

This form is not printable, and cannot be completed online. This is a complex form with signatures needed on various pages. The Court requires the carbonless multi-part form, which is available from any District Court location (Baltimore City Civil forms can be found at Fayette and Gay Street location only). A sample form is provided here so you may see the information needed to complete the carbonless form.

Complaint # \_\_\_\_\_

Plaintiff/Judgment Creditor \_\_\_\_\_

Defendant/Judgment Debtor \_\_\_\_\_

Address \_\_\_\_\_

VS.

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_ Telephone \_\_\_\_\_

City, State, Zip \_\_\_\_\_ Telephone \_\_\_\_\_

**MOTION AND ORDER COMPELLING ANSWERS  
TO INTERROGATORIES IN AID OF EXECUTION  
(Md. Rule 3-421)**

Interrogatories were served on the Defendant \_\_\_\_\_  
on \_\_\_\_\_, more than fifteen (15) days have elapsed, and no answer has  
been received.

Payment of the judgment amount has not been made. It is hereby requested that an Order directing the Defendant to answer the interrogatories be issued.

If payment of the judgment amount is received, I agree to promptly notify the Court.

Judgment Entered \_\_\_\_\_

Signature of Plaintiff/ Attorney/ Attorney Code \_\_\_\_\_

Printed Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Telephone Number \_\_\_\_\_

Fax \_\_\_\_\_

E-mail \_\_\_\_\_

**CERTIFICATE OF SERVICE**

I certify that I served a copy of this motion upon the following party or parties by  mailing first class mail, postage prepaid  hand delivery, on \_\_\_\_\_ to:

Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Date \_\_\_\_\_

Signature of Party Serving/Attorney/Attorney Code \_\_\_\_\_

**ORDER**

\_\_\_\_\_ is directed to answer the interrogatories of the Plaintiff, and to serve a copy of the answers on the Plaintiff's attorney of record or, if there is no such attorney, upon the Plaintiff, on or before \_\_\_\_\_.

Date \_\_\_\_\_

Judge \_\_\_\_\_ ID Number \_\_\_\_\_