

# Exhibit

# A

**(Interrogatories to Plaintiff Dated June 3, 2010)**

UNITED STATES DISTRICT COURT  
EASTERN DISTRICT OF MICHIGAN  
SOUTHERN DIVISION

THOMAS D'ANGELO,

Plaintiff,

vs.

PAUL PARENT, CLINTON TOWNSHIP,  
a municipal entity, NICHOLAS DYKAS,  
JASON FIGURSKI and KEITH WATSON,  
in their official and individual capacities,  
jointly and severally,

Defendants.

Case No. 2:10-c-12195

Hon. Lawrence P. Zatkoff

Magistrate Judge Mona Majzoub

Removed from Macomb County Circuit  
Case No. 10-944-NO

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**INTERROGATORIES TO PLAINTIFF**

NOW COME the above-named Defendants, by and through attorneys, Plunkett Cooney, and in accordance with Rule 33 of the Federal Rules of Civil Procedure hereby submit the following Interrogatories, the same to be answered in writing and under oath within thirty (30) days of the date of service.

The information sought must be given, whether it is secured by you, your agent, your representative or attorney, or any other person from whom you can obtain said information and who is competent to testify as to the facts stated.

These Interrogatories shall be deemed continuing as required by Court Rule, and supplemental answers thereto shall be required if Defendants either directly or indirectly obtains further

or different information from that upon which the answers are based from the time that they are filed until trial of this matter.



QUESTION:

1. Please state:
  - a. Your name, and if you have ever used or been known by any other name, please state such other name;
  - b. Your present address and state of residency;
  - c. Each of your former addresses for the past ten (10) years together with the dates when you lived at each address;
  - d. Your date and place of birth;
  - e. Your Social Security Number;
  - f. Your driver's license number and the state in which you are licensed.
  - g. Are you married? If so, when and where you were married and the full name and address of your spouse;
  - h. If there is a divorce action pending or contemplated between you and your present spouse;
  - i. Whether or not a divorce action has ever been filed;
  - j. If a divorce action has been filed, give the name of the court in which it is pending.

ANSWER:

QUESTION:

2. What is the name, address, relationship and age of any person dependent upon you.

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- a. State the amount of money, if any, you contribute to the support of the dependents named above.

ANSWER:

QUESTION:

3. What is your present occupation?
  - a. List the name and address of your present employer;
  - b. List the name and address of your former employers for the past ten (10) years, including the dates of employment;
  - c. Please state your duties for each employer;
  - d. For each employer, whether a physical examination was required and, if so, state the date, place and person giving the physical examination;
  - e. For each employer, whether or not you made any representations in writing or answered in writing any questions concerning your physical condition;
  - f. The name of your immediate boss, foreman or other superior to whom you were responsible at each of the places of employment listed above.

ANSWER:

QUESTION:

4. Describe your formal education, including the name of all schools attended, the dates of graduation, and any special training or experience for work in your business or any profession.

ANSWER:

QUESTION:

5. Did you file a local, state or federal income tax return at any time during the past seven (7) years? If so, please state:

- a. In which years and with which entities;
- b. Whether you have copies of these returns;
- c. If you do not have copies, the name of the person, firm or corporation which has the copies;
- d. The amount reported in each return as income.
- e. What were your gross earnings from employment for each of the past seven (7) years?

ANSWER:

QUESTION:

6. Please state:
  - a. What injuries or other damages you received in the occurrence which forms the basis for your Complaint;
  - b. What was the exact time, date and location of the occurrence;
  - c. What was the date, time and manner you first notified this Defendant of these injuries or damages;
  - d. If there are any other lawsuits arising out of this occurrence, state the name of the parties and the court in which they are pending.

ANSWER:

QUESTION:

7. If you received any medical care or treatment as a result of this occurrence, please state:

- a. The name and address of each person rendering any medical care or treatment;
- b. The dates of any medical treatment or attention;
- c. The type of examination, treatment or attention you received;
- d. The specialty of the doctor or person rendering any care or treatment;
- e. The sums charged for the services rendered;
- f. The amounts owing, if any.

ANSWER:

QUESTION:

8. Have you ever, either by yourself or through an attorney, filed a lawsuit, made a written claim, or received any settlement as a result of any personal injury to yourself or any member of your family? If so, state the following:

- a. The date and place each such action was filed giving the name of the Court, the name of the other party or parties involved, the number of such actions and the name of the attorneys representing each party;
- b. A description of the nature of each such action;
- c. The result of each such action, whether or not there was an appeal and the result of the appeal, and whether or not such case was reported, and the name, volume number and page citation of each such report.

ANSWER:

QUESTION:

9. Have you ever been arrested, indicted or convicted of a felony or crime within the past ten (10) years?

- a. If so, please state the nature of the alleged criminal act, and when and where the arrest or indictment or conviction took place.

ANSWER:

QUESTION:

10. Do you or does your attorney or anyone from whom you can obtain information know of any photographs, videos, movies, etc., of the persons, places or things involved in the occurrence, including the scene, taken at any time? If so, state:

- a. How many were taken;
- b. When they were taken;
- c. Who took them;
- d. Who presently has custody and/or control of them;
- e. Will you provide copies of same, this Defendant to pay reasonable cost for reproduction?
- f. If you will not provide said copies then, pursuant to MCR 2.310, demand is made for production of all photographs, movies, videos, and books, said production, to take place at the offices of Plunkett & Cooney within twenty-eight (28) days hereof by the delivery of photographic duplicates or the turning over of same for duplication purposes to Plunkett & Cooney.

ANSWER:

QUESTION:

11. State the name, address and telephone number of each and every person who may testify at the time of trial concerning the occurrence alleged in the Complaint.

ANSWER:



QUESTION:

12. Have you applied for employment at any time since the date of this occurrence?

If so, state:

- a. The name and address of each and every person, firm, corporation, partnership, or other entity to whom you have applied;
- b. The date of the application;
- c. The results of the application.

ANSWER:

QUESTION:

13 Are you now receiving or have you ever received or claimed any disability pension, income or insurance, or any Worker's Compensation from any agency, company, person, insurance company, corporation, state or government and, if so, please state:

- a. The nature of any such payment;
- b. The dates you received such income;
- c. For what injuries or disability did you receive it and how such injury occurred or disability arose;
- d. By whom paid;
- e. Whether or not you now have any present disability as a result of such injuries or disability;
- f. If so, the nature and extent of such disability;
- g. Whether or not you had any disability at the time of the occurrence referred to in the Complaint;
- h. If so, the nature and extent of such disability.

ANSWER:

QUESTION:

14 Have you made claim for any benefits under any medical pay coverage or policy of insurance relating to injuries arising out of said occurrence? If so, state:

- a. The name of the insurance company or organization to whom said claim was made;
- b. The date of the claim or application;
- c. The claim number and policy number.

ANSWER:

QUESTION:

15. Have you agreed with anyone to settle or accept any sum of money, contingent payment, or other thing of value as a result of this occurrence? If so, please state:

- a. The details of the consideration which you have accepted or agreed to accept;
- b. The name of the person or entity providing compensation, their address and telephone number;
- c. The claim number utilized by the person or entity.

ANSWER:

QUESTION:

16. Please state the specific amount of money for which you seek recovery in this action.

ANSWER:

QUESTION:

17. Have you ever served in the Armed Forces or performed services for any branch of any governmental agency? If so, state:

- a. The name of each such organization and the particular branch for whom you performed services;
- b. The dates and places of such services;
- c. The serial or identification number;
- d. A detailed description of the services performed;
- e. Whether or not a physical exam was required, and if so, the dates and places of such exams;
- f. The dates of termination of such services;
- g. A detailed description of the reason why the services were discontinued.

ANSWER:

QUESTION:

18. Have you ever entered or been committed to any institution, either public or private, for the treatment or observation of mental conditions, alcoholism, narcotic addiction, or disorders of any kind and, if so, state:

- a. The name and address of such institution;
- b. The length and the dates of your stay;
- c. The purpose or reason for your entry into such institution;
- d. The name and address of the doctor who treated you for such condition.

ANSWER:

QUESTION:

19 State whether you have made any statement or statements in any form to any person regarding any of the events or happenings referred to in your Complaint and, if so, state:

- a. The name and address of the person or persons to whom such statements were made;
- b. The date such statements were made;
- c. The form of the statement, whether written, oral, by recording device or to a stenographer;
- d. Whether such statements, if written, were signed;
- e. The name and address of the persons presently having custody of such statements.

ANSWER:

QUESTION:

20. State the full name and last-known address of every witness known to you or to your attorneys who claim to have seen or heard the Defendant, or any person employed by the Defendant, make any statement or statements pertaining to any of the events or happenings alleged in your Complaint.

ANSWER:

QUESTION:

21. Supply the following information with respect to each individual whose name you have given in the answer to the preceding Interrogatory:

- a. The location or locations where the Defendant made any such statement or statements;
- b. The name and address of the person or persons in whose presence the Defendant made any such statement or statements;
- c. The time and date upon which the Defendant made any such statement or statements;
- d. The full name and address of any other person who was present at the time and place the Defendant made such statement or statements;
- e. Whether you or anyone acting on your behalf obtained statements in any form from any persons who claim to be able to testify to the statement or statements made by the Defendant.

ANSWER:

QUESTION:

22. If the answer to paragraph (e) above is in the affirmative, state:
- a. The name and address of the persons from whom any such statements were taken;
  - b. The date upon which said statements were taken;
  - c. The name and address of the employers or the persons who took such statements;
  - d. The name and address of the persons having custody of such statements;
  - e. Whether such statements were written, oral, by recording device, or by court reporter or stenographer.

ANSWER:

QUESTION:

23. Have you, or your attorney, or anyone acting on your behalf obtained statements in any form from any persons regarding any of the events or happenings referred to in your Complaint and, if so, state:

- a. The name and address of the person from whom any such statements were taken;
- b. The dates on which such statements were taken;
- c. The name and address of the persons and employers of such person who took such statements;
- d. The name and address of the person having custody of such statements;
- e. Whether such statements were written, taken by recording device, by court reporter or stenographer.

ANSWER:

QUESTION:

24. Have you or has anyone acting on your behalf had any conversations with anyone thought to have knowledge of the facts alleged in your Complaint? If so, please state:

- a. The name and address of each such person with whom a conversation was held;
- b. The name and address of the person who was leading each such conversation;
- c. The nature of each such conversation (tape recorded, etc.);
- d. The date each such conversation took place;
- e. The name and address of the person currently having custody of the memorialization of each such conversation;
- f. Whether you will voluntarily make the contents of each such conversation available to counsel for Defendant without the necessity of a Motion to Produce.

ANSWER:

QUESTION:

25. Do you object to furnishing Authorizations enabling us to obtain your:
- a. IRS tax returns;

- b. Medical records;
- c. Police records;
- d. Social Security records;
- e. Wage and employment information.

(If not, please sign the attached Authorizations and attach same to your Answers to these Interrogatories.)

ANSWER:

PLUNKETT COONEY

BY: S/Peter W. Peacock  
PETER W. PEACOCK (P37201)  
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Dated: June 3, 2010

**PROOF OF SERVICE**

The undersigned certifies that on June 3, 2010, a copy of the foregoing document was served upon the attorney(s) of record and Defendant Parent in this matter at their stated business address as disclosed by the records herein via:

- |   |   |
|---|---|
| <input type="checkbox"/> Hand delivery        | <input type="checkbox"/> Overnight mail |
| <input checked="" type="checkbox"/> U.S. Mail | <input type="checkbox"/> Facsimile      |

I declare under the penalty of perjury that the foregoing statement is true to the best of my information, knowledge and belief.

s/Peter W. Peacock