=678424822&fref=ts>" was false at the time that
YOU posted it.

REQUEST FOR PRODUCTION NO. 98:

REQUEST FOR ADMISSIONS ON
BESSMON KALASHO

1 Admit that when YOU posted the comment, "The funniest thing is that you have this girl
2 commenting. Funny thing is that she slurped it up 2 weeks ago in the parking lot across my Fluxx.
3 LMAO <https://www.facebook.com/profile.php?id=678424822&fref=ts>" YOU intended to injure
4 Plaintiff's reputation.

5 **REQUEST FOR PRODUCTION NO. 99:**

6 Admit that YOUR posts about PLAINTIFF were intended to reach as much of the public as
7 possible.

8 **REQUEST FOR PRODUCTION NO. 100:**

9 Admit that all statements published on YOUR social media accounts regarding PLAINTIFF
10 were false.

11 **REQUEST FOR PRODUCTION NO. 101:**

12 Admit the poll results YOU posted were entirely false.

13 **REQUEST FOR PRODUCTION NO. 102:**

14 Admit as a result of YOUR conduct, PLAINTIFF has been injured.

15 **REQUEST FOR PRODUCTION NO. 103:**

16 Admit YOU control the social media accounts for CHAMBER.

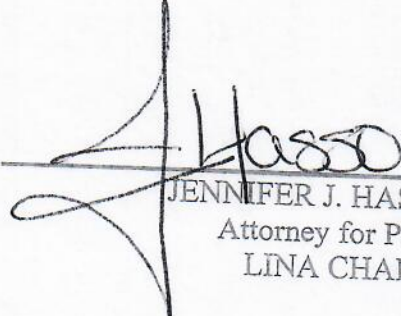
17 **REQUEST FOR PRODUCTION NO. 104:**

18 Admit YOU control the social media accounts for PAGEANT INC.

19 **REQUEST FOR PRODUCTION NO. 105:**

20 Admit YOU control the social media accounts for PAGEANT.

21 Date: May 3, 2018

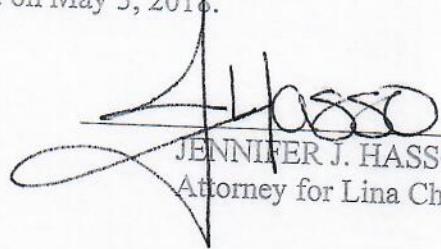
22 
23 JENNIFER J. HASSO, ESQ.
24 Attorney for Plaintiff
25 LINA CHARRY
26
27
28

DECLARATION FOR ADDITIONAL DISCOVERY

I, JENNIFER J. HASSO, declare:

1. I am the attorney for Lina Charry, a party to this action.
2. I am propounding to Defendant BESSMON KALASHO the attached set of requests for admission.
3. This set of requests for admission will cause the total number of requests propounded to the party to whom they are directed to exceed the number of requests permitted by Section 2033.030 of the Code of Civil Procedure.
4. I have previously propounded a total of zero (0) requests for admission to this party.
5. This set of requests for admission contains a total of one hundred and five (105) requests.
6. I am familiar with the issues and the previous discovery conducted by all of the parties in this case.
7. I have personally examined each of the requests in this set of requests for admission.
8. This number of requests for admission is warranted under Section 2033.040 of the Code of Civil Procedure because this case involves four (4) plaintiffs and six (6) defendants including multiple alter egos of those defendants as well as five (5) separate cause of action. The complexity of the identity of the parties and the quantity of issues warrant this number of requests for admissions.
9. None of the requests in this set of requests is being propounded for any improper purpose, such as to harass the party, or the attorney for the party, to whom it is directed, or to cause unnecessary delay or needless increase in the cost of litigation.

I declare under penalty of perjury under the laws of California that the foregoing is true and correct, and that this declaration was executed on May 3, 2018.



JENNIFER J. HASSO, ESQ.
Attorney for Lina Charry

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):

JENNIFER J. HASSO, ESQ. [SBN 110636]
THE LAW OFFICES OF JENNIFER J. HASSO
2765 SECOND AVENUE
SAN DIEGO, CALIFORNIA 92103
TELEPHONE NO.: 619.232.2765
FAX NO. (Optional): 619.232.4485
E-MAIL ADDRESS (Optional): JHASSO@GMAIL.COM
ATTORNEY FOR (Name): PLAINTIFF LINA CHARRY

SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN DIEGO
330 WEST BROADWAY, SAN DIEGO, CALIFORNIA 92103

SHORT TITLE OF CASE:
LINA CHARRY, et al. v. BESSMON KALASHO, et al.

Asking Party: **FORM INTERROGATORIES—GENERAL**
LINA CHARRY

CASE NUMBER:
37-2017-00019692-CU-FR-CTL

Answering Party: BESSMON KALASHO
Set No.: TWO (2)

Sec. 1. Instructions to All Parties

- (a) Interrogatories are written questions prepared by a party to an action that are sent to any other party in the action to be answered under oath. The interrogatories below are form interrogatories approved for use in civil cases.
- (b) For time limitations, requirements for service on other parties, and other details, see Code of Civil Procedure sections 2030.010–2030.410 and the cases construing those sections.
- (c) These form interrogatories do not change existing law relating to interrogatories nor do they affect an answering party's right to assert any privilege or make any objection.

Sec. 2. Instructions to the Asking Party

- (a) These interrogatories are designed for optional use by parties in unlimited civil cases where the amount demanded exceeds \$25,000. Separate interrogatories, *Form Interrogatories—Limited Civil Cases (Economic Litigation)* (form DISC-004), which have no subparts, are designed for use in limited civil cases where the amount demanded is \$25,000 or less; however, those interrogatories may also be used in unlimited civil cases.
- (b) Check the box next to each interrogatory that you want the answering party to answer. Use care in choosing those interrogatories that are applicable to the case.
- (c) You may insert your own definition of **INCIDENT** in Section 4, but only where the action arises from a course of conduct or a series of events occurring over a period of time.
- (d) The interrogatories in section 16.0, *Defendant's Contentions—Personal Injury*, should not be used until the defendant has had a reasonable opportunity to conduct an investigation or discovery of plaintiff's injuries and damages.
- (e) Additional interrogatories may be attached.

Sec. 3. Instructions to the Answering Party

- (a) An answer or other appropriate response must be given to each interrogatory checked by the asking party.
- (b) As a general rule, within 30 days after you are served with these interrogatories, you must serve your responses on all the asking party and serve copies of your responses on all other parties to the action who have appeared. See Code of Civil Procedure sections 2030.260–2030.270 for details.

- (c) Each answer must be as complete and straightforward as the information reasonably available to you, including the information possessed by your attorneys or agents, permits. If an interrogatory cannot be answered completely, answer it to the extent possible.
- (d) If you do not have enough personal knowledge to fully answer an interrogatory, say so, but make a reasonable and good faith effort to get the information by asking other persons or organizations, unless the information is equally available to the asking party.
- (e) Whenever an interrogatory may be answered by referring to a document, the document may be attached as an exhibit to the response and referred to in the response. If the document has more than one page, refer to the page and section where the answer to the interrogatory can be found.
- (f) Whenever an address and telephone number for the same person are requested in more than one interrogatory, you are required to furnish them in answering only the first interrogatory asking for that information.
- (g) If you are asserting a privilege or making an objection to an interrogatory, you must specifically assert the privilege or state the objection in your written response.
- (h) Your answers to these interrogatories must be verified, dated, and signed. You may wish to use the following form at the end of your answers:

I declare under penalty of perjury under the laws of the State of California that the foregoing answers are true and correct.

(DATE)

(SIGNATURE)

Sec. 4. Definitions

Words in **BOLDFACE CAPITALS** in these interrogatories are defined as follows:

(a) (Check one of the following):

- (1) **INCIDENT** includes the circumstances and events surrounding the alleged accident, injury, or other occurrence or breach of contract giving rise to this action or proceeding.

(2) **INCIDENT** means (insert your definition here or on a separate, attached sheet labeled "Sec. 4(a)(2)"): _____

(b) **YOU OR ANYONE ACTING ON YOUR BEHALF** includes you, your agents, your employees, your insurance companies, their agents, their employees, your attorneys, your accountants, your investigators, and anyone else acting on your behalf.

(c) **PERSON** includes a natural person, firm, association, organization, partnership, business, trust, limited liability company, corporation, or public entity.

(d) **DOCUMENT** means a writing, as defined in Evidence Code section 250, and includes the original or a copy of handwriting, typewriting, printing, photostats, photographs, electronically stored information, and every other means of recording upon any tangible thing and form of communicating or representation, including letters, words, pictures, sounds, or symbols, or combinations of them.

(e) **HEALTH CARE PROVIDER** includes any **PERSON** referred to in Code of Civil Procedure section 667.7(e)(3).

(f) **ADDRESS** means the street address, including the city, state, and zip code.

Sec. 5. Interrogatories

The following interrogatories have been approved by the Judicial Council under Code of Civil Procedure section 2033.710:

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- 1.0 Identity of Persons Answering These Interrogatories
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- 3.0 General Background Information—Business Entity
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- 5.0 [Reserved]
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- 7.0 Property Damage
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- 17.0 Responses to Request for Admissions
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- 60.0 [Reserved]
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- 101.0 Economic Litigation [See separate form DISC-004]
- 200.0 Employment Law [See separate form DISC-002]
- Family Law [See separate form FL-145]

1.0 Identity of Persons Answering These Interrogatories

1.1 State the name, **ADDRESS**, telephone number, and relationship to you of each **PERSON** who prepared or assisted in the preparation of the responses to these interrogatories. (Do not identify anyone who simply typed or reproduced the responses.)

2.0 General Background Information—individual

- 2.1 State:
 - (a) your name;
 - (b) every name you have used in the past; and
 - (c) the dates you used each name.
- 2.2 State the date and place of your birth.
- 2.3 At the time of the **INCIDENT**, did you have a driver's license? If so state:
 - (a) the state or other issuing entity;
 - (b) the license number and type;
 - (c) the date of issuance; and
 - (d) all restrictions.
- 2.4 At the time of the **INCIDENT**, did you have any other permit or license for the operation of a motor vehicle? If so, state:
 - (a) the state or other issuing entity;
 - (b) the license number and type;
 - (c) the date of issuance; and
 - (d) all restrictions.
- 2.5 State:
 - (a) your present residence **ADDRESS**;
 - (b) your residence **ADDRESSES** for the past five years; and
 - (c) the dates you lived at each **ADDRESS**.
- 2.6 State:
 - (a) the name, **ADDRESS**, and telephone number of your present employer or place of self-employment; and
 - (b) the name, **ADDRESS**, dates of employment, job title, and nature of work for each employer or self-employment you have had from five years before the **INCIDENT** until today.
- 2.7 State:
 - (a) the name and **ADDRESS** of each school or other academic or vocational institution you have attended, beginning with high school;
 - (b) the dates you attended;
 - (c) the highest grade level you have completed; and
 - (d) the degrees received.
- 2.8 Have you ever been convicted of a felony? If so, for each conviction state:
 - (a) the city and state where you were convicted;
 - (b) the date of conviction;
 - (c) the offense; and
 - (d) the court and case number.
- 2.9 Can you speak English with ease? If not, what language and dialect do you normally use?
- 2.10 Can you read and write English with ease? If not, what language and dialect do you normally use?

- 2.11 At the time of the **INCIDENT** were you acting as an agent or employee for any **PERSON**? If so, state:
- the name, **ADDRESS**, and telephone number of that **PERSON**; and
 - a description of your duties.

- 2.12 At the time of the **INCIDENT** did you or any other person have any physical, emotional, or mental disability or condition that may have contributed to the occurrence of the **INCIDENT**? If so, for each person state:
- the name, **ADDRESS**, and telephone number;
 - the nature of the disability or condition; and
 - the manner in which the disability or condition contributed to the occurrence of the **INCIDENT**.

- 2.13 Within 24 hours before the **INCIDENT** did you or any person involved in the **INCIDENT** use or take any of the following substances: alcoholic beverage, marijuana, or other drug or medication of any kind (prescription or not)? If so, for each person state:
- the name, **ADDRESS**, and telephone number;
 - the nature or description of each substance;
 - the quantity of each substance used or taken;
 - the date and time of day when each substance was used or taken;
 - the **ADDRESS** where each substance was used or taken;
 - the name, **ADDRESS**, and telephone number of each person who was present when each substance was used or taken; and
 - the name, **ADDRESS**, and telephone number of any **HEALTH CARE PROVIDER** who prescribed or furnished the substance and the condition for which it was prescribed or furnished.

3.0 General Background Information—Business Entity

- 3.1 Are you a corporation? If so, state:
- the name stated in the current articles of incorporation;
 - all other names used by the corporation during the past 10 years and the dates each was used;
 - the date and place of incorporation;
 - the **ADDRESS** of the principal place of business; and
 - whether you are qualified to do business in California.
- 3.2 Are you a partnership? If so, state:
- the current partnership name;
 - all other names used by the partnership during the past 10 years and the dates each was used;
 - whether you are a limited partnership and, if so, under the laws of what jurisdiction;
 - the name and **ADDRESS** of each general partner; and
 - the **ADDRESS** of the principal place of business.
- 3.3 Are you a limited liability company? If so, state:
- the name stated in the current articles of organization;
 - all other names used by the company during the past 10 years and the date each was used;
 - the date and place of filing of the articles of organization;
 - the **ADDRESS** of the principal place of business; and
 - whether you are qualified to do business in California.

- 3.4 Are you a joint venture? If so, state:
- the current joint venture name;
 - all other names used by the joint venture during the past 10 years and the dates each was used;
 - the name and **ADDRESS** of each joint venturer; and
 - the **ADDRESS** of the principal place of business.

- 3.5 Are you an unincorporated association? If so, state:
- the current unincorporated association name;
 - all other names used by the unincorporated association during the past 10 years and the dates each was used; and
 - the **ADDRESS** of the principal place of business.

- 3.6 Have you done business under a fictitious name during the past 10 years? If so, for each fictitious name state:
- the name;
 - the dates each was used;
 - the state and county of each fictitious name filing; and
 - the **ADDRESS** of the principal place of business.

- 3.7 Within the past five years has any public entity registered or licensed your business? If so, for each license or registration:
- identify the license or registration;
 - state the name of the public entity; and
 - state the dates of issuance and expiration.

4.0 Insurance

- 4.1 At the time of the **INCIDENT**, was there in effect any policy of insurance through which you were or might be insured in any manner (for example, primary, pro-rata, or excess liability coverage or medical expense coverage) for the damages, claims, or actions that have arisen out of the **INCIDENT**? If so, for each policy state:
- the kind of coverage;
 - the name and **ADDRESS** of the insurance company;
 - the name, **ADDRESS**, and telephone number of each named insured;
 - the policy number;
 - the limits of coverage for each type of coverage contained in the policy;
 - whether any reservation of rights or controversy or coverage dispute exists between you and the insurance company; and
 - the name, **ADDRESS**, and telephone number of the custodian of the policy.
- 4.2 Are you self-insured under any statute for the damages, claims, or actions that have arisen out of the **INCIDENT**? If so, specify the statute.

5.0 [Reserved]

6.0 Physical, Mental, or Emotional Injuries

- 6.1 Do you attribute any physical, mental, or emotional injuries to the **INCIDENT**? (If your answer is "no," do not answer interrogatories 6.2 through 6.7).
- 6.2 Identify each injury you attribute to the **INCIDENT** and the area of your body affected.

6.3 Do you still have any complaints that you attribute to the **INCIDENT**? If so, for each complaint state:

- (a) a description;
- (b) whether the complaint is subsiding, remaining the same, or becoming worse; and
- (c) the frequency and duration.

6.4 Did you receive any consultation or examination (except from expert witnesses covered by Code of Civil Procedure sections 2034.210–2034.310) or treatment from a **HEALTH CARE PROVIDER** for any injury you attribute to the **INCIDENT**? If so, for each **HEALTH CARE PROVIDER** state:

- (a) the name, **ADDRESS**, and telephone number;
- (b) the type of consultation, examination, or treatment provided;
- (c) the dates you received consultation, examination, or treatment; and
- (d) the charges to date.

6.5 Have you taken any medication, prescribed or not, as a result of injuries that you attribute to the **INCIDENT**? If so, for each medication state:

- (a) the name;
- (b) the **PERSON** who prescribed or furnished it;
- (c) the date it was prescribed or furnished;
- (d) the dates you began and stopped taking it; and
- (e) the cost to date.

6.6 Are there any other medical services necessitated by the injuries that you attribute to the **INCIDENT** that were not previously listed (for example, ambulance, nursing, prosthetics)? If so, for each service state:

- (a) the nature;
- (b) the date;
- (c) the cost; and
- (d) the name, **ADDRESS**, and telephone number of each provider.

6.7 Has any **HEALTH CARE PROVIDER** advised that you may require future or additional treatment for any injuries that you attribute to the **INCIDENT**? If so, for each injury state:

- (a) the name and **ADDRESS** of each **HEALTH CARE PROVIDER**;
- (b) the complaints for which the treatment was advised; and
- (c) the nature, duration, and estimated cost of the treatment.

7.0 Property Damage

7.1 Do you attribute any loss of or damage to a vehicle or other property to the **INCIDENT**? If so, for each item of property:

- (a) describe the property;
- (b) describe the nature and location of the damage to the property;

- (c) state the amount of damage you are claiming for each item of property and how the amount was calculated; and
- (d) if the property was sold, state the name, **ADDRESS**, and telephone number of the seller, the date of sale, and the sale price.

7.2 Has a written estimate or evaluation been made for any item of property referred to in your answer to the preceding interrogatory? If so, for each estimate or evaluation state:

- (a) the name, **ADDRESS**, and telephone number of the **PERSON** who prepared it and the date prepared;
- (b) the name, **ADDRESS**, and telephone number of each **PERSON** who has a copy of it; and
- (c) the amount of damage stated.

7.3 Has any item of property referred to in your answer to interrogatory 7.1 been repaired? If so, for each item state:

- (a) the date repaired;
- (b) a description of the repair;
- (c) the repair cost;
- (d) the name, **ADDRESS**, and telephone number of the **PERSON** who repaired it;
- (e) the name, **ADDRESS**, and telephone number of the **PERSON** who paid for the repair.

8.0 Loss of Income or Earning Capacity

8.1 Do you attribute any loss of income or earning capacity to the **INCIDENT**? (If your answer is "no," do not answer interrogatories 8.2 through 8.8).

8.2 State:

- (a) the nature of your work;
- (b) your job title at the time of the **INCIDENT**; and
- (c) the date your employment began.

8.3 State the last date before the **INCIDENT** that you worked for compensation.

8.4 State your monthly income at the time of the **INCIDENT** and how the amount was calculated.

8.5 State the date you returned to work at each place of employment following the **INCIDENT**.

8.6 State the dates you did not work and for which you lost income as a result of the **INCIDENT**.

8.7 State the total income you have lost to date as a result of the **INCIDENT** and how the amount was calculated.

8.8 Will you lose income in the future as a result of the **INCIDENT**? If so, state:

- (a) the facts upon which you base this contention;
- (b) an estimate of the amount;
- (c) an estimate of how long you will be unable to work; and
- (d) how the claim for future income is calculated.

9.0 Other Damages

- 9.1 Are there any other damages that you attribute to the **INCIDENT**? If so, for each item of damage state:
 - (a) the nature;
 - (b) the date it occurred;
 - (c) the amount; and
 - (d) the name, **ADDRESS**, and telephone number of each **PERSON** to whom an obligation was incurred.
- 9.2 Do any **DOCUMENTS** support the existence or amount of any item of damages claimed in interrogatory 9.1? If so, describe each document and state the name, **ADDRESS**, and telephone number of the **PERSON** who has each **DOCUMENT**.

10.0 Medical History

- 10.1 At any time before the **INCIDENT** did you have complaints or injuries that involved the same part of your body claimed to have been injured in the **INCIDENT**? If so, for each state:
 - (a) a description of the complaint or injury;
 - (b) the dates it began and ended; and
 - (c) the name, **ADDRESS**, and telephone number of each **HEALTH CARE PROVIDER** whom you consulted or who examined or treated you.
- 10.2 List all physical, mental, and emotional disabilities you had immediately before the **INCIDENT**. *(You may omit mental or emotional disabilities unless you attribute any mental or emotional injury to the **INCIDENT**.)*
- 10.3 At any time after the **INCIDENT**, did you sustain injuries of the kind for which you are now claiming damages? If so, for each incident giving rise to an injury state:
 - (a) the date and the place it occurred;
 - (b) the name, **ADDRESS**, and telephone number of any other **PERSON** involved;
 - (c) the nature of any injuries you sustained;
 - (d) the name, **ADDRESS**, and telephone number of each **HEALTH CARE PROVIDER** who you consulted or who examined or treated you; and
 - (e) the nature of the treatment and its duration.

11.0 Other Claims and Previous Claims

- 11.1 Except for this action, in the past 10 years have you filed an action or made a written claim or demand for compensation for your personal injuries? If so, for each action, claim, or demand state:
 - (a) the date, time, and place and location (closest street **ADDRESS** or intersection) of the **INCIDENT** giving rise to the action, claim, or demand;
 - (b) the name, **ADDRESS**, and telephone number of each **PERSON** against whom the claim or demand was made or the action filed;

- (c) the court, names of the parties, and case number of any action filed;
- (d) the name, **ADDRESS**, and telephone number of any attorney representing you;
- (e) whether the claim or action has been resolved or is pending; and
- (f) a description of the injury.

- 11.2 In the past 10 years have you made a written claim or demand for workers' compensation benefits? If so, for each claim or demand state:
 - (a) the date, time, and place of the **INCIDENT** giving rise to the claim;
 - (b) the name, **ADDRESS**, and telephone number of your employer at the time of the injury;
 - (c) the name, **ADDRESS**, and telephone number of the workers' compensation insurer and the claim number;
 - (d) the period of time during which you received workers' compensation benefits;
 - (e) a description of the injury;
 - (f) the name, **ADDRESS**, and telephone number of any **HEALTH CARE PROVIDER** who provided services; and
 - (g) the case number at the Workers' Compensation Appeals Board.

12.0 Investigation—General

- 12.1 State the name, **ADDRESS**, and telephone number of each individual:
 - (a) who witnessed the **INCIDENT** or the events occurring immediately before or after the **INCIDENT**;
 - (b) who made any statement at the scene of the **INCIDENT**;
 - (c) who heard any statements made about the **INCIDENT** by any individual at the scene; and
 - (d) who **YOU OR ANYONE ACTING ON YOUR BEHALF** claim has knowledge of the **INCIDENT** (except for expert witnesses covered by Code of Civil Procedure section 2034).
- 12.2 Have **YOU OR ANYONE ACTING ON YOUR BEHALF** interviewed any individual concerning the **INCIDENT**? If so, for each individual state:
 - (a) the name, **ADDRESS**, and telephone number of the individual interviewed;
 - (b) the date of the interview; and
 - (c) the name, **ADDRESS**, and telephone number of the **PERSON** who conducted the interview.
- 12.3 Have **YOU OR ANYONE ACTING ON YOUR BEHALF** obtained a written or recorded statement from any individual concerning the **INCIDENT**? If so, for each statement state:
 - (a) the name, **ADDRESS**, and telephone number of the individual from whom the statement was obtained;
 - (b) the name, **ADDRESS**, and telephone number of the individual who obtained the statement;
 - (c) the date the statement was obtained; and
 - (d) the name, **ADDRESS**, and telephone number of each **PERSON** who has the original statement or a copy.

- 12.4 Do YOU OR ANYONE ACTING ON YOUR BEHALF know of any photographs, films, or videotapes depicting any place, object, or individual concerning the **INCIDENT** or plaintiff's injuries? If so, state:
- the number of photographs or feet of film or videotape;
 - the places, objects, or persons photographed, filmed, or videotaped;
 - the date the photographs, films, or videotapes were taken;
 - the name, **ADDRESS**, and telephone number of the individual taking the photographs, films, or videotapes; and
 - the name, **ADDRESS**, and telephone number of each **PERSON** who has the original or a copy of the photographs, films, or videotapes.

- 12.5 Do YOU OR ANYONE ACTING ON YOUR BEHALF know of any diagram, reproduction, or model of any place or thing (except for items developed by expert witnesses covered by Code of Civil Procedure sections 2034.210–2034.310) concerning the **INCIDENT**? If so, for each item state:
- the type (i.e., diagram, reproduction, or model);
 - the subject matter; and
 - the name, **ADDRESS**, and telephone number of each **PERSON** who has it.

- 12.6 Was a report made by any **PERSON** concerning the **INCIDENT**? If so, state:
- the name, title, identification number, and employer of the **PERSON** who made the report;
 - the date and type of report made;
 - the name, **ADDRESS**, and telephone number of the **PERSON** for whom the report was made; and
 - the name, **ADDRESS**, and telephone number of each **PERSON** who has the original or a copy of the report.

- 12.7 Have YOU OR ANYONE ACTING ON YOUR BEHALF inspected the scene of the **INCIDENT**? If so, for each inspection state:
- the name, **ADDRESS**, and telephone number of the individual making the inspection (except for expert witnesses covered by Code of Civil Procedure sections 2034.210–2034.310); and
 - the date of the inspection.

13.0 Investigation—Surveillance

- 13.1 Have YOU OR ANYONE ACTING ON YOUR BEHALF conducted surveillance of any individual involved in the **INCIDENT** or any party to this action? If so, for each surveillance state:
- the name, **ADDRESS**, and telephone number of the individual or party;
 - the time, date, and place of the surveillance;
 - the name, **ADDRESS**, and telephone number of the individual who conducted the surveillance; and
 - the name, **ADDRESS**, and telephone number of each **PERSON** who has the original or a copy of any surveillance photograph, film, or videotape.

- 13.2 Has a written report been prepared on the surveillance? If so, for each written report state:
- the title;
 - the date;
 - the name, **ADDRESS**, and telephone number of the individual who prepared the report; and
 - the name, **ADDRESS**, and telephone number of each **PERSON** who has the original or a copy.

14.0 Statutory or Regulatory Violations

- 14.1 Do YOU OR ANYONE ACTING ON YOUR BEHALF contend that any **PERSON** involved in the **INCIDENT** violated any statute, ordinance, or regulation and that the violation was a legal (proximate) cause of the **INCIDENT**? If so, identify the name, **ADDRESS**, and telephone number of each **PERSON** and the statute, ordinance, or regulation that was violated.
- 14.2 Was any **PERSON** cited or charged with a violation of any statute, ordinance, or regulation as a result of this **INCIDENT**? If so, for each **PERSON** state:
- the name, **ADDRESS**, and telephone number of the **PERSON**;
 - the statute, ordinance, or regulation allegedly violated;
 - whether the **PERSON** entered a plea in response to the citation or charge and, if so, the plea entered; and
 - the name and **ADDRESS** of the court or administrative agency, names of the parties, and case number.

15.0 Denials and Special or Affirmative Defenses

- 15.1 Identify each denial of a material allegation and each special or affirmative defense in your pleadings and for each:
- state all facts upon which you base the denial or special or affirmative defense;
 - state the names, **ADDRESSES**, and telephone numbers of all **PERSONS** who have knowledge of those facts; and
 - identify all **DOCUMENTS** and other tangible things that support your denial or special or affirmative defense, and state the name, **ADDRESS**, and telephone number of the **PERSON** who has each **DOCUMENT**.

16.0 Defendant's Contentions—Personal Injury

- 16.1 Do you contend that any **PERSON**, other than you or plaintiff, contributed to the occurrence of the **INCIDENT** or the injuries or damages claimed by plaintiff? If so, for each **PERSON**:
- state the name, **ADDRESS**, and telephone number of the **PERSON**;
 - state all facts upon which you base your contention;
 - state the names, **ADDRESSES**, and telephone numbers of all **PERSONS** who have knowledge of the facts; and
 - identify all **DOCUMENTS** and other tangible things that support your contention and state the name, **ADDRESS**, and telephone number of the **PERSON** who has each **DOCUMENT** or thing.
- 16.2 Do you contend that plaintiff was not injured in the **INCIDENT**? If so:
- state all facts upon which you base your contention;
 - state the names, **ADDRESSES**, and telephone numbers of all **PERSONS** who have knowledge of the facts; and
 - identify all **DOCUMENTS** and other tangible things that support your contention and state the name, **ADDRESS**, and telephone number of the **PERSON** who has each **DOCUMENT** or thing.

- 16.3 Do you contend that the injuries or the extent of the injuries claimed by plaintiff as disclosed in discovery proceedings thus far in this case were not caused by the **INCIDENT**? If so, for each injury:
- identify it;
 - state all facts upon which you base your contention;
 - state the names, **ADDRESSES**, and telephone numbers of all **PERSONS** who have knowledge of the facts; and
 - identify all **DOCUMENTS** and other tangible things that support your contention and state the name, **ADDRESS**, and telephone number of the **PERSON** who has each **DOCUMENT** or thing.
- 16.4 Do you contend that any of the services furnished by any **HEALTH CARE PROVIDER** claimed by plaintiff in discovery proceedings thus far in this case were not due to the **INCIDENT**? If so:
- identify each service;
 - state all facts upon which you base your contention;
 - state the names, **ADDRESSES**, and telephone numbers of all **PERSONS** who have knowledge of the facts; and
 - identify all **DOCUMENTS** and other tangible things that support your contention and state the name, **ADDRESS**, and telephone number of the **PERSON** who has each **DOCUMENT** or thing.
- 16.5 Do you contend that any of the costs of services furnished by any **HEALTH CARE PROVIDER** claimed as damages by plaintiff in discovery proceedings thus far in this case were not necessary or unreasonable? If so:
- identify each cost;
 - state all facts upon which you base your contention;
 - state the names, **ADDRESSES**, and telephone numbers of all **PERSONS** who have knowledge of the facts; and
 - identify all **DOCUMENTS** and other tangible things that support your contention and state the name, **ADDRESS**, and telephone number of the **PERSON** who has each **DOCUMENT** or thing.
- 16.6 Do you contend that any part of the loss of earnings or income claimed by plaintiff in discovery proceedings thus far in this case was not caused by the **INCIDENT**? If so:
- identify each part of the loss;
 - state all facts upon which you base your contention;
 - state the names, **ADDRESSES**, and telephone numbers of all **PERSONS** who have knowledge of the facts; and
 - identify all **DOCUMENTS** and other tangible things that support your contention and state the name, **ADDRESS**, and telephone number of the **PERSON** who has each **DOCUMENT** or thing.
- 16.7 Do you contend that any of the property damage claimed by plaintiff in discovery Proceedings thus far in this case was not caused by the **INCIDENT**? If so:
- identify each item of property damage;
 - state all facts upon which you base your contention;
 - state the names, **ADDRESSES**, and telephone numbers of all **PERSONS** who have knowledge of the facts; and
 - identify all **DOCUMENTS** and other tangible things that support your contention and state the name, **ADDRESS**, and telephone number of the **PERSON** who has each **DOCUMENT** or thing.
- 16.8 Do you contend that any of the costs of repairing the property damage claimed by plaintiff in discovery proceedings thus far in this case were unreasonable? If so:
- identify each cost item;
 - state all facts upon which you base your contention;
 - state the names, **ADDRESSES**, and telephone numbers of all **PERSONS** who have knowledge of the facts; and
 - identify all **DOCUMENTS** and other tangible things that support your contention and state the name, **ADDRESS**, and telephone number of the **PERSON** who has each **DOCUMENT** or thing.
- 16.9 Do **YOU OR ANYONE ACTING ON YOUR BEHALF** have any **DOCUMENT** (for example, insurance bureau index reports) concerning claims for personal injuries made before or after the **INCIDENT** by a plaintiff in this case? If so, for each plaintiff state:
- the source of each **DOCUMENT**;
 - the date each claim arose;
 - the nature of each claim; and
 - the name, **ADDRESS**, and telephone number of the **PERSON** who has each **DOCUMENT**.
- 16.10 Do **YOU OR ANYONE ACTING ON YOUR BEHALF** have any **DOCUMENT** concerning the past or present physical, mental, or emotional condition of any plaintiff in this case from a **HEALTH CARE PROVIDER** not previously identified (except for expert witnesses covered by Code of Civil Procedure sections 2034.210–2034.310)? If so, for each plaintiff state:
- the name, **ADDRESS**, and telephone number of each **HEALTH CARE PROVIDER**;
 - a description of each **DOCUMENT**; and
 - the name, **ADDRESS**, and telephone number of the **PERSON** who has each **DOCUMENT**.
- 17.0 Responses to Request for Admissions**
- 17.1 Is your response to each request for admission served with these interrogatories an unqualified admission? If not, for each response that is not an unqualified admission:
- state the number of the request;
 - state all facts upon which you base your response;
 - state the names, **ADDRESSES**, and telephone numbers of all **PERSONS** who have knowledge of those facts; and
 - identify all **DOCUMENTS** and other tangible things that support your response and state the name, **ADDRESS**, and telephone number of the **PERSON** who has each **DOCUMENT** or thing.
- 18.0 [Reserved]**
- 19.0 [Reserved]**
- 20.0 How the Incident Occurred—Motor Vehicle**
- 20.1 State the date, time, and place of the **INCIDENT** (closest street **ADDRESS** or intersection).
- 20.2 For each vehicle involved in the **INCIDENT**, state:
- the year, make, model, and license number;
 - the name, **ADDRESS**, and telephone number of the driver;

- (c) the name, **ADDRESS**, and telephone number of each occupant other than the driver;
- (d) the name, **ADDRESS**, and telephone number of each registered owner;
- (e) the name, **ADDRESS**, and telephone number of each lessee;
- (f) the name, **ADDRESS**, and telephone number of each owner other than the registered owner or lien holder; and
- (g) the name of each owner who gave permission or consent to the driver to operate the vehicle.

20.3 State the **ADDRESS** and location where your trip began and the **ADDRESS** and location of your destination.

20.4 Describe the route that you followed from the beginning of your trip to the location of the **INCIDENT**, and state the location of each stop, other than routine traffic stops, during the trip leading up to the **INCIDENT**.

20.5 State the name of the street or roadway, the lane of travel, and the direction of travel of each vehicle involved in the **INCIDENT** for the 500 feet of travel before the **INCIDENT**.

20.6 Did the **INCIDENT** occur at an intersection? If so, describe all traffic control devices, signals, or signs at the intersection.

20.7 Was there a traffic signal facing you at the time of the **INCIDENT**? If so, state:
 (a) your location when you first saw it;
 (b) the color;
 (c) the number of seconds it had been that color; and
 (d) whether the color changed between the time you first saw it and the **INCIDENT**.

20.8 State how the **INCIDENT** occurred, giving the speed, direction, and location of each vehicle involved:
 (a) just before the **INCIDENT**;
 (b) at the time of the **INCIDENT**; and (c) just after the **INCIDENT**.

20.9 Do you have information that a malfunction or defect in a vehicle caused the **INCIDENT**? If so:
 (a) identify the vehicle;
 (b) identify each malfunction or defect;
 (c) state the name, **ADDRESS**, and telephone number of each **PERSON** who is a witness to or has information about each malfunction or defect; and
 (d) state the name, **ADDRESS**, and telephone number of each **PERSON** who has custody of each defective part.

20.10 Do you have information that any malfunction or defect in a vehicle contributed to the injuries sustained in the **INCIDENT**? If so:
 (a) identify the vehicle;
 (b) identify each malfunction or defect;
 (c) state the name, **ADDRESS**, and telephone number of each **PERSON** who is a witness to or has information about each malfunction or defect; and

(d) state the name, **ADDRESS**, and telephone number of each **PERSON** who has custody of each defective part.

20.11 State the name, **ADDRESS**, and telephone number of each owner and each **PERSON** who has had possession since the **INCIDENT** of each vehicle involved in the **INCIDENT**.

25.0 [Reserved]

30.0 [Reserved]

40.0 [Reserved]

50.0 Contract

50.1 For each agreement alleged in the pleadings:
 (a) identify each **DOCUMENT** that is part of the agreement and for each state the name, **ADDRESS**, and telephone number of each **PERSON** who has the **DOCUMENT**;
 (b) state each part of the agreement not in writing, the name, **ADDRESS**, and telephone number of each **PERSON** agreeing to that provision, and the date that part of the agreement was made;
 (c) identify all **DOCUMENTS** that evidence any part of the agreement not in writing and for each state the name, **ADDRESS**, and telephone number of each **PERSON** who has the **DOCUMENT**;
 (d) identify all **DOCUMENTS** that are part of any modification to the agreement, and for each state the name, **ADDRESS**, and telephone number of each **PERSON** who has the **DOCUMENT**;
 (e) state each modification not in writing, the date, and the name, **ADDRESS**, and telephone number of each **PERSON** agreeing to the modification, and the date the modification was made;
 (f) identify all **DOCUMENTS** that evidence any modification of the agreement not in writing and for each state the name, **ADDRESS**, and telephone number of each **PERSON** who has the **DOCUMENT**.

50.2 Was there a breach of any agreement alleged in the pleadings? If so, for each breach describe and give the date of every act or omission that you claim is the breach of the agreement.

50.3 Was performance of any agreement alleged in the pleadings excused? If so, identify each agreement excused and state why performance was excused.

50.4 Was any agreement alleged in the pleadings terminated by mutual agreement, release, accord and satisfaction, or novation? If so, identify each agreement terminated, the date of termination, and the basis of the termination.

50.5 Is any agreement alleged in the pleadings unenforceable? If so, identify each unenforceable agreement and state why it is unenforceable.

50.6 Is any agreement alleged in the pleadings ambiguous? If so, identify each ambiguous agreement and state why it is ambiguous.

60.0 [Reserved]

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8 Attorneys for Plaintiff
9 LINA CHARRY, ESQ.

10
11 **SUPERIOR COURT OF THE STATE OF CALIFORNIA**
12 **COUNTY OF SAN DIEGO, CENTRAL DIVISION**

13 ZHALA TAWFIQ, LINA CHARRY, PARIS
14 KARGAR, 3 Brother TACO SHOP, INC., dba
15 TRES TAQUERIA,

16 Plaintiffs,

17 v.

18 MISS MIDDLE EAST BEAUTY PAGEANT
19 USA, INC., a California non-profit
20 corporation; BESSMON KALASHO, an
21 individual; JESSICA KALASHO, an
22 individual; BESSMON KALASHO AND
23 JESSICA KALASHO, a married couple, dba
"Miss Middle East USA Beauty Pageant";
MIDDLE EASTERN CHAMBER OF
COMMERCE fka SAN DIEGO EAST
COUNTY CHALDEAN AMERICAN
CHAMBER OF COMMERCE, a suspended
California non-profit corporation; ELIE
MALOUF, an individual; STEPHANIE
MALOUF, an individual; DOES 3-10,
INCLUSIVE,

Defendants.

CASE NO. 37-2017-00019692-CU-FR-CTL

Jury Trial Demanded

General Civil Unlimited

Complaint Filed – May 31, 2017

Trial Date – August 10, 2018

**PLAINTIFF LINA CHARRY'S
REQUESTS FOR ADMISSIONS TO MISS
MIDDLE EAST BEAUTY PAGEANT
USA, INC. [SET ONE]**

I/C Judge: Honorable Timothy B. Taylor

24 **PROPOUNDING PARTY:** Plaintiff LINA CHARRY

25 **RESPONDING PARTY:** Defendant MISS MIDDLE EAST BEAUTY PAGEANT
26 USA, INC.

27 **SET:** ONE

28 REQUEST FOR ADMISSIONS ON
MISS MIDDLE EAST

1 Pursuant to California Code of Civil Procedure §§ 2033.020, *et seq.*, Plaintiff Lina Charry
2 hereby demands that Defendant MISS MIDDLE EAST BEAUTY PAGEANT USA, INC., a
3 California non-profit corporation, admit the truth of the following matters.

4 Pursuant to Cal. Code Civ. Proc. § 2033.250, MISS MIDDLE EAST BEAUTY PAGEANT
5 USA, INC. shall serve a written response admitting the truth of the following matters, under oath,
6 within 30 days after service hereof.

7 DEFINITIONS

8
9 As used herein, "DEFENDANT" or "YOU" or "YOUR" shall mean Defendant MISS
10 MIDDLE EAST BEAUTY PAGEANT USA, INC., a California non-profit corporation, including,
11 but not limited to, the business entity and its owners, directors, officers, and shareholders.

12 As used herein, "PLAINTIFF" shall mean Plaintiff Lina Charry, an individual.

13 As used herein, "BESSMON" shall mean Defendant BESSMON KALASHO, an
14 individual.

15 As used herein, "JESSICA" shall mean Defendant JESSICA KALASHO, an individual.

16 As used herein, "PAGEANT" shall mean "Miss Middle East USA Beauty Pageant", a sole
17 proprietorship.

18 As used herein, "COMPLAINT" shall mean the second amended complaint filed by
19 PLAINTIFF in this action on November 3, 2017.

20 As used herein, "PERSON" or "PERSONS" shall mean individuals, corporations,
21 partnerships, groups, associations, businesses, labor organizations or governmental agencies.

22 As used herein, "CONCERNING" shall mean anything that constitutes, contains, embodies,
23 reflects, identifies, states, refers to, deals with, or is in any manner whatsoever pertinent to that
24 subject.
25
26
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1 As used herein, "COMMUNICATION" or "COMMUNICATIONS" shall mean and refer
2 to any type of oral, written, or electronic statement between two or more persons in which
3 information, facts, statements, conversations, or opinions were exchanged, imparted, or received.

4 **REQUESTS FOR ADMISSION**

5 **REQUEST FOR PRODUCTION NO. 1:**

6 Admit YOU are a California Corporation.

7 **REQUEST FOR PRODUCTION NO. 2:**

8 Admit YOU are majority owned by BESSMON.

9 **REQUEST FOR PRODUCTION NO. 3:**

10 Admit YOU are majority owned by JESSICA.

11 **REQUEST FOR PRODUCTION NO. 4:**

12 Admit YOU are majority owned by BESSMON and JESSICA, collectively.

13 **REQUEST FOR PRODUCTION NO. 5:**

14 Admit BESSMON is a principle for YOU.

15 **REQUEST FOR PRODUCTION NO. 6:**

16 Admit JESSICA is a principle for YOU.

17 **REQUEST FOR PRODUCTION NO. 7:**

18 Admit YOUR only shareholders are BESSMON and JESSICA.

19 **REQUEST FOR PRODUCTION NO. 8:**

20 Admit YOUR only owners are BESSMON and JESSICA.

21 **REQUEST FOR PRODUCTION NO. 9:**

22 Admit YOU were under-capitalized for YOUR stated purpose at the time YOU were formed.

23 **REQUEST FOR PRODUCTION NO. 10:**

24 Admit YOU had insufficient capital to operate YOUR business at the time YOU were
25 formed.

1 **REQUEST FOR PRODUCTION NO. 11:**

2 Admit YOUR owners did not invest money in YOU at the time YOU were formed.

3 **REQUEST FOR PRODUCTION NO. 12:**

4 Admit YOUR shareholders did not invest money in YOU at the time YOU were formed.

5 **REQUEST FOR PRODUCTION NO. 13:**

6 Admit YOUR founders did not create a capital account for YOU.

7 **REQUEST FOR PRODUCTION NO. 14:**

8 Admit YOUR Corporation did not have its own independent bank accounts.

9 **REQUEST FOR PRODUCTION NO. 15:**

10 Admit YOU shared bank accounts with other business entities.

11 **REQUEST FOR PRODUCTION NO. 16:**

12 Admit YOU shared bank accounts with BESSMON.

13 **REQUEST FOR PRODUCTION NO. 17:**

14 Admit YOU shared bank accounts with JESSICA.

15 **REQUEST FOR PRODUCTION NO. 18:**

16 Admit YOUR owners co-mingled YOUR assets with other individuals.

17 **REQUEST FOR PRODUCTION NO. 19:**

18 Admit YOUR owners co-mingled YOUR assets with other business entities.

19 **REQUEST FOR PRODUCTION NO. 20:**

20 Admit YOUR shareholders co-mingled YOUR assets with other individuals.

21 **REQUEST FOR PRODUCTION NO. 21:**

22 Admit YOUR shareholders co-mingled YOUR assets with other entities.

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1 **REQUEST FOR PRODUCTION NO. 22:**

2 Admit YOU co-mingled YOUR assets with Middle Eastern Chamber Of Commerce fka San
3 Diego East County Chaldean American Chamber Of Commerce, a California non-profit
4 corporation.

5 **REQUEST FOR PRODUCTION NO. 23:**

6 Admit YOU co-mingled YOUR assets with PAGEANT.

7 **REQUEST FOR PRODUCTION NO. 24:**

8 Admit YOU co-mingled YOUR assets with the assets of BESSMON.

9 **REQUEST FOR PRODUCTION NO. 25:**

10 Admit YOU co-mingled YOUR assets with the assets of JESSICA.

11 **REQUEST FOR PRODUCTION NO. 26:**

12 Admit YOU shared bank accounts with PAGEANT.

13 **REQUEST FOR PRODUCTION NO. 27:**

14 Admit YOU never held annual meetings of shareholders.

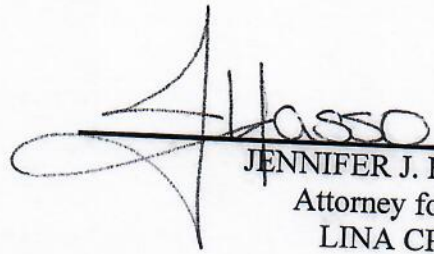
15 **REQUEST FOR PRODUCTION NO. 28:**

16 Admit YOU never held annual meetings of directors.

17 **REQUEST FOR PRODUCTION NO. 29:**

18 Admit YOU do not have minutes from any corporate meeting.

19 Date: May 3, 2018

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JENNIFER J. HASSO, ESQ.
Attorney for Plaintiff
LINA CHARRY

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):

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 E-MAIL ADDRESS (Optional): JHASSO@GMAIL.COM
 ATTORNEY FOR (Name): PLAINTIFF LINA CHARRY

SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN DIEGO
 330 WEST BROADWAY, SAN DIEGO, CALIFORNIA 92103

SHORT TITLE OF CASE:
 LINA CHARRY, et al. v. BESSMON KALASHO, et al.

FORM INTERROGATORIES—GENERAL

Asking Party: LINA CHARRY

CASE NUMBER:

37-2017-00019692-CU-FR-CTL

Answering Party: MISS MIDDLE EAST BEAUTY PAGEANT USA, INC.
 Set No.: TWO (2)

Sec. 1. Instructions to All Parties

- (a) Interrogatories are written questions prepared by a party to an action that are sent to any other party in the action to be answered under oath. The interrogatories below are form interrogatories approved for use in civil cases.
- (b) For time limitations, requirements for service on other parties, and other details, see Code of Civil Procedure sections 2030.010–2030.410 and the cases construing those sections.
- (c) These form interrogatories do not change existing law relating to interrogatories nor do they affect an answering party's right to assert any privilege or make any objection.

Sec. 2. Instructions to the Asking Party

- (a) These interrogatories are designed for optional use by parties in unlimited civil cases where the amount demanded exceeds \$25,000. Separate interrogatories, *Form Interrogatories—Limited Civil Cases (Economic Litigation)* (form DISC-004), which have no subparts, are designed for use in limited civil cases where the amount demanded is \$25,000 or less; however, those interrogatories may also be used in unlimited civil cases.
- (b) Check the box next to each interrogatory that you want the answering party to answer. Use care in choosing those interrogatories that are applicable to the case.
- (c) You may insert your own definition of **INCIDENT** in Section 4, but only where the action arises from a course of conduct or a series of events occurring over a period of time.
- (d) The interrogatories in section 16.0, Defendant's Contentions—Personal Injury, should not be used until the defendant has had a reasonable opportunity to conduct an investigation or discovery of plaintiff's injuries and damages.
- (e) Additional interrogatories may be attached.

Sec. 3. Instructions to the Answering Party

- (a) An answer or other appropriate response must be given to each interrogatory checked by the asking party.
- (b) As a general rule, within 30 days after you are served with these interrogatories, you must serve your responses on the asking party and serve copies of your responses on all other parties to the action who have appeared. See Code of Civil Procedure sections 2030.260–2030.270 for details.

- (c) Each answer must be as complete and straightforward as the information reasonably available to you, including the information possessed by your attorneys or agents, permits. If an interrogatory cannot be answered completely, answer it to the extent possible.
- (d) If you do not have enough personal knowledge to fully answer an interrogatory, say so, but make a reasonable and good faith effort to get the information by asking other persons or organizations, unless the information is equally available to the asking party.
- (e) Whenever an interrogatory may be answered by referring to a document, the document may be attached as an exhibit to the response and referred to in the response. If the document has more than one page, refer to the page and section where the answer to the interrogatory can be found.
- (f) Whenever an address and telephone number for the same person are requested in more than one interrogatory, you are required to furnish them in answering only the first interrogatory asking for that information.
- (g) If you are asserting a privilege or making an objection to an interrogatory, you must specifically assert the privilege or state the objection in your written response.
- (h) Your answers to these interrogatories must be verified, dated, and signed. You may wish to use the following form at the end of your answers:

I declare under penalty of perjury under the laws of the State of California that the foregoing answers are true and correct.

 (DATE)

 (SIGNATURE)

Sec. 4. Definitions

Words in **BOLDFACE CAPITALS** in these interrogatories are defined as follows:

(a) (Check one of the following):

- (1) **INCIDENT** includes the circumstances and events surrounding the alleged accident, injury, or other occurrence or breach of contract giving rise to this action or proceeding.

(2) **INCIDENT** means (insert your definition here or on a separate, attached sheet labeled "Sec. 4(a)(2)"): _____

(b) **YOU OR ANYONE ACTING ON YOUR BEHALF** includes you, your agents, your employees, your insurance companies, their agents, their employees, your attorneys, your accountants, your investigators, and anyone else acting on your behalf.

(c) **PERSON** includes a natural person, firm, association, organization, partnership, business, trust, limited liability company, corporation, or public entity.

(d) **DOCUMENT** means a writing, as defined in Evidence Code section 250, and includes the original or a copy of handwriting, typewriting, printing, photostats, photographs, electronically stored information, and every other means of recording upon any tangible thing and form of communicating or representation, including letters, words, pictures, sounds, or symbols, or combinations of them.

(e) **HEALTH CARE PROVIDER** includes any **PERSON** referred to in Code of Civil Procedure section 667.7(e)(3).

(f) **ADDRESS** means the street address, including the city, state, and zip code.

Sec. 5. Interrogatories

The following interrogatories have been approved by the Judicial Council under Code of Civil Procedure section 2033.710:

CONTENTS

- 1.0 Identity of Persons Answering These Interrogatories
- 2.0 General Background Information—Individual
- 3.0 General Background Information—Business Entity
- 4.0 Insurance
- 5.0 [Reserved]
- 6.0 Physical, Mental, or Emotional Injuries
- 7.0 Property Damage
- 8.0 Loss of Income or Earning Capacity
- 9.0 Other Damages
- 10.0 Medical History
- 11.0 Other Claims and Previous Claims
- 12.0 Investigation—General
- 13.0 Investigation—Surveillance
- 14.0 Statutory or Regulatory Violations
- 15.0 Denials and Special or Affirmative Defenses
- 16.0 Defendant's Contentions Personal Injury
- 17.0 Responses to Request for Admissions
- 18.0 [Reserved]
- 19.0 [Reserved]
- 20.0 How the Incident Occurred—Motor Vehicle
- 25.0 [Reserved]
- 30.0 [Reserved]
- 40.0 [Reserved]
- 50.0 Contract
- 60.0 [Reserved]
- 70.0 Unlawful Detainer [See separate form DISC-003]
- 101.0 Economic Litigation [See separate form DISC-004]
- 200.0 Employment Law [See separate form DISC-002]
- Family Law [See separate form FL-145]

1.0 Identity of Persons Answering These Interrogatories

1.1 State the name, **ADDRESS**, telephone number, and relationship to you of each **PERSON** who prepared or assisted in the preparation of the responses to these interrogatories. (Do not identify anyone who simply typed or reproduced the responses.)

2.0 General Background Information—individual

- 2.1 State:
 - (a) your name;
 - (b) every name you have used in the past; and
 - (c) the dates you used each name.
- 2.2 State the date and place of your birth.
- 2.3 At the time of the **INCIDENT**, did you have a driver's license? If so state:
 - (a) the state or other issuing entity;
 - (b) the license number and type;
 - (c) the date of issuance; and
 - (d) all restrictions.
- 2.4 At the time of the **INCIDENT**, did you have any other permit or license for the operation of a motor vehicle? If so, state:
 - (a) the state or other issuing entity;
 - (b) the license number and type;
 - (c) the date of issuance; and
 - (d) all restrictions.
- 2.5 State:
 - (a) your present residence **ADDRESS**;
 - (b) your residence **ADDRESSES** for the past five years; and
 - (c) the dates you lived at each **ADDRESS**.
- 2.6 State:
 - (a) the name, **ADDRESS**, and telephone number of your present employer or place of self-employment; and
 - (b) the name, **ADDRESS**, dates of employment, job title, and nature of work for each employer or self-employment you have had from five years before the **INCIDENT** until today.
- 2.7 State:
 - (a) the name and **ADDRESS** of each school or other academic or vocational institution you have attended, beginning with high school;
 - (b) the dates you attended;
 - (c) the highest grade level you have completed; and
 - (d) the degrees received.
- 2.8 Have you ever been convicted of a felony? If so, for each conviction state:
 - (a) the city and state where you were convicted;
 - (b) the date of conviction;
 - (c) the offense; and
 - (d) the court and case number.
- 2.9 Can you speak English with ease? If not, what language and dialect do you normally use?
- 2.10 Can you read and write English with ease? If not, what language and dialect do you normally use?

- 2.11 At the time of the **INCIDENT** were you acting as an agent or employee for any **PERSON**? If so, state:
- the name, **ADDRESS**, and telephone number of that **PERSON**; and
 - a description of your duties.
- 2.12 At the time of the **INCIDENT** did you or any other person have any physical, emotional, or mental disability or condition that may have contributed to the occurrence of the **INCIDENT**? If so, for each person state:
- the name, **ADDRESS**, and telephone number;
 - the nature of the disability or condition; and
 - the manner in which the disability or condition contributed to the occurrence of the **INCIDENT**.
- 2.13 Within 24 hours before the **INCIDENT** did you or any person involved in the **INCIDENT** use or take any of the following substances: alcoholic beverage, marijuana, or other drug or medication of any kind (prescription or not)? If so, for each person state:
- the name, **ADDRESS**, and telephone number;
 - the nature or description of each substance;
 - the quantity of each substance used or taken;
 - the date and time of day when each substance was used or taken;
 - the **ADDRESS** where each substance was used or taken;
 - the name, **ADDRESS**, and telephone number of each person who was present when each substance was used or taken; and
 - the name, **ADDRESS**, and telephone number of any **HEALTH CARE PROVIDER** who prescribed or furnished the substance and the condition for which it was prescribed or furnished.

3.0 General Background Information—Business Entity

- 3.1 Are you a corporation? If so, state:
- the name stated in the current articles of incorporation;
 - all other names used by the corporation during the past 10 years and the dates each was used;
 - the date and place of incorporation;
 - the **ADDRESS** of the principal place of business; and
 - whether you are qualified to do business in California.
- 3.2 Are you a partnership? If so, state:
- the current partnership name;
 - all other names used by the partnership during the past 10 years and the dates each was used;
 - whether you are a limited partnership and, if so, under the laws of what jurisdiction;
 - the name and **ADDRESS** of each general partner; and
 - the **ADDRESS** of the principal place of business.
- 3.3 Are you a limited liability company? If so, state:
- the name stated in the current articles of organization;
 - all other names used by the company during the past 10 years and the date each was used;
 - the date and place of filing of the articles of organization;
 - the **ADDRESS** of the principal place of business; and
 - whether you are qualified to do business in California.

- 3.4 Are you a joint venture? If so, state:
- the current joint venture name;
 - all other names used by the joint venture during the past 10 years and the dates each was used;
 - the name and **ADDRESS** of each joint venturer; and
 - the **ADDRESS** of the principal place of business.
- 3.5 Are you an unincorporated association? If so, state:
- the current unincorporated association name;
 - all other names used by the unincorporated association during the past 10 years and the dates each was used; and
 - the **ADDRESS** of the principal place of business.
- 3.6 Have you done business under a fictitious name during the past 10 years? If so, for each fictitious name state:
- the name;
 - the dates each was used;
 - the state and county of each fictitious name filing; and
 - the **ADDRESS** of the principal place of business.
- 3.7 Within the past five years has any public entity registered or licensed your business? If so, for each license or registration:
- identify the license or registration;
 - state the name of the public entity; and
 - state the dates of issuance and expiration.

4.0 Insurance

- 4.1 At the time of the **INCIDENT**, was there in effect any policy of insurance through which you were or might be insured in any manner (for example, primary, pro-rata, or excess liability coverage or medical expense coverage) for the damages, claims, or actions that have arisen out of the **INCIDENT**? If so, for each policy state:
- the kind of coverage;
 - the name and **ADDRESS** of the insurance company;
 - the name, **ADDRESS**, and telephone number of each named insured;
 - the policy number;
 - the limits of coverage for each type of coverage contained in the policy;
 - whether any reservation of rights or controversy or coverage dispute exists between you and the insurance company; and
 - the name, **ADDRESS**, and telephone number of the custodian of the policy.
- 4.2 Are you self-insured under any statute for the damages, claims, or actions that have arisen out of the **INCIDENT**? If so, specify the statute.

5.0 [Reserved]

6.0 Physical, Mental, or Emotional Injuries

- 6.1 Do you attribute any physical, mental, or emotional injuries to the **INCIDENT**? (If your answer is "no," do not answer interrogatories 6.2 through 6.7).
- 6.2 Identify each injury you attribute to the **INCIDENT** and the area of your body affected.

- 6.3 Do you still have any complaints that you attribute to the **INCIDENT**? If so, for each complaint state:
- a description;
 - whether the complaint is subsiding, remaining the same, or becoming worse; and
 - the frequency and duration.
- 6.4 Did you receive any consultation or examination (except from expert witnesses covered by Code of Civil Procedure sections 2034.210–2034.310) or treatment from a **HEALTH CARE PROVIDER** for any injury you attribute to the **INCIDENT**? If so, for each **HEALTH CARE PROVIDER** state:
- the name, **ADDRESS**, and telephone number;
 - the type of consultation, examination, or treatment provided;
 - the dates you received consultation, examination, or treatment; and
 - the charges to date.
- 6.5 Have you taken any medication, prescribed or not, as a result of injuries that you attribute to the **INCIDENT**? If so, for each medication state:
- the name;
 - the **PERSON** who prescribed or furnished it;
 - the date it was prescribed or furnished;
 - the dates you began and stopped taking it; and
 - the cost to date.
- 6.6 Are there any other medical services necessitated by the injuries that you attribute to the **INCIDENT** that were not previously listed (for example, ambulance, nursing, prosthetics)? If so, for each service state:
- the nature;
 - the date;
 - the cost; and
 - the name, **ADDRESS**, and telephone number of each provider.
- 6.7 Has any **HEALTH CARE PROVIDER** advised that you may require future or additional treatment for any injuries that you attribute to the **INCIDENT**? If so, for each injury state:
- the name and **ADDRESS** of each **HEALTH CARE PROVIDER**;
 - the complaints for which the treatment was advised; and
 - the nature, duration, and estimated cost of the treatment.
- 7.0 Property Damage**
- 7.1 Do you attribute any loss of or damage to a vehicle or other property to the **INCIDENT**? If so, for each item of property:
- describe the property;
 - describe the nature and location of the damage to the property;
- state the amount of damage you are claiming for each item of property and how the amount was calculated; and
 - if the property was sold, state the name, **ADDRESS**, and telephone number of the seller, the date of sale, and the sale price.
- 7.2 Has a written estimate or evaluation been made for any item of property referred to in your answer to the preceding interrogatory? If so, for each estimate or evaluation state:
- the name, **ADDRESS**, and telephone number of the **PERSON** who prepared it and the date prepared;
 - the name, **ADDRESS**, and telephone number of each **PERSON** who has a copy of it; and
 - the amount of damage stated.
- 7.3 Has any item of property referred to in your answer to interrogatory 7.1 been repaired? If so, for each item state:
- the date repaired;
 - a description of the repair;
 - the repair cost;
 - the name, **ADDRESS**, and telephone number of the **PERSON** who repaired it;
 - the name, **ADDRESS**, and telephone number of the **PERSON** who paid for the repair.
- 8.0 Loss of Income or Earning Capacity**
- 8.1 Do you attribute any loss of income or earning capacity to the **INCIDENT**? (If your answer is "no," do not answer interrogatories 8.2 through 8.8).
- 8.2 State:
- the nature of your work;
 - your job title at the time of the **INCIDENT**; and
 - the date your employment began.
- 8.3 State the last date before the **INCIDENT** that you worked for compensation.
- 8.4 State your monthly income at the time of the **INCIDENT** and how the amount was calculated.
- 8.5 State the date you returned to work at each place of employment following the **INCIDENT**.
- 8.6 State the dates you did not work and for which you lost income as a result of the **INCIDENT**.
- 8.7 State the total income you have lost to date as a result of the **INCIDENT** and how the amount was calculated.
- 8.8 Will you lose income in the future as a result of the **INCIDENT**? If so, state:
- the facts upon which you base this contention;
 - an estimate of the amount;
 - an estimate of how long you will be unable to work; and
 - how the claim for future income is calculated.

9.0 Other Damages

- 9.1 Are there any other damages that you attribute to the **INCIDENT**? If so, for each item of damage state:
 - (a) the nature;
 - (b) the date it occurred;
 - (c) the amount; and
 - (d) the name, **ADDRESS**, and telephone number of each **PERSON** to whom an obligation was incurred.
- 9.2 Do any **DOCUMENTS** support the existence or amount of any item of damages claimed in interrogatory 9.1? If so, describe each document and state the name, **ADDRESS**, and telephone number of the **PERSON** who has each **DOCUMENT**.

10.0 Medical History

- 10.1 At any time before the **INCIDENT** did you have complaints or injuries that involved the same part of your body claimed to have been injured in the **INCIDENT**? If so, for each state:
 - (a) a description of the complaint or injury;
 - (b) the dates it began and ended; and
 - (c) the name, **ADDRESS**, and telephone number of each **HEALTH CARE PROVIDER** whom you consulted or who examined or treated you.
- 10.2 List all physical, mental, and emotional disabilities you had immediately before the **INCIDENT**. (*You may omit mental or emotional disabilities unless you attribute any mental or emotional injury to the **INCIDENT**.*)
- 10.3 At any time after the **INCIDENT**, did you sustain injuries of the kind for which you are now claiming damages? If so, for each incident giving rise to an injury state:
 - (a) the date and the place it occurred;
 - (b) the name, **ADDRESS**, and telephone number of any other **PERSON** involved;
 - (c) the nature of any injuries you sustained;
 - (d) the name, **ADDRESS**, and telephone number of each **HEALTH CARE PROVIDER** who you consulted or who examined or treated you; and
 - (e) the nature of the treatment and its duration.

11.0 Other Claims and Previous Claims

- 11.1 Except for this action, in the past 10 years have you filed an action or made a written claim or demand for compensation for your personal injuries? If so, for each action, claim, or demand state:
 - (a) the date, time, and place and location (closest street **ADDRESS** or intersection) of the **INCIDENT** giving rise to the action, claim, or demand;
 - (b) the name, **ADDRESS**, and telephone number of each **PERSON** against whom the claim or demand was made or the action filed;

- (c) the court, names of the parties, and case number of any action filed;
- (d) the name, **ADDRESS**, and telephone number of any attorney representing you;
- (e) whether the claim or action has been resolved or is pending; and
- (f) a description of the injury.

- 11.2 In the past 10 years have you made a written claim or demand for workers' compensation benefits? If so, for each claim or demand state:
 - (a) the date, time, and place of the **INCIDENT** giving rise to the claim;
 - (b) the name, **ADDRESS**, and telephone number of your employer at the time of the injury;
 - (c) the name, **ADDRESS**, and telephone number of the workers' compensation insurer and the claim number;
 - (d) the period of time during which you received workers' compensation benefits;
 - (e) a description of the injury;
 - (f) the name, **ADDRESS**, and telephone number of any **HEALTH CARE PROVIDER** who provided services; and
 - (g) the case number at the Workers' Compensation Appeals Board.

12.0 Investigation—General

- 12.1 State the name, **ADDRESS**, and telephone number of each individual:
 - (a) who witnessed the **INCIDENT** or the events occurring immediately before or after the **INCIDENT**;
 - (b) who made any statement at the scene of the **INCIDENT**;
 - (c) who heard any statements made about the **INCIDENT** by any individual at the scene; and
 - (d) who **YOU OR ANYONE ACTING ON YOUR BEHALF** claim has knowledge of the **INCIDENT** (except for expert witnesses covered by Code of Civil Procedure section 2034).
- 12.2 Have **YOU OR ANYONE ACTING ON YOUR BEHALF** interviewed any individual concerning the **INCIDENT**? If so, for each individual state:
 - (a) the name, **ADDRESS**, and telephone number of the individual interviewed;
 - (b) the date of the interview; and
 - (c) the name, **ADDRESS**, and telephone number of the **PERSON** who conducted the interview.
- 12.3 Have **YOU OR ANYONE ACTING ON YOUR BEHALF** obtained a written or recorded statement from any individual concerning the **INCIDENT**? If so, for each statement state:
 - (a) the name, **ADDRESS**, and telephone number of the individual from whom the statement was obtained;
 - (b) the name, **ADDRESS**, and telephone number of the individual who obtained the statement;
 - (c) the date the statement was obtained; and
 - (d) the name, **ADDRESS**, and telephone number of each **PERSON** who has the original statement or a copy.

- 12.4 Do **YOU OR ANYONE ACTING ON YOUR BEHALF** know of any photographs, films, or videotapes depicting any place, object, or individual concerning the **INCIDENT** or plaintiff's injuries? If so, state:
 - (a) the number of photographs or feet of film or videotape;
 - (b) the places, objects, or persons photographed, filmed, or videotaped;
 - (c) the date the photographs, films, or videotapes were taken;
 - (d) the name, **ADDRESS**, and telephone number of the individual taking the photographs, films, or videotapes; and
 - (e) the name, **ADDRESS**, and telephone number of each **PERSON** who has the original or a copy of the photographs, films, or videotapes.

- 12.5 Do **YOU OR ANYONE ACTING ON YOUR BEHALF** know of any diagram, reproduction, or model of any place or thing (except for items developed by expert witnesses covered by Code of Civil Procedure sections 2034.210–2034.310) concerning the **INCIDENT**? If so, for each item state:
 - (a) the type (i.e., diagram, reproduction, or model);
 - (b) the subject matter; and
 - (c) the name, **ADDRESS**, and telephone number of each **PERSON** who has it.

- 12.6 Was a report made by any **PERSON** concerning the **INCIDENT**? If so, state:
 - (a) the name, title, identification number, and employer of the **PERSON** who made the report;
 - (b) the date and type of report made;
 - (c) the name, **ADDRESS**, and telephone number of the **PERSON** for whom the report was made; and
 - (d) the name, **ADDRESS**, and telephone number of each **PERSON** who has the original or a copy of the report.

- 12.7 Have **YOU OR ANYONE ACTING ON YOUR BEHALF** inspected the scene of the **INCIDENT**? If so, for each inspection state:
 - (a) the name, **ADDRESS**, and telephone number of the individual making the inspection (except for expert witnesses covered by Code of Civil Procedure sections 2034.210–2034.310); and
 - (b) the date of the inspection.

13.0 Investigation—Surveillance

- 13.1 Have **YOU OR ANYONE ACTING ON YOUR BEHALF** conducted surveillance of any individual involved in the **INCIDENT** or any party to this action? If so, for each surveillance state:
 - (a) the name, **ADDRESS**, and telephone number of the individual or party;
 - (b) the time, date, and place of the surveillance;
 - (c) the name, **ADDRESS**, and telephone number of the individual who conducted the surveillance; and
 - (d) the name, **ADDRESS**, and telephone number of each **PERSON** who has the original or a copy of any surveillance photograph, film, or videotape.

- 13.2 Has a written report been prepared on the surveillance? If so, for each written report state:
 - (a) the title;
 - (b) the date;
 - (c) the name, **ADDRESS**, and telephone number of the individual who prepared the report; and
 - (d) the name, **ADDRESS**, and telephone number of each **PERSON** who has the original or a copy.

14.0 Statutory or Regulatory Violations

- 14.1 Do **YOU OR ANYONE ACTING ON YOUR BEHALF** contend that any **PERSON** involved in the **INCIDENT** violated any statute, ordinance, or regulation and that the violation was a legal (proximate) cause of the **INCIDENT**? If so, identify the name, **ADDRESS**, and telephone number of each **PERSON** and the statute, ordinance, or regulation that was violated.
- 14.2 Was any **PERSON** cited or charged with a violation of any statute, ordinance, or regulation as a result of this **INCIDENT**? If so, for each **PERSON** state:
 - (a) the name, **ADDRESS**, and telephone number of the **PERSON**;
 - (b) the statute, ordinance, or regulation allegedly violated;
 - (c) whether the **PERSON** entered a plea in response to the citation or charge and, if so, the plea entered; and
 - (d) the name and **ADDRESS** of the court or administrative agency, names of the parties, and case number.

15.0 Denials and Special or Affirmative Defenses

- 15.1 Identify each denial of a material allegation and each special or affirmative defense in your pleadings and for each:
 - (a) state all facts upon which you base the denial or special or affirmative defense;
 - (b) state the names, **ADDRESSES**, and telephone numbers of all **PERSONS** who have knowledge of those facts; and
 - (c) identify all **DOCUMENTS** and other tangible things that support your denial or special or affirmative defense, and state the name, **ADDRESS**, and telephone number of the **PERSON** who has each **DOCUMENT**.

16.0 Defendant's Contentions—Personal Injury

- 16.1 Do you contend that any **PERSON**, other than you or plaintiff, contributed to the occurrence of the **INCIDENT** or the injuries or damages claimed by plaintiff? If so, for each **PERSON**:
 - (a) state the name, **ADDRESS**, and telephone number of the **PERSON**;
 - (b) state all facts upon which you base your contention;
 - (c) state the names, **ADDRESSES**, and telephone numbers of all **PERSONS** who have knowledge of the facts; and
 - (d) identify all **DOCUMENTS** and other tangible things that support your contention and state the name, **ADDRESS**, and telephone number of the **PERSON** who has each **DOCUMENT** or thing.
- 16.2 Do you contend that plaintiff was not injured in the **INCIDENT**? If so:
 - (a) state all facts upon which you base your contention;
 - (b) state the names, **ADDRESSES**, and telephone numbers of all **PERSONS** who have knowledge of the facts; and
 - (c) identify all **DOCUMENTS** and other tangible things that support your contention and state the name, **ADDRESS**, and telephone number of the **PERSON** who has each **DOCUMENT** or thing.

- 16.3 Do you contend that the injuries or the extent of the injuries claimed by plaintiff as disclosed in discovery proceedings thus far in this case were not caused by the **INCIDENT**? If so, for each injury:
 - (a) identify it;
 - (b) state all facts upon which you base your contention;
 - (c) state the names, **ADDRESSES**, and telephone numbers of all **PERSONS** who have knowledge of the facts; and
 - (d) identify all **DOCUMENTS** and other tangible things that support your contention and state the name, **ADDRESS**, and telephone number of the **PERSON** who has each **DOCUMENT** or thing.

- 16.4 Do you contend that any of the services furnished by any **HEALTH CARE PROVIDER** claimed by plaintiff in discovery proceedings thus far in this case were not due to the **INCIDENT**? If so:
 - (a) identify each service;
 - (b) state all facts upon which you base your contention;
 - (c) state the names, **ADDRESSES**, and telephone numbers of all **PERSONS** who have knowledge of the facts; and
 - (d) identify all **DOCUMENTS** and other tangible things that support your contention and state the name, **ADDRESS**, and telephone number of the **PERSON** who has each **DOCUMENT** or thing.

- 16.5 Do you contend that any of the costs of services furnished by any **HEALTH CARE PROVIDER** claimed as damages by plaintiff in discovery proceedings thus far in this case were not necessary or unreasonable? If so:
 - (a) identify each cost;
 - (b) state all facts upon which you base your contention;
 - (c) state the names, **ADDRESSES**, and telephone numbers of all **PERSONS** who have knowledge of the facts; and
 - (d) identify all **DOCUMENTS** and other tangible things that support your contention and state the name, **ADDRESS**, and telephone number of the **PERSON** who has each **DOCUMENT** or thing.

- 16.6 Do you contend that any part of the loss of earnings or income claimed by plaintiff in discovery proceedings thus far in this case was unreasonable or was not caused by the **INCIDENT**? If so:
 - (a) identify each part of the loss;
 - (b) state all facts upon which you base your contention;
 - (c) state the names, **ADDRESSES**, and telephone numbers of all **PERSONS** who have knowledge of the facts; and
 - (d) identify all **DOCUMENTS** and other tangible things that support your contention and state the name, **ADDRESS**, and telephone number of the **PERSON** who has each **DOCUMENT** or thing.

- 16.7 Do you contend that any of the property damage claimed by plaintiff in discovery Proceedings thus far in this case was not caused by the **INCIDENT**? If so:
 - (a) identify each item of property damage;
 - (b) state all facts upon which you base your contention;
 - (c) state the names, **ADDRESSES**, and telephone numbers of all **PERSONS** who have knowledge of the facts; and
 - (d) identify all **DOCUMENTS** and other tangible things that support your contention and state the name, **ADDRESS**, and telephone number of the **PERSON** who has each **DOCUMENT** or thing.

- 16.8 Do you contend that any of the costs of repairing the property damage claimed by plaintiff in discovery proceedings thus far in this case were unreasonable? If so:
 - (a) identify each cost item;
 - (b) state all facts upon which you base your contention;
 - (c) state the names, **ADDRESSES**, and telephone numbers of all **PERSONS** who have knowledge of the facts; and
 - (d) identify all **DOCUMENTS** and other tangible things that support your contention and state the name, **ADDRESS**, and telephone number of the **PERSON** who has each **DOCUMENT** or thing.

- 16.9 Do **YOU OR ANYONE ACTING ON YOUR BEHALF** have any **DOCUMENT** (for example, insurance bureau index reports) concerning claims for personal injuries made before or after the **INCIDENT** by a plaintiff in this case? If so, for each plaintiff state:
 - (a) the source of each **DOCUMENT**;
 - (b) the date each claim arose;
 - (c) the nature of each claim; and
 - (d) the name, **ADDRESS**, and telephone number of the **PERSON** who has each **DOCUMENT**.

- 16.10 Do **YOU OR ANYONE ACTING ON YOUR BEHALF** have any **DOCUMENT** concerning the past or present physical, mental, or emotional condition of any plaintiff in this case from a **HEALTH CARE PROVIDER** not previously identified (except for expert witnesses covered by Code of Civil Procedure sections 2034.210–2034.310)? If so, for each plaintiff state:
 - (a) the name, **ADDRESS**, and telephone number of each **HEALTH CARE PROVIDER**;
 - (b) a description of each **DOCUMENT**; and
 - (c) the name, **ADDRESS**, and telephone number of the **PERSON** who has each **DOCUMENT**.

17.0 Responses to Request for Admissions

- 17.1 Is your response to each request for admission served with these interrogatories an unqualified admission? If not, for each response that is not an unqualified admission:
 - (a) state the number of the request;
 - (b) state all facts upon which you base your response;
 - (c) state the names, **ADDRESSES**, and telephone numbers of all **PERSONS** who have knowledge of those facts; and
 - (d) identify all **DOCUMENTS** and other tangible things that support your response and state the name, **ADDRESS**, and telephone number of the **PERSON** who has each **DOCUMENT** or thing.

18.0 [Reserved]

19.0 [Reserved]

20.0 How the Incident Occurred—Motor Vehicle

- 20.1 State the date, time, and place of the **INCIDENT** (closest street **ADDRESS** or intersection).

- 20.2 For each vehicle involved in the **INCIDENT**, state:
 - (a) the year, make, model, and license number;
 - (b) the name, **ADDRESS**, and telephone number of the driver;

- (c) the name, **ADDRESS**, and telephone number of each occupant other than the driver;
- (d) the name, **ADDRESS**, and telephone number of each registered owner;
- (e) the name, **ADDRESS**, and telephone number of each lessee;
- (f) the name, **ADDRESS**, and telephone number of each owner other than the registered owner or lien holder; and
- (g) the name of each owner who gave permission or consent to the driver to operate the vehicle.
- 20.3 State the **ADDRESS** and location where your trip began and the **ADDRESS** and location of your destination.
- 20.4 Describe the route that you followed from the beginning of your trip to the location of the **INCIDENT**, and state the location of each stop, other than routine traffic stops, during the trip leading up to the **INCIDENT**.
- 20.5 State the name of the street or roadway, the lane of travel, and the direction of travel of each vehicle involved in the **INCIDENT** for the 500 feet of travel before the **INCIDENT**.
- 20.6 Did the **INCIDENT** occur at an intersection? If so, describe all traffic control devices, signals, or signs at the intersection.
- 20.7 Was there a traffic signal facing you at the time of the **INCIDENT**? If so, state:
- your location when you first saw it;
 - the color;
 - the number of seconds it had been that color; and
 - whether the color changed between the time you first saw it and the **INCIDENT**.
- 20.8 State how the **INCIDENT** occurred, giving the speed, direction, and location of each vehicle involved:
- just before the **INCIDENT**;
 - at the time of the **INCIDENT**; and (c) just after the **INCIDENT**.
- 20.9 Do you have information that a malfunction or defect in a vehicle caused the **INCIDENT**? If so:
- identify the vehicle;
 - identify each malfunction or defect;
 - state the name, **ADDRESS**, and telephone number of each **PERSON** who is a witness to or has information about each malfunction or defect; and
 - state the name, **ADDRESS**, and telephone number of each **PERSON** who has custody of each defective part.
- 20.10 Do you have information that any malfunction or defect in a vehicle contributed to the injuries sustained in the **INCIDENT**? If so:
- identify the vehicle;
 - identify each malfunction or defect;
 - state the name, **ADDRESS**, and telephone number of each **PERSON** who is a witness to or has information about each malfunction or defect; and
- (d) state the name, **ADDRESS**, and telephone number of each **PERSON** who has custody of each defective part.
- 20.11 State the name, **ADDRESS**, and telephone number of each owner and each **PERSON** who has had possession since the **INCIDENT** of each vehicle involved in the **INCIDENT**.
- 25.0 [Reserved]
- 30.0 [Reserved]
- 40.0 [Reserved]
- 50.0 Contract
- 50.1 For each agreement alleged in the pleadings:
- identify each **DOCUMENT** that is part of the agreement and for each state the name, **ADDRESS**, and telephone number of each **PERSON** who has the **DOCUMENT**;
 - state each part of the agreement not in writing, the name, **ADDRESS**, and telephone number of each **PERSON** agreeing to that provision, and the date that part of the agreement was made;
 - identify all **DOCUMENTS** that evidence any part of the agreement not in writing and for each state the name, **ADDRESS**, and telephone number of each **PERSON** who has the **DOCUMENT**;
 - identify all **DOCUMENTS** that are part of any modification to the agreement, and for each state the name, **ADDRESS**, and telephone number of each **PERSON** who has the **DOCUMENT**;
 - state each modification not in writing, the date, and the name, **ADDRESS**, and telephone number of each **PERSON** agreeing to the modification, and the date the modification was made;
 - identify all **DOCUMENTS** that evidence any modification of the agreement not in writing and for each state the name, **ADDRESS**, and telephone number of each **PERSON** who has the **DOCUMENT**.
- 50.2 Was there a breach of any agreement alleged in the pleadings? If so, for each breach describe and give the date of every act or omission that you claim is the breach of the agreement.
- 50.3 Was performance of any agreement alleged in the pleadings excused? If so, identify each agreement excused and state why performance was excused.
- 50.4 Was any agreement alleged in the pleadings terminated by mutual agreement, release, accord and satisfaction, or novation? If so, identify each agreement terminated, the date of termination, and the basis of the termination.
- 50.5 Is any agreement alleged in the pleadings unenforceable? If so, identify each unenforceable agreement and state why it is unenforceable.
- 50.6 Is any agreement alleged in the pleadings ambiguous? If so, identify each ambiguous agreement and state why it is ambiguous.
- 60.0 [Reserved]

ATTORNEY OR PARTY WITHOUT ATTORNEY: STATE BAR NO: 110636 NAME: JENNIFER J. HASSO, ESQ. FIRM NAME: THE LAW OFFICES OF JENNIFER J. HASSO STREET ADDRESS: 2765 SECOND AVENUE CITY: SAN DIEGO STATE: CA ZIP CODE: 92103 TELEPHONE NO.: 619.232.2765 FAX NO.: 619.232.4485 E-MAIL ADDRESS: JHASSO@GMAIL.COM ATTORNEY FOR (name): LINA CHARRY, ESQ.	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN DIEGO STREET ADDRESS: 330 WEST BROADWAY MAILING ADDRESS: SAME AS ABOVE CITY AND ZIP CODE: SAN DIEGO 92101 BRANCH NAME: CENTRAL DIVISION	CASE NUMBER: 37-2017-00019692
PLAINTIFF/PETITIONER: LINA CHARRY, et al. DEFENDANT/RESPONDENT: BESSMON KALASHO, et al.	JUDICIAL OFFICER: TIMOTHY B. TAYLOR
PROOF OF ELECTRONIC SERVICE	DEPARTMENT: C-72

1. I am at least 18 years old.
 - a. My residence or business address is (specify):
2765 SECOND AVENUE, SAN DIEGO, CALIFORNIA 92103
 - b. My electronic service address is (specify):
JHASSO@GMAIL.COM
2. I electronically served the following documents (exact titles):
REQUESTS FOR ADMISSIONS [SET ONE] AND FORM INTERROGATORIES [SET TWO] ON THE FOLLOWING PARTIES:
BESSMON KALASHO, JESSICA KALASHO, MIDDLE EASTERN CHAMBER OF COMMERCE AND MISS MIDDLE EAST
BEAUTY PAGEANT USA, INC.

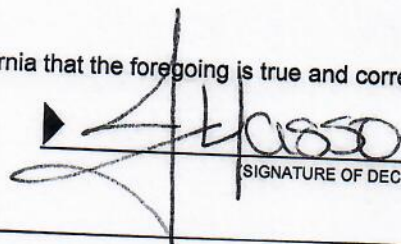
The documents served are listed in an attachment. (Form POS-050(D)/EFS-050(D) may be used for this purpose.)
3. I electronically served the documents listed in 2 as follows:
 - a. Name of person served: Stephen J. Liosi and James Finnigan
On behalf of (name or names of parties represented, if person served is an attorney):
Defendants
 - b. Electronic service address of person served :
attorneylios@gmail.com jpf@finiganlaw.com
 - c. On (date): MAY 3, 2018

The documents listed in item 2 were served electronically on the persons and in the manner described in an attachment. (Form POS-050(P)/EFS-050(P) may be used for this purpose.)

Date: MAY 3, 2018

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

JENNIFER J. HASSO, ESQ.
 (TYPE OR PRINT NAME OF DECLARANT)


 SIGNATURE OF DECLARANT

PROOF OF ELECTRONIC SERVICE
 (Proof of Service/Electronic Filing and Service)

ATTORNEY OR PARTY WITHOUT ATTORNEY: STATE BAR NO: 110636 NAME: JENNIFER J. HASSO, ESQ. FIRM NAME: THE LAW OFFICES OF JENNIFER J. HASSO STREET ADDRESS: 2765 SECOND AVENUE CITY: SAN DIEGO STATE: CA ZIP CODE: 92103 TELEPHONE NO.: 619.232.2765 FAX NO.: 619.232.4485 E-MAIL ADDRESS: JHASSO@GMAIL.COM ATTORNEY FOR (name): PLAINTIFF/CROSS DEFENDANT LINA CHARRY	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN DIEGO STREET ADDRESS: 330 WEST BROADWAY MAILING ADDRESS: SAME AS ABOVE CITY AND ZIP CODE: SAN DIEGO 92101 BRANCH NAME: CENTRAL DIVISION	CASE NUMBER: 37-2017-00019692-CU-FR-CTL
Plaintiff/Petitioner: LINA CHARRY, et al. Defendant/Respondent: BESSMON KALASHO, et al.	JUDICIAL OFFICER: Hon. Timothy B. Taylor
<p style="text-align: center;">PROOF OF SERVICE—CIVIL</p> <p>Check method of service (only one):</p> <input type="checkbox"/> By Personal Service <input checked="" type="checkbox"/> By Mail <input type="checkbox"/> By Overnight Delivery <input type="checkbox"/> By Messenger Service <input type="checkbox"/> By Fax	DEPARTMENT: C-72

*Do not use this form to show service of a summons and complaint or for electronic service.
See USE OF THIS FORM on page 3.*

1. At the time of service I was over 18 years of age and not a party to this action.
2. My residence or business address is:
2765 SECOND AVENUE, SAN DIEGO, CALIFORNIA 92103
3. The fax number from which I served the documents is (complete if service was by fax):
4. On (date): 5.3.18 I served the following documents (specify):
Requests for Admissions [Set One] & Form Interrogatories [Set Two] on; Bessmon Kalasho, Jessica Kalasho, Middle Eastern Chamber of Commerce and Miss Middle East Beauty Pageant USA, Inc.
 The documents are listed in the Attachment to Proof of Service—Civil (Documents Served) (form POS-040(D)).
5. I served the documents on the person or persons below, as follows:
 - a. Name of person served: Defendants through counsel listed below
 - b. (Complete if service was by personal service, mail, overnight delivery, or messenger service.)
Business or residential address where person was served:
Stephen J. Liosi PO Box 396, Pasadena, California, 91102 & James Paul Finigan 6437 Caminito Blythefield, Ste C, La Jolla, CA
 - c. (Complete if service was by fax.)
Fax number where person was served: The names, addresses, and other applicable information about persons served is on the Attachment to Proof of Service—Civil (Persons Served) (form POS-040(P)).
6. The documents were served by the following means (specify):
 - a. **By personal service.** I personally delivered the documents to the persons at the addresses listed in item 5. (1) For a party represented by an attorney, delivery was made (a) to the attorney personally; or (b) by leaving the documents at the attorney's office, in an envelope or package clearly labeled to identify the attorney being served, with a receptionist or an individual in charge of the office; or (c) if there was no person in the office with whom the notice or papers could be left, by leaving them in a conspicuous place in the office between the hours of nine in the morning and five in the evening. (2) For a party, delivery was made to the party or by leaving the documents at the party's residence with some person not younger than 18 years of age between the hours of eight in the morning and six in the evening.

CASE NAME:
Charry, et al. v. Kalasho, et al.

CASE NUMBER:

POS-040

6. b. **By United States mail.** I enclosed the documents in a sealed envelope or package addressed to the persons at the addresses in item 5 and (specify one):
- (1) deposited the sealed envelope with the United States Postal Service, with the postage fully prepaid.
 - (2) placed the envelope for collection and mailing, following our ordinary business practices. I am readily familiar with this business's practice for collecting and processing correspondence for mailing. On the same day that correspondence is placed for collection and mailing, it is deposited in the ordinary course of business with the United States Postal Service, in a sealed envelope with postage fully prepaid.
- I am a resident or employed in the county where the mailing occurred. The envelope or package was placed in the mail at (city and state): San Diego, California
- c. **By overnight delivery.** I enclosed the documents in an envelope or package provided by an overnight delivery carrier and addressed to the persons at the addresses in item 5. I placed the envelope or package for collection and overnight delivery at an office or a regularly utilized drop box of the overnight delivery carrier.
- d. **By messenger service.** I served the documents by placing them in an envelope or package addressed to the persons at the addresses listed in item 5 and providing them to a professional messenger service for service. (A declaration by the messenger must accompany this Proof of Service or be contained in the Declaration of Messenger below.)
- e. **By fax transmission.** Based on an agreement of the parties to accept service by fax transmission, I faxed the documents to the persons at the fax numbers listed in item 5. No error was reported by the fax machine that I used. A copy of the record of the fax transmission, which I printed out, is attached.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: 5.3.2018

Jennifer J. Hasso, Esq.

(TYPE OR PRINT NAME OF DECLARANT)

(SIGNATURE OF DECLARANT)

(If item 6d above is checked, the declaration below must be completed or a separate declaration from a messenger must be attached.)

DECLARATION OF MESSENGER

- By personal service.** I personally delivered the envelope or package received from the declarant above to the persons at the addresses listed in item 5. (1) For a party represented by an attorney, delivery was made (a) to the attorney personally; or (b) by leaving the documents at the attorney's office, in an envelope or package clearly labeled to identify the attorney being served, with a receptionist or an individual in charge of the office; or (c) if there was no person in the office with whom the notice or papers could be left, by leaving them in a conspicuous place in the office between the hours of nine in the morning and five in the evening. (2) For a party, delivery was made to the party or by leaving the documents at the party's residence with some person not younger than 18 years of age between the hours of eight in the morning and six in the evening.

At the time of service, I was over 18 years of age. I am not a party to the above-referenced legal proceeding.

I served the envelope or package, as stated above, on (date):

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:

(NAME OF DECLARANT)

(SIGNATURE OF DECLARANT)