**EXHIBIT A**

**COURT’S INTERROGATORIES TO INDIVIDUAL PLAINTIFF(S)**

1. Your residential address.
2. The name of your current employer and place of employment.
3. Describe the nature of your disability
4. List each of the defendant’s websites (including the URL of the website) that you visited that are at issue in this case and the date(s) you visited those websites?
5. Did anyone else review or visit the defendant’s website with you on the date(s) specified above? If so, state such persons’ name(s) and address(es).
6. Describe the purpose of your visit to the website(s).
7. Specifically list each barrier or deficiency that you personally observed or experienced while visiting the website(s).
8. Please specify all the ways in which you allege that the defendant’s website fails to comply with 28 C.F.R. 36.302(e) or with any other applicable law.
9. Did you take notes or make a contemporaneous record of these barriers (i.e., screen shots or print outs of the website)? If so, please attach a copy to these Answers.
10. Identify the physical location(s) the use and enjoyment of which was impacted by the alleged deficiencies in the defendant’s website(s).
11. What is the proximity of the physical locations identified in response to the foregoing interrogatory to your home and place of employment?
12. Describe your past patronage of the defendant’s business and any of the physical locations identified in response to the foregoing interrogatories.
13. Describe the definiteness of your plans to visit any physical location associated with the defendant’s business, and identify the physical location(s).
14. Please list any other Title III cases in which you have been a party in this District.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Plaintiff

STATE OF FLORIDA

COUNTY OF \_\_\_\_\_\_\_\_\_\_\_

The foregoing instrument was acknowledged before me by means of \_\_\_ physical presence or \_\_\_ online notarization, by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, who being first duly sworn, deposes and says that he/she has read the foregoing Answers to Interrogatories, knows the contents of same, and to the best of his/her knowledge and belief, the same are true and correct.

SWORN TO AND SUBSCRIBED before me by means of \_\_\_ physical presence or \_\_\_ online notarization, on this \_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 2024.

NOTARY PUBLIC

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Person Taking Acknowledgment

Notary Stamp Print Name:

Title: Notary Public

Serial No. (if any):

Commission Expires: