# EXHIBIT D

## DEFENDANTS' STANDARD INTERROGATORIES TO PLAINTIFF LOSS OF CONSORTIUM (PERSONAL INJURY) [SET ONE]

PROPOUNDING PARTY:

Defendants

**RESPONDING PARTY:** 

SET NO.:

One

Each plaintiff in the above-captioned asbestos litigation is required to respond to the following standard interrogatories separately and fully in writing, under oath, pursuant to *Code of Civil Procedure* section 2030.010 *et seq.* within 30 days of the filing of a complaint. In responding to these standard interrogatories, you are required to furnish all information that is available to you or your attorney(s). If you cannot answer a standard interrogatory completely, answer it to the fullest extent possible and specify the reason(s) for your inability to respond fully.

#### **INTERROGATORIES**

## **INTERROGATORY No. 1:**

Please state:

- a. Your full name including first, middle and last names;
- b. Your address:
- c. Whether you currently reside with your spouse; and
- d. Your Social Security number.

#### **INTERROGATORY No. 2:**

Please state the date of your current marriage and the place of your current marriage.

#### **INTERROGATORY No. 3:**

Was your marriage ceremonial or common-law?

- a. If marriage was ceremonial, please state the name, address and official capacity of the person performing the marriage;
- b. If marriage was common-law, please outline the facts and circumstances relied upon to establish the marriage.

#### **INTERROGATORY No. 4:**

Did you and spouse have any natural or adopted offspring? If "yes", please state for each offspring:

- a. Full name including first, middle and last names;
- b. Address;
- c. Date of birth; and
- d. Whether natural or adopted.

## **INTERROGATORY NO. 5:**

Have you had any previous marriages? If "yes", please state:

- a. Previous spouse's name;
- b. Previous spouse's address;
- c. Dates of marriage;
- d. Names and ages of children, whether natural or adopted; and
- e. Place, date and circumstances under which marriage was dissolved or terminated.

# **INTERROGATORY No. 6:**

Has your spouse had any previous marriages? If "yes", please state:

- a. Previous spouse's name;
- b. Previous spouse's address;
- c. Date of marriage;
- d. Names and ages of children, whether natural or adopted; and

e. Place, date and circumstances under which marriage was dissolved or terminated.

## **INTERROGATORY No. 7:**

On the average, how many hours per day did you regularly spend with your spouse prior to his/her current illness?

#### **INTERROGATORY NO. 8:**

On the average, how many hours per day do you currently spend with your spouse?

## **INTERROGATORY NO. 9:**

What hobbies, sports, games, cultural, vocational and other interests did you share with or enjoy in common with your spouse prior to his/her illness?

#### **INTERROGATORY No. 10:**

Have you ever been legally separated from your spouse? If "yes", please state the circumstances, duration and dates of each such separation.

## **INTERROGATORY NO. 11:**

Have you ever been voluntarily separated from your spouse for reasons due to differences or disputes arising out of the marital relationship? If "yes", please state the circumstances and duration of each such separation.

## **INTERROGATORY NO. 12:**

Within the last 10 years have you or your spouse ever filed a civil complaint with any governmental agency against the other for physical abuse? If "yes", please state:

- a. The person initiating the procedure;
- b. A description of the complaint, charge or grievance;

- c. The court or governmental body before which the proceeding was brought; and
- d. The disposition of the proceeding.

### **INTERROGATORY No. 13:**

Within the last 10 years have you or your spouse ever filed a criminal complaint with any governmental agency against the other for physical abuse? If "yes", please state:

- a. The person initiating the procedure;
- b. A description of the complaint, charge or grievance;
- c. The court or governmental body before which the proceeding was brought; and
- d. The disposition of the proceedings.

#### **INTERROGATORY NO. 14:**

Have you ever seen or consulted with any therapist or counselor or professional about sexual dysfunction or sexual incompatibility in your marriage? If "yes", please state the dates, the names of the parties seen and the circumstances of each such visit or consultation.

#### **INTERROGATORY NO. 15:**

Please state the name, address and telephone number of every person who assisted you in any way in answering these interrogatories.

#### **INTERROGATORY NO. 16:**

Either (1) attach all DOCUMENTS evidencing the information sought in these interrogatories and their subparts to your answers to these interrogatories, or (2) attach disks containing such data, or (3) describe such DOCUMENTS with sufficient particularity that they may be made the subject of a request for production of documents.