EXHIBIT A COURT'S INTERROGATORIES TO INDIVIDUAL PLAINTIFF(S)

Residence address.						
Name of current employer and place of employment.						
Date(s) and time(s) that you visited the facility.						
Purpose of your visit(s) and duration of your stay(s).						
4a.	1) What is the proximity of the business to the plaintiff's home/place of employment					
	2) Describe the plaintiff's past patronage of defendant's business					
	3) Describe the definiteness of the plaintiff's plans to return					
5.	Did anyone else accompany you? If so, who?					
6.	Describe the nature of your disability.					

7.	Specifically list each of the architectural barriers which you personally observed or experienced at this facility.			
8.	Did you take notes or make a content of so, please attach a copy to the	-		
9.	Please list any other Title III cases in District.	which you have been a party in this		
	Nam	e 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	Stamp	Signature of Person Taking Acknowledgment Print Name: Title: Notary Public Serial No. (if any): Commission Expires:		

COURT'S INTERROGATORIES TO CORPORATE PLAINTIFF(S)

1.	What is Plaintiff's business address?				
2.	When and v	When and where was Plaintiff incorporated?			
3.	Who are the current officers and directors of Plaintiff?				
4.	Provide the name and address of any of Plaintiff's members who have attempted to access and use the subject premises in the past, but have been discriminated against because of architectural barriers in violation of the ADA.				
5.	For each me	ember listed in answer to No. 3 above, provide:			
	a.	The date(s) and time(s) that each member visited the facility			
	b.	The purpose of the visit and duration of stay			
	С	What is the proximity of the business to the plaintiff's home/place of employment			
	d	Describe the plaintiff's past patronage of defendant's business			
	e	Describe the definiteness of the plaintiff's plans to return			
	f.	The names of any person(s) who accompanied the member			

	g.	The nature of the m	nember's disability
	h.	The architectural ba	arriers personally observed or experienced
	i.	contemporane	ber(s) took notes or made a ous record of these barriers, and if so, please o these answers.
6. P	lease list a Distric	•	es in which Plaintiff has been a party in this
		F	Зу:
			As its:
		_ F	Print Name
STATE OF	FLORIDA OF	_	
notarizatio	n, byo Interrogatori	, who being fi	d before me by means of physical presence or online rst duly sworn, deposes and says that his has read the foregoing e, and to the best of his/her knowledge and belief, the same are
		ND SUBSCRIBED before me by 2024.	y means of physical presence or online notarization, on
			NOTARY PUBLIC
Notary Stamp			Signature of Person Taking Acknowledgment Print Name: Title: Notary Public Serial No. (if any): Commission Expires: