CHARLES M. DAY, Plaintiff,	χ	IN THE CIRCUIT COURT
VS MOTHERSHED OIL COMPANY; MOTHERSHED OIL COMPANY, INC.; CHARLES WHITE, individually and doing business	X X	OF BALDWIN COUNTY
as HOLLEY'S SHELL STATION; ABC COMPANY; JOHN DOE and RICHARD ROE, individually and doing business as DEF COMPANY, a partnership, being the company(s)	χ χ), χ	ALABAMA
individual(s) or partnership(s) owning or operating HOLLEY'S SHELL STATION on to-wit, November 28, 1971, which name(s) will be supplied by amendment when ascertained, jointly and individually,	X X X	AT LAW
Defendants.	na X aranggamanagangga	CASE NO. 1.369

COMPLAINT

COUNT ONE

Plaintiff claims of the defendants, jointly and severally, the sum of \$75,000.00 as damages for that heretofore and on to-wit, November 28, 1971, the defendants were owners and operators of Holley's Shell Station along Rabun Road at or near its intersection with Interstate Highway 65 in Baldwin County, State of Alabama, and at the aforesaid time and place plaintiff was in the service or employment of the defendants in the following capacity, to-wit, a gasoline station attendant, and while

engaged in the line and scope of his employment with the defendants as such employee, a gasoline pump on the aforesaid premises caught fire severely burning plaintiff's right leg causing him severe pain and mental anguish; he was caused to incur medical expenses in and about his efforts to cure his aforesaid injuries and to lose time from gainful employment, all for which plaintiff sues. Plaintiff further avers that his aforesaid injuries and damages were the direct and proximate result of the negligence of the defendants, viz: the defendants negligently permitted the plaintiff to work on the aforesaid premises under dangerous and unsafe conditions without warning or notifying plaintiff of such danger, which danger was known or ought reasonably have been known to the defendants, hence this suit.

COUNT TWO

Plaintiff claims of the defendants, jointly and severally, the sum of \$75,000.00 as damages for that heretofore and on to-wit, November 28, 1971, the defendants were owners and operators of Holley's Shell Station along Rabun Road at or near its intersection with interstate Highway 65, in Baldwin County, State of Alabama, and at the aforesaid time and place plaintiff was in the service or employment of the defendants in the following capacity, to-wit, a gasoline station attendant, and while engaged in the line and scope of his employment with the defendants as such employee, a gasoline pump on the aforesaid premises caught fire severely burning plaintiff's right leg causing him pain and mental anguish; he was caused to incur medical expenses in and about his efforts to cure his aforesaid injuries and to lose time from gainful employment, all for which plaintiff sues. Plaintiff further avers that the aforesaid injuries and damages were the direct and proximate result of the negligence of the defendants, viz:

the defendants failed to provide the plaintiff with a reasonably safe place in which to work in the discharge of his duties and employment as aforesaid which lack of reasonably safe place in which to work was known or ought reasonably have been known to the defendants, such negligence being the direct and proximate cause of plaintiff's injuries, all for which plaintiff sues for the sum of \$75,000.00.

COUNT THREE

Plaintiff claims of the defendants, jointly and severally, the sum of \$75,000.00 as damages for that heretofore and on to-wit, November 28, 1971, the defendants were owners and operators of Holley's Shell Station along Rabun Road at or near its intersection with Interstate Highway 65, in Baldwin County, State of Alabama, and at the aforesaid time and place plaintiff was in the service or employment of the defendants in the following capacity to-wit, a gasoline station attendant, and while engaged in the line and scope of his employment with the defendants as such employee, a gasoline pump on the aforesaid premises caught fire severely burning plaintiff's right leg causing him severe pain and mental anguish; he was caused to incur medical expenses in and about his efforts to cure his aforesaid injuries and was caused to lose time from gainful employment, all for which plaintiff sues. Plaintiff further avers that his aforesaid injuries and damages were the direct and proximate result of the negligence of the defendants, viz: the defendants negligently permitted or allowed the nozzel of the aforesaid gasoline pump to leak explosive liquid gasoline and fumes without warning or notifying plaintiff thereof, which leakage of explosive liquid gasoline and fumes was known or ought reasonably have been known by the defendants, such negligence being the direct and

proximate cause of an explosion causing the plaintiff's injuries as aforesaid, hence this suit.

M.A. MARSAL, NICHOLAS KEARNEY, KIRTLEY W. BROWN, Attorneys for Plaintiff,

By: Kirtley W Brow

TAYLOR D. WILKINS, JR., Attorney for

Plaintiff,

aylor D. Wilkins

Plaintiff Demands Trial By Jury.

M.A. MARSAL, NICHOLAS KEARNEY, KIRTLEY W. BROWN, Attorneys for Plaintiff,

By:

Kirtley W. Brown

TAYLOR D. WILKINS, JR., Attorney

for Plaintiff,

aylor D. Wilking, Jr

Serve Defendants:

Charles White Rock Hill Road Bay Minette, Alabama

Mothershed Oil Company Bay Minette, Alabama FILED

APR 28 1972

EUNICE B. BLACKMON CLERK

VOL 70 PAGE 71

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SEALE, MARSAL, SEALE & DUKE

LAWYERS

2410 FIRST NATIONAL BANK BUILDING

MOBILE, ALABAMA

M. A. MARSAL
A. J. SEALE
LEON G. DUKE

36601

MAILING ADDRESS POST OFFICE BOX 1746 432-6686

March 8, 1973

Mrs. Eunice Blackmon Clerk of Circuit Court Baldwin County Courthouse Bay Minette, Alabama

Re: Charles M. Day vs Mothershead Oil Company

Case No. 10369

Dear Mrs. Blackmon:

Please dismiss the above-styled case and send the Cost Bill to the Defendant.

Yours very truly,

JOHN J. PILGRIM

JJP/mdf

cc: Honorable Norman E. Waldrop, Jr.

CHARLES M. DAY,

IN THE CIRCUIT COURT OF

Plaintiff,

BALDWIN COUNTY, ALABAMA

vs.

AT LAW

MOTHERSHEAD OIL COMPANY, et al.,

Defendants.

CASE NO. 10,369

INTERROGATORIES TO THE PLAINTIFF

Comes now this Defendant, MOTHERSHEAD OIL COMPANY, in the above style cause and desiring the testimony of the Plaintiff, propounds the following interrogatories as provided under Alabama Code Title 7, §477 et. seq. (1958):

- State your full name, age (give the month, day and year) and place of birth.
- Have you ever been known by any other name and, if so, give the other name or names and state where and when you used such names.
- (a) Has your name ever been legally changed and, if so, state when, where and through what procedure.
- State your present resident address and the period 3. during which you have resided at said address.
- (a) List all other addresses at which you have resided during the past ten years and the dates of the use of each.
 - 4. Are you married at the present time and, if so,
- (a) Give names, ages, present addresses and places of employment (addresses) of all children.
 - (b) Give your spouse's full name.
- (c) Give your spouse's address for the five years before your marriage.
 - (d) The date and place of your marriage.
- (e) State whether or not your spouse is now living with you.

- (f) If not, when the separation occurred, and
 (g) Your spouse's present address.
 If you were previously married, state for each previous
 (a) The name and present residence address of each
- (b) The dates of commencement and termination of each marriage.

5.

spouse:

spouse.

- (c) The place where you were married to each spouse.
- (d) For each marriage, please state the manner in which it was terminated.
- (e) If any marriage was terminated by divorce, state for each such divorce the county and state or place where the action was filed and the grounds alleged in said action and whether filed by you.
- 6. If self employed at the time of the incident referred to in the complaint, state:
 - (a) The nature of your work.
 - (b) Your business address.
- (c) Your average weekly earnings for the year before the accident.
- 7. For the ten years immediately preceding the date of the incident referred to in the complaint, state:
 - (a) The names and addresses of each of your employers.
- (b) The dates of commencement and termination of each such source of employment.
- (c) Detailed description of the services or work performed for each source of employment.
- (d) Your average weekly wages or earnings from each place of employment.
- (e) For each employer, whether a physical examination was required, and if so, state the date, place and person giving the physical examination.

- (f) For each employer, whether or not you made any representations in writing or answered in writing any questions concerning your physical condition.
- (g) The name of your immediate boss, foreman or other superior to whom you were responsible at each of the places of employment listed above.
- 8. What was your business or occupation at the time of the incident referred to in the complaint and are you still engaged in such business or occupation and if not state:
- (a) When you ceased working in such business or occupation.
- (b) Your present business or occupation, the date you entered it and your present income from such business.
- (c) Any other business or occupations prior to your present one and after the date set out in answer to paragraph (a) above.
- 9. Have you lost any time from your business or occupation since the incident referred to in the complaint and if so, state:
 - (a) The number of days lost and the dates.
 - (b) The amount of any wages or income lost.
- 10. If employed at the time of the incident referred to in the complaint, state:
 - (a) The name and address of the employer.
- (b) The position held and the nature of the work performed.
- (c) Average weekly wages for the year before the accident.
- ll. If employed since the incident referred to in the complaint, state:
 - (a) Name and address of present employer.
 - (b) Position held and nature of work being performed.
 - (c) Hours worked per week.

- (d) Present weekly wages, earning, income or profit.
- (e) Name of your immediate boss, foreman or other superior to whom you are responsible.
- (f) Whether a physical examination was required and if so, state the date, place and person giving the examination.
- (g) For each employer, whether or not you made any representations in writing or answered in writing any questions concerning your physical condition.
 - 12. What is your social security number?
- 13. Have you ever drawn social security benefits for disability and if so, state:
 - (a) Your residence at the time.
- (b) The social security office through which you filed your claim.
 - (c) The nature and extent of the disability.
- (d) The length of time of such disability and the beginning date.
- 14. Are you now receiving or have you ever received any disability pension, income or insurance or any workmen's compensation from any agency, company, person, corporation, state or government and if so, state:
 - (a) The nature of any such payment.
 - (b) 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 incident referred to in the complaint.
 - (h) If so, the nature and extent of such disability.
 - 15. With respect to each of the past five years, state:
 - (a) Your yearly gross income.
 - (b) Your yearly net income.
- (c) The name and address of the person, firm or corporation having custody of any papers pertaining to your income.
- 16. Did you file income tax returns with the Director of Internal Revenue for any of the past five years or with any state tax authority or department? If so, state:
- (a) The office of the Director of Internal Revenue with which each return was filed.
 - (b) The amount reported in each return as earned income.
- (c) The years for which filed as to Director of Internal Revenue.
- (d) The state tax authority or authorities with whom such returns were filed.
- (e) The years for which filed with such state tax authority or authorities.
 - (f) The amount of tax shown to be due on each return.
- 17. If your gross income included any sums other than earnings, state the amounts and nature of such other income.
- 18. State the name and address of each school, college, or educational institution you have attended, listing the dates of attendance and the courses of study.
- 19. List the names and addresses of all lodges, volunteer groups, fraternities, charitable organizations, or other like clubs or assemblies to which you belong.
- 20. 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) Your 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 date of termination of such services.
- (g) A detailed description of the reason why the services were discontinued.
- 21. Have you ever been rejected for military or government service for physical reasons? If so, state:
 - (a) The date thereof.
 - (b) The condition for which rejected.
 - (c) The agency so rejecting you.
- 22. Have you ever received a discharge from military or government service for physical reasons? If so state:
 - (a) The date thereof.
 - (b) The condition for which discharged.
 - (c) The agency so discharging you.
- 23. Have you made claim for any benefits under any medical pay coverage or policy of insurance relating to injuries arising out of the incident described in the complaint? 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.
- 24. Please state whether you have ever been denied any life, health or automobile insurance coverage or have had to pay increased insurance premiums therefore because of any physical infirmity, ailment, disease or other cause.
- 25. If the answer to the preceding interrogatory is in the affirmative, state the details with respect to each such denial

indicating specifically the type of coverage involved and the physical infirmity, ailment, disease or other cause for which you were denied coverage or were required to pay increased premiums.

- 26. Have you ever made claim for any benefits under any insurance policy, or against any person, firm or corporation for personal injuries or physical condition which you have not heretofore listed in your answers to these interrogatories?

 If so, state:
- (a) The injury or condition for which such claim was made.
- (b) The name and address of the person, firm or corporation to whom or against whom it was made.
 - (c) The date it was made.
- (d) The nature and amount of any payment received therefore.
- 27. Have you ever suffered any injuries in any accident either prior or subsequent to the incident referred to in the complaint? If so, state:
 - (a) The date and place of such injury.
- (b) A detailed description of all the injuries you received.
- (c) The names and addresses of any hospitals rendering treatment.
- (d) The names and addresses of all physicians, surgeons, osteopaths, chiropractors, or other medical practitioner rendering treatment.
- (e) The nature and extent of recovery, and, if any permanent disability was suffered, the nature and extent of the permanent disability.
- (f) If you were compensated in any manner for any such injury, state the names and addresses of each and every person or organization paying such compensation and the amount thereof.

- 28. Have you ever had any serious illness, sickness, disease, or surgical operations, either prior or subsequent to the incident referred to in the complaint? If so, state:
 - (a) The date and place.
 - (b) A detailed description of your symptoms.
- (c) The names and addresses of any hospitals rendering treatment.
- (d) The names and addresses of all physicians, surgeons, osteopaths, chiropractors or medical practitioners rendering treatment.
 - (e) The approximate date of your recovery.
- (f) If you did not recover fully, the date your condition became stationary and a description of your condition at that time.
- 29. Have you ever pleaded guilty to or been convicted of any crime other than traffic violations and if so, please state:
 - (a) The nature of the offense.
 - (b) The date.
 - (c) The county and state in which you were tried.
 - (d) The sentence given you.
- 30. 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 of your stay and the dates thereof.
- (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.
- 31. Did you consume any alcoholic beverage of any type, or any sedative, tranquilizer or other drug, medicine or pill during the 48 hours immediately preceding the incident referred to in the complaint? If so, state:

- (a) The nature, amount and type of item consumed.
- (b) The amount of time over which consumed.
- (c) The names and addresses of any and all persons who have any knowledge as to the consumption of these items.
- 32. Describe in detail the injury or injuries sustained by you in the accident set forth in the complaint setting forth in detail:
- (a) Whether you suffered bone fracture or dislocation and, if so, give the name of the bones and the nature and description of the fracture.
- (b) Whether you sustained any cuts or lacerations, indicating for each such item the part of the body involved and a full description of the injury.
- (c) Whether you sustained any internal injury and, if so, state each internal organ that was injured or affected and describe how such injury was caused, and indicate the first symptom that you observed.
- (d) Whether you sustained any injury to any nerve or the nervous system and, if so, give a description of such injury designating or describing the nerves that were injured and whether such injury affected any body function and, if so, the function affected.
- (e) Whether you sustained any injury to your head and, if so, give a complete description of the part of the head involved.
- (f) Whether you sustained any sprains or sprains of any ligaments or any muscles and, if so, identify the ligaments or muscles involved.
- (g) Whether you sustained any other injuries which have not been specifically inquired about in the foregoing interrogatories and, if so, for each such injury state a description of the injury and the part of the body affected.
- 33. Please state the prognosis related to you by your attending physician or other medical personnel for each and every injury or injuries listed in the preceding interrogatory.

- 34. Do you claim that as a result of the injury referred to in the complaint, you developed any conditions such as a traumatic epilepsy, insomnia, amnesia, paralysis, mental or nervous disturbance, pneumonia, traumatic neurosis, anxiety or any other or similar condition?
- 35. If the answer to the preceding interrogatory is in the affirmative, state for each such condition:
 - (a) The name of such condition or a description of it.
 - (b) The date it first manifested itself.
 - (c) The injury that caused such condition.
- (d) The facts on which you rely to prove the injury caused or the condition complained of.
- 36. Do you claim that any injury referred to in the complaint caused or contributed to the aggravation of a pre-existing physical, nervous or mental condition?
- 37. If the answer to the preceding interrogatory is in the affirmative, please state:
 - (a) The nature of the pre-existing condition.
- (b) The manner in which such condition originally arose or was caused.
- (c) The date you first became aware that the injury referred to in the complaint had caused an aggravation of any pre-existing condition.
- (d) The manner and extent the condition was aggravated by the injury referred to in the complaint.
- 38. Did the injury sustained by you in the accident described in the complaint result in a scar or disfigurement?
 - 39. If so, for each such scar or disfigurement please state:
- (a) A description and location of the scar or disfigurement.
 - (b) The injury that caused the scar or disfigurement.

- (c) Whether you claim that such disfigurement is permanent.

 (d) The facts on which claim is based.

 40. State the names and addresses of each doctor, physician, surgeon, chiropractor or osteopath who examined or treated you during the ten year period preceding the date of your answers.
- 41. For each such person listed in answer to the preceding interrogatory, state the date or dates of each such examination and the nature of the treatment of examination.
- 42. During the ten year period mentioned in Interrogatory
 No. 40, were you on any occasion confined to a hospital or clinic
 for medical treatment?
- 43. If the answer to the preceding interrogatory is in the affirmative, state all details concerning each such confinement including:
 - (a) Dates of admission and discharge.
- (b) Names and addresses of each such hospital and clinic.
 - (c) Names and addresses of attending physician.
 - (d) The reason for each such confinement.
 - (e) The nature of the treatment rendered.
- 44. Were you hospitalized for the treatment of the injury referred to in the complaint?
 - 45. If so, for each hospitalization state:
 - (a) The name and address of the hospital.
- (b) The inclusive dates of confinement giving the dates of admission and discharge.
- (c) The name and address of your attending physician and of any other physician who examined and/or treated you during such confinement.
 - (d) The injury treated.
 - (e) The nature of such treatment.
- 46. Did you go directly from the accident referred to in your complaint to a hospital or like institution? If so, please state:

- (a) The name and address of the person or firm who transported you.
- (b) The name and address of the hospital or like institution to which you were taken.
- (c) The date and exact time upon which you arrived at the hospital or like institution.
- (d) The length of time which elapsed between the time you arrived at the hospital and the time upon which you first received treatment.
- (e) The name and address of the individual who summoned or requested a vehicle to transport you to a hospital or like institution.
- (f) The name(s) and address(es) of the individual(s) who requested or advised you to go to a hospital or like institution.
- 47. If you did not go directly to a hospital or like institution subsequent and as a result of the incident made the basis of your complaint, please state the name and address of the place where you did go.
- 48. Were you treated as an out-patient at a hospital or clinic for any injuries referred to in the complaint?
- 49. If the answer to the preceding interrogatory is in the affirmative, please state for each such treatment:
 - (a) The name and address of the hospital.
 - (b) The injury treated.
 - (c) A description of the treatment received.
- (d) The name and address of the physician and/or physicians who treated you.
- 50. Did you visit any physician, surgeon, dentist or any other medical person, including a chiropractor and/or osteopath, for examination or treatment of any injury, complaint or other condition referred to in the complaint?
- 51. If the answer to the preceding interrogatory is in the affirmative, please state as to each such person:

- (a) His name and address.
- (b) The speciality of such person.
- (c) The date, time and place of each such visit.
- (d) The injury, complaint, or ailment treated or examined.
- (e) A description of the treatment, examination or consultation.
- 52. Have you undergone any surgery because of any injury or condition referred to in the complaint?
 - 53. If so, for each such operation state:
- (a) The name and address of the person who performed it.
- (b) The name and address of each person who assisted in the performance of it.
- (c) The name and address of the hospital in which you were confined.
- (d) The nature of the operation including the portion of the body involved which the operation sought to remedy.
 - (e) The result of the operation.
- 54. Have you used any drugs or other medication in connection with any injury or condition referred to in this complaint?
 - 55. If so, for each such drug or medication, please state:
 - (a) The name of the medication.
- (b) The name and address of the doctor who prescribed it.
- (c) The inclusive dates during which such medication was employed.
- 56. As a result of any injury referred to in the complaint, have you worn or used an orthopedic appliance including, but not limited to, a cast, cane, brace, crutch or artificial support?

- 57. If so, for each such orthopedic appliance state:
- (a) the name and address of the doctor who prescribed it.
 - (b) The name or description of the appliance.
- (c) The name or address of the person or firm from whom it was obtained and the cost.
 - (d) The dates it was worn.
- (e) The number of hours it was worn each day and the frequency with which it was worn.
- (f) Whether you are now wearing the appliance and, if so, how much longer you expect to wear it.
- 58. Are you presently being treated for any injury referred to in the complaint?
- 59. If so, state the nature of the treatment and the name and address of the person rendering the treatment and the purpose thereof.
- 60. Please state whether or not you have ever been hospitalized subsequent to the accident described in the complaint other than as referred to in the previous answers and, if so, state:
- (a) The names and address of all such hospitals, clinics, or other such medical institutions.
 - (b) The dates during which you were hospitalized.
- (c) The dates of your illness, condition, disease or injury.
- (d) The names and addresses of the treating and/or examining physicians.
- 61. Please state whether or not you have ever been examined and/or treated by any doctor, physician, surgeon, chiropractor and/or osteopath subsequent to the accident described in the complaint other than as referred to in the previous answers and, if so, please state:
- (a) The names and addresses of each such doctor, physician, surgeon, chiropractor and/or osteopath.

- (b) His speciality.
- (c) The times, dates and places of each such treatment.
- (d) The nature of the illness, condition, disease or injury for which you were treated.
 - (e) A description of the treatment.
- (f) The result of such treatment, examination or consultation.
- 62. Were any diagnostic procedures such as x-rays, myelograms, electrocardiograms, electroencephalograms, etc. undertaken in connection with any injury referred to in the complaint and, if so, state:
- (a) The name and address of the doctor or technician performing the procedure.
- (b) The name and address of the institution at which the procedure was undertaken.
- (c) The name and address of the party having custody of any reports of such procedures.
- 63. Please state in general the condition of your health prior to the accident described in the complaint.
- 64. Please state the last time prior to the accident referred to in the complaint you had a physical examination and give the name and address of the doctor making the examination and the date or dates of such examination.
- 65. Please describe in detail each and every manner or way that each injury that you listed in answer to Interrogatory 32 has effected your way of life.
- 66. Please state whether you are claiming as an element of damages in this action, future loss of earnings by impairment of earning ability.
- 67. If the answer to the preceding interrogatory is in the affirmative, please state the amount of such future loss of earnings and a detailed basis upon which you have computed that amount.

- 68. If you claim that you have a permanent disability resulting from the accident referred to in the complaint, please state:
- (a) Whether any doctor has given you a disability rating, the percentage of disability assessed by the doctor, and the name and address of the doctor making such assessment.
- (b) In what respect the injury prevents or makes difficult the performance of your work.
- 69. What was the name and address of your family physician at the time of the incident referred to in your complaint?
- 70. What is the name and address of your family physician at the time you are answering these interrogatories.
- 71. If you have incurred any medical bills in connection with the alleged injuries please state:
 - (a) The total amount of each such bill.
 - (b) The person to whom such amount was paid.
- (c) The service or thing for which the bill was rendered.
 - (d) The person or company who paid each such bill.
- (e) The exact amount of the bill that you personally paid.
- 72. If you have incurred any bills or expenses arising out of the incident referred to in the complaint which were paid by or reimbursed by another person or company, and which have not been listed heretofore, please state:
 - (a) The total amount of such bill or expense.
- (b) The person or company who paid or reimbursed you for the bill or expense.
- 73. If you are still receiving medical services or treatment of any nature whatsoever, as to this injury, state:

- (a) The name or names of the person or persons attending you.
- (b) The approximate frequency of said treatment or service.
- (c) The date you last received said treatment or service.
- (d) The date that your physician released you from treatment or if you have not been released, the approximate date that you will be released.
- 74. Please state whether or not you are claiming as an element of damages future medical expenses.
- 75. If you are claiming such damages, state the amount claimed and the basis on which you compute that amount.
- 76. Have you ever been involved in any other legal action, either as a defendant or as a plaintiff? If so, state:
- (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 names of the attorneys representing each party.
 - (b) A description of the nature of each such action.
 - (c) Whether you were a plaintiff or defendant.
- 77. Please state the names, addresses and relationship to you of any person claimed by you to be dependent upon you in whole or partial at the time of the accident described in the complaint filed herein.
- 78. Give the exact date and time that you allege the accident in question occured?
- 79. State in detail your activities on the date involved prior to the time of the accident referred to in the complaint.
- 80. Immediately prior to the accident state what you were doing or where you were going and for what purpose.

- 81. State the names and present addresses of any witnesses to your accident known to you.
- 82. State the name and address of any person to whom you reported such accident, indicating exactly when and where such report or reports were made and what was said.
- 83. State the names and addresses of any persons whom you contend witnessed said accident or immediately knew about or were informed of same.
- 84. State the names and addresses of all persons known to you who were present at the scene of the accident.
- 85. Were the injuries sustained in the accident visible to the witnesses at the scene of the accident?
- 86. If the answer to the preceding interrogatory is in the affirmative, please state:
- (a) The name and address of each person who observed the accident.
- (b) The name and address of each person you spoke to or with whom you had a conversation.
- 87. Has a written or recorded statement been taken from any witness or person who has knowledge of relevant facts concerning the accident or the nature, character and extent of the injuries referred to in the complaint?
- 88. If the answer to the preceding interrogatory is in the affirmative, for each such statement, please state:
- (a) The kind, that is whether it is written, recorded or otherwise.
- (b) The name of the person from whom the statement was taken.
- (c) The name and address of the person who took the statement.
- (d) The name and address of the party having custody of such statement.

- (e) The name of the persons present where the statement was taken.
 - (f) The date of the statement.
 - (g) The place where the statement was taken.
- 89. Are you aware of the existence of any photograph taken of you within five years prior to the accident referred to in the complaint?
- 90. If the answer to the preceding interrogatory is in the affirmative, for each such photograph please state:
- (a) The name and address of the party having custody of such photographs.
- (b) Are you aware of any existence of any photographs taken of you since the accident and having relation to the matters referred to in the complaint.
 - 91. If so, for each such photograph please state:
- (a) The name and address of each person present when the photograph was taken.
- (b) The names and addresses of each person who suggested it or authorized that the photograph be taken.
- (c) The time of day and the place where such photograph was taken.
 - (d) The number of pictures that were taken.
- (e) The name and address of each person who has a copy or negative of the photograph.
- 92. Were any of such photographs taken by a doctor, hospital, nurse or other medical person?
 - 93. If so, for each such photograph please state:
- (a) The portion of your body portrayed in the photograph.
- (b) What the photograph purports to show, such as the treatment being given and progress or recovery or as the case may be.

- 94. Have any motion pictures been taken of you since the accident and, if so, state:
- (a) The names and addresses of the persons who took the pictures.
- (b) The name and address of each other person who has a copy of the pictures.
- 95. Are you aware of the existence of any photograph or motion pictures taken of the scene of the accident or of the vehicles involved in the accident?
 - 96. If so, for each such photograph or motion picture, state:
 - (a) Whether it is a photograph or motion picture.
- (b) The date and place where the photograph or motion picture was taken.
- (c) The name and address of the person who took the photograph.
- (d) The name and address of each person who has a copy of the photograph or motion picture or the negative thereof.
- (e) A description of what each photograph or motion picture purports to depict.
- 97. State the name and present address and relationship to you of any person who has investigated said accident and indicate the nature and scope of each such investigation performed by each such person.
- 98. Please state the names and addresses of each person known or reasonably felt by you to be:
 - (a) A witness to the trial of this case.
- (b) In possession of or having control of any document relevant to the circumstances of your accident.
- (c) Having knowledge of some of the facts or circumstances upon which the circumstances of the accident referred to in the complaint are based and who are not listed in any of the answers to the preceding interrogatories.

- 99. State the specific time of day the accident occurred made the basis of your complaint.
- 100. State the specific name of your employer at the time of the accident made the basis of your complaint.
- 101. State the specific name of your immediate supervisor at the time of the accident made the basis of your complaint.
- 102. State the specific name of the person who hired you to work for Holley's Shell Station as a gasoline station attendant.
- 103. State the specific time, date, and place that you were hired to work for Holley's Shell Station as a gasoline station attendant.
- 104. State the length of time which you had been employed at Holley's Shell Station as a gasoline station attendant at the time of the accident made the basis of your complaint.

ARMBRECHT, JACKSON & DeMOUY

P. O. Box 290

Mobile, Alabama 36601

W. BOYD REEVES

Duly Designated Trial Counsel

Y Maman E Walley

ORMAN E. WALDROP, JR.

FILED

JUN 30 1972

EUNICE B. BLACKMON CIRCUIT

STATE OF ALABAMA COUNTY OF MOBILE)

Personally appeared before me, the undersigned authority, in and for said County and State, NORMAN E. WALDROP, JR., who being by me first duly sworn, on oath deposes and says that the answers to the above and foregoing interrogatories, if well and truly made by the witness, will be material evidence to the Defendant in this case.

SUBSCRIBED AND SWORN TO before me on this 29th day of Que

Notary Public, Mobile County, Alabama

SERVICE OF PROCESS: Please serve TAYLOR D. WILKINS, JR. ESQUIRE, Attorney of record for the Plaintiff, at Post Office Box 61,

Bay Minette, Alabama 36507.

The fregary interrogatores to the plantiff. All I

JUN 30 1972

EUNICE B. BLACKMON CIRCUIT

CHARLES M. DAY,)	IN THE CIRCUIT COURT OF
Plaintiff,)	BALDWIN COUNTY, ALABAMA
vs.)	AT LAW
MOTHERSHEAD OIL COMPANY,)	
et al.,)	CASE NO. 10.369

NOTICE OF DEPOSITION

TO: James R. Owen, Esquire 110 Courthouse Square Bay Minette, Alabama 36507

> Norborne C. Stone, Jr., Esquire Post Office Box 120 Bay Minette, Alabama 36507

> Taylor D. Wilkins, Jr., Esquire Post Office Box 61 Bay Minette, Alabama 36507

Kirtley W. Brown, Esquire Post Office Box 1746 Mobile, Alabama 36601

Please take notice that at 2:00 p.m. on Wednesday, the 25th day of October, 1972, at the Law Offices of Armbrecht, Jackson & DeMouy, 10th floor of the Merchants National Bank Building, Mobile, Alabama, the Defendant, Mothershead Oil Company, will take the pretrial deposition of the Plaintiff, Charles M. Day, upon oral examination pursuant to Title 7, Article 6A, Section 474(1) et seq., Code of Alabama, Recompiled 1958, before an officer duly authorized to administer oaths in the County of Mobile, State of Alabama, and duly authorized to take depositions and swear witnesses in said County in said State. The oral examination will continue from day to day until completed and you are invited to attend if you so desire.

CERTIFICATE OF SERVICE

avol 7

70 PAGE 80

EUNICE B. BLACKMON CIRCUIT By NORMAN E. WALDROP, JR.

armbrecht, jackson & 12e Mouy

) IN THE CIRCUIT COURT OF CHARLES M. DAY, BALDWIN COUNTY, ALABAMA Plaintiff, AT LAW VS. MOTHERSHEAD OIL COMPANY; MOTHERSHEAD OIL COMPANY, INC.; CHARLES WHITE, individually and doing business as HOLLEY'S SHELL STATION; ABC COMPANY; JOHN DOE and RICHARD ROE, individually and doing business as DEF COMPANY, a partnership, being the company(s), individual(s) or partnership(s) owning or operating HOLLEY'S SHELL STA-TION on to-wit, November 28, 1971,) which name(s) will be supplied by amendment when ascertained, jointly) and individually, CASE NO. 10, 369 Defendants.

PLEA OF NUL TIEL CORPORATION DEFENDANT

Comes now this Defendant, Mothershead Oil Company, in the above styled cause and says unto this Honorable Court that there is no such corporation named Mothershead Oil Company, Inc. in Baldwin County, Alabama. Hence, this Defendant, Mothershead Oil Company, respectfully requests this Honorable Court to abate this action against the named Defendant Mothershead Oil Company, Inc.

ARMBRECHT, JACKSON & DeMOUY

BY W. BOYD PEEVES

Duly Designated Trial Counsel

By NORMAN E. WALDROP, JR.

I do hereby certify that I have on this ______ day of ______, 197______, served a copy of the oregoing pleading on counsel for all parties to this proceeding.

Ty mailing the same by United States mail properly addressed, and first class postage prepaid.

70 PAGE 78

V(

STATE OF ALABAMA) COUNTY OF BALDWIN)

Personally appeared before me, the undersigned authority in and for said County and State, NORMAN E. WALDROP, JR., who, being duly sworn, deposes and says that as attorney for the Defendant, Mothershead Oil Company, in the above styled cause, he is authorized to make this affidavit in that he is cognizant of the facts set forth in the above Plea of Nul Tiel Corporation Defendant and that he is informed and believes, and based upon such information and belief, doth say that the facts set forth in the above Plea of Nul Tiel Corporation Defendant are true and correct.

MORMAN E. WALDROP, JR.

SUBSCRIBED and SWORN to	
before me this day of	
May, 1972.	FILED
	MAY 22 1972
Notary Public	EUNICE B. BLACKMON CIRCUIT

CHARLES M. DAY,) IN THE CIRCUIT COURT OF
Plaintiff,) BALDWIN COUNTY, ALABAMA
vs.) AT LAW
MOTHERSHEAD OIL COMPANY, et al.,)
Defendants.) CASE NO. 10, 369

DEMURRER

Comes now this Defendant, Mothershead Oil Company, in the above styled cause, separately and severally, and demurs to Plaintiff's Complaint as a whole, and to each and every count thereof, separately and severally, upon the following separate and several grounds:

- 1. Said count wholly fails to state a cause of action.
- 2. The allegations contained in said count are vague, uncertain and indefinite.
- 3. The allegations in said count are vague, misleading and confusing and do not apprise this Defendant of what he is called upon to defend.
- 4. For aught that appears from the allegations of said count, there was no legal duty owing from this Defendant to said Plaintiff.
- 5. For aught that appears from the allegations of said count, there was no breach of any legal duty owing from this Defendant to said Plaintiff.
- 6. Said count does not aver sufficient facts to state a cause of action.
- 7. Said count seeks to set out the quo modo constituting the negligence of this Defendant without alleging sufficient facts in support thereof.

- 8. There is no characterization of any alleged act of this Defendant as a negligent act.
- 9. For that there is no characterization of any alleged act of this Defendant as a wrongful act.
- 10. For that negligence, as averred, is a mere conclusion of the pleader.
- 11. For aught appearing from the allegations of said count, there was no proximate cause between the alleged negligence of this Defendant and the alleged injuries to said Plaintiff.
 - 12. For that there is a misjoinder of causes of action.
- 13. For that there is an insufficient allegation of the place of the alleged accident in said count.
- 14. For that Plaintiff fails to allege with sufficient certainty the whereabouts of said accident.
- 15. That the facts averred do not constitute negligence as a matter of law.
- 16. For aught that appears there is no duty owed by this Defendant to the Plaintiff.
- 17. For aught that appears the Plaintiff is barred from prosecuting this action by Ala. Code tit. 26, § 272 (1958).
- 18. For aught that appears the Plaintiff's exclusive remedy for an injury while working in the line and scope of his employment against his employers is the remedy provided for him in the Alabama Workmen's Compensation Laws, Ala. Code tit. 26, § 253 et seq. (1958).

- 19. For that the allegation "at the aforesaid time and place Plaintiff was in the service or employment of the Defendants" is but a mere conclusion of the pleader without sufficient facts alleged in support thereof.
- 20. For that the statement "while engaged in the line and scope of his employment with the Defendants as such employee" is but a mere conclusion of the pleader without sufficient facts alleged in support thereof.

ARMBRECHT, JACKSON & DeMOUY

By W BOYD REFVES

Duly Designated Trial Counsel

By Norman E. WALDROP, JR

Defendant desires oral argument.

CERTIFICATE OF SERVICE

t do hereby certify that I have on this 1977 day

toregoing pleading of counsel for all parties to this proceeding, by mailing the same by United States mail property addressed,

and first class postage prepaid.

FILED

MAY 22 1972

EUNICE B. BLACKMON CIRCUIT

CHARLES M. DAY,	X	
Plaintiff,	X	IN THE CIRCUIT COURT OF
	χ	
vs.	χ	BALDWIN COUNTY, ALABAMA
	χ	
MOTHERSHEAD OIL COMPANY, et al.,	χ	AT LAW No. 10,369
Defendants.	Х .	
	χ	

DEMURRER OF CHARLES WHITE

Comes now the Defendant, Charles White, by his attorneys and demurs to the Complaint heretofore filed against him and to each count thereof, separately and severally, and assigns the following separate and several grounds in support thereof:

- 1. The Complaint fails to state a cause of action.
- 2. The allegations of the Complaint are vague, indefinite and uncertain.
 - 3. There is a misjoinder of parties.
 - 4. There is a misjoinder of causes of action.
- 5. The allegations of the Complaint are conclusions of the pleader and no facts are alleged which, if true, would constitute negligence as a matter of law.
- 6. The allegations of the Complaint fail to allege a duty owing from the Defendant Charles White and a breach of that duty proximately resulting in the injuries and damages alleged.
- 7. It affirmatively appears from the allegations of the Complaint that there was no duty on the part of the Defendant Charles White to warn or notify the Plaintiff of an alleged dangerous condition.
- 8. The Complaint fails to allege that the alleged injuries were caused by reason of any defect in the condition of the ways, works, machinery, or plant connected with or used in the business of the Defendant Charles White.

9. The Complaint fails to allege that the alleged injuries were caused by reason of the negligence of any person in the service or employment of the Defendant Charles White who had any superintendence intrusted to him, while in the exercise of such superintendence.

10. The Complaint fails to allege that the alleged injuries were caused by reason of the negligence of any person in the service or employment of the Defendant Charles White to whose orders or directions the Plaintiff, at the time of the injuries, was bound to conform and did conform, and that such injuries resulted from his having so conformed.

11. The Complaint fails to allege that the alleged injuries were caused by reason of any act or omission or any person in the service or employment of the Defendant Charles White, done or made in obedience to the rules and regulations of the By-Laws of the Defendant Charles White, or in obedience to particular instructions given by any person delegated with the authority of the Defendant Charles White in that behalf.

12. For aught that appears from the allegations of the Complaint, the Plaintiff knew of the alleged defect or negligence causing his injury and failed in a reasonable time to give information thereof to the Defendant Charles White.

13. It affirmatively appears from the allegations of the Complaint that the Plaintiff was not a business invitee of the Defendant Charles White.

14. The Complaint fails to allege that the Plaintiff was a business invitee of the Defendant Charles White.

Respectfully submitted,

CHASON, STONE & CHASON

Attorneys for Defendant Charles White

MAY 9 1972

EUNICE B. BLACKMON CHECK

70 PAGE 74

CHARLES M. DAY,	X	IN THE CIRCUIT COURT OF
Plaintiff,	χ	BALDWIN COUNTY,
vs.	X	ALABAMA
MOTHERSHEAD OIL COMPANY,	X	AT LAW
et al.,	χ	GAGENIO 10 260
Defendants.	χ	CASE NO. 10,369

ANSWERS TO INTERROGATORIES

- 1. Charles Melvon Day, 12/18/27, Baldwin County, Alabama
- 2. none (a) no
- 3. 208 Hickery Street, Bay Minette, Alabama, September, 1971
- (a) Bay Minette, Alabama, Mobile, Alabama
- 4. yes (a) Melba Jean Cooper, age 20 years, Robin Road, Bay Minette, unemployed; Rodger Dale Day, age 16 years, 208 Hickery Street, Bay Minette, Alabama, unemployed; Ricky Allen Day, age 15 years, 208 Hickery Street, Bay Minette, Alabama, unemployed; Randell Wayne Day, age 11 years, 208 Hickery Street, Bay Minette, Alabama, unemployed; Deborah Louise Day, age 6 years, 208 Hickery Street, Bay Minette, Alabama, unemployed (b) Shirley Jean Day (c) Dothan, Alabama (d) June 13, 1952, Dothan, Alabama (e) yes (f) living together (g) 208 Hickery Street, Bay Minette, Alabama
 - 5. (a) (e) n/a
 - 6. no (a) no (b) none (c) from \$150.00 to \$200.00 per week
 - 7. (a) State Dock, Mobile Alabama; Bender's Shop Repair, Mobile Alabama; Ingles Shipyard, Mississippi; Hunison Brothers Shipyard, Mobile, Alabama (b) unknown (c) at State Dock equipment operator; at Ingles Shipyard pipe fitter; at Bender's Shipyard welder; Hunison Brothers Ship Repair ship fitter (d) at State Dock \$100.00 per week; at Ingles Shipyard \$150.00 per week; Bender's Ship Repair from \$150.00 to \$250.00 per week; Hunison Brothers Ship Repair from \$150.00 to \$200.00 per week (e) all of the places of employment I had to have a physical examination. Dates unknown (l) Ingles Shipyard was one (2) Dr. Taylor's office in Mobile for Hunison Brothers Ship Repair (3) Bender's Ship Repair (4) State Dock had their own Doctors
 - (5) Bay Minette Housing Auth. (f) no

- (g) State Dock I forgot; Bender's Ship Repair Jack Ellis, he was superior; Hunison Brothers Ship Repair Mr. Polmes; Ingles Shipyard Leon Everin
- 8. Maint Man at Bay Minette Housing Auth. still employed (a) when I was hurt but still work in it (b) August, 1971, \$496.00 a month,
 - 9. yes (a) from 28th of November, 1971 to February, 1972 (b) none

(c) yes

- 10. yes (a) Bay Minette Housing Auth. & Holly Shell Station, Bay Minette, Alabama (b) Maint Man on Houses (c) from \$150.00 per week to \$200.00 per week, that was 40 hours but I worked alot of over time
 - 11. yes (a) Bay Minette Housing Auth. , Bay Minette, Alabama
- (b) Maint Man on houses (c) 40 hours week (d) \$148.00 per week
- (e) Nick Zorn (f) no (g) yes
 - 12. 422-28-9966
 - 13. no (a) no (b) none (c) none (d) none
- 14. none (a) none (b) none (c) none (d) none (e) west to the text of the contract of the contr
- (g) no (h) none
- 15. (a)1967- \$7,039.72,1968-\$8,380.93,1969-\$9,422.10,1970-\$7,268.43,1971-\$6,986 0l
 (b) -(c)_{Jack} Wise III, Public Accountant, P.O.Box 7081, Crichton Station, Mobile 7, Alabama
 16. yes (a) (f) appropriate offices see number 15 above

17. none

- 18. Perdio Alabama to 9th, 10th, 11th and 12th under GI Bill
- 19. VFW Club, American Legion, Bay Minette, Alabama
- 20. yes, (a) in U. S. Army 10 years (b) March 1946 to June 1956
- (c) RA 44168995 (d) U. S. Army Engineer (e) yes dates March 21, 1946

- place Ft. McCelland (f) June 1, 1956 (g) got tired of it. They were trying to keep me over seas and I had a family then
 - 21. no (a) none (b) none (c) none
 - 22. no (a) none (b) honorable discharge (c) U.S. Army
 - 23. no (a) (c) haven't make claim
 - 24. no
 - 25. none
 - 26. no (a) (d) haven't made claim
 - 27. no (a) (f) haven't suffered injuries
 - 28. no. (a) (f) haven't suffered any
 - 29. no (a) (d) haven't been convicted of any crime other than traffic violations
 - 30. no (a) (d) haven't been committed to any institution
 - 31. no (a) (c) did not comsume any of these
 - 32. yes, right leg was burned (a) none (b) right leg burned (c) no (d) stay nervous all of the time (e) no (f) back of leg (g) no
 - 33. Should not give much trouble, might have trouble squatting and couldn't do things I could do before burning, and must keep leg oiled
 - 34. Nervous all of the time
 - 35. See number 34 above, began following burn
 - 36. no
 - 37. (a) (d) n/a
 - 38. yes, burned my right leg
 - 39. (a) right leg (b) burned (c) yes (d) because it left a permanent scar
 - 40. Doctor Davis, Bay Minette, Alabama; Doctor Nickols, Bay Minette, Alabama
 - 41. 28th of November, 1971
 - 42. no
 - 43. (a) (e) no
 - 44. yes

- 45. (a) Bay Minette Infirmary, Bay Minette, Alabama (b) November 28, 1971 (c) Doctor Nickols (d) right leg burned (e) burned
- 46. yes (a) Mrs. Sara Gordner, 312 Hickery Street, Bay Minette, Alabama (b) Bay Minette Infirmary, Bay Minette, Alabama (c) arrived at 4:30 p. m. on November 28, 1971 (d) that night (e) Mrs. Sara Gordner, 312 Hickery Street, Bay Minette, Alabama (f) Mrs. Sara Gordner, 312 Hickery Street, Bay Minette, Alabama; Mr. White, Holly Shell Stat., Bay Minette, Alabama
- 47. Went directly to hospital Bay Minette Infirmary, Bay Minette, Alabama
- 48. I was treated in hospital Bay Minette Infirmary, Bay Minette, Alabama
 - 49. (a) Bay Minette Infirmary, Bay Minette, Alabama (b) yes
- (c) skin graffed (d) Doctor Nickols, Doctor Davis
 - 50. no
 - 51. (a) (e) did not visit any of these
 - 52. none
 - 53. (a) (e) have not undergone any surgery
 - 54. no
 - 55. (a) (c) have not used any drugs or other medication
 - 56. no
 - 57. (a) (f) have not worn or used any of these
 - 58. no
 - 59. Am not presently being treated
 - 60. (a) U. S. Army (b) I forgot (c) I forgot dates (d) U. S. Army
 - 61. no (a) (f) have not been examined or treated
 - 62. no (a) (c) none of these were referred to
 - 63. good
 - 64. unknown
 - 65. Embarrassment caused by disfigurement & unable to comfortably squat.
 - 66, no
 - 67. none

- 68. none other than disfigurement (a) none (b) I can't stoop down and it bothers me all of the time
- 69. Doctor Nickols, Bay Minette, Alabama; Doctor Davis, Bay Minette, Alabama
- 70. Doctor Nickols, Bay Minette, Alabama; Doctor Davis, Bay Minette, Alabama
- 71. (a) For Doctor Nickols \$400.00; for Doctor Davis \$95.00; for Bay Minette Infirmary \$ 2,427.90 (b) unpaid
- (c) burn of leg

(d) unpaid

- (e) unpaid
 - 72. none (a) (b) no such bill or expense
 - 73. (a) (d) am not still receiving medical services or treatment
 - 74. no
 - 75. see # 74
 - 76. no (a) (c) have not ever been involved in any other legal action
- 77. Shirley Jean Day, wife; Rodger Dale Day, son; Rickey Allen Day, son; Randell Wayne Day, son; Deborah Louise Day, daughter
 - 78. November 28, 1971
- 79. I layed around the house most of the day then I went to work at 6:00 p. m.
 - 80. I was working at Holley's Shell Station on Robin Road
- 81. Mrs. Sara Gordner, 312 Hickery Street, Bay Minette, Alabama; Mr. Charlie White, Sr., Holley's Shell Station, Robin Road, Bay Minette, Alabama; Mr. Charlie White, Jr., Holley's Shell Station, Robin Road, Bay Minette, Alabama; Jimmy White, Bay Minette, Alabama; Mrs. Charlie White Sr., Holley's Shell Station, Robin Road, Bay Minette, Alabama; Johnny Gordner, 312 Hickery Street, Bay Minette, Alabama; Mrs. Charlie White Sr.'s daughter, no address; Linda Boyington
- 82. Mr. Charlie White Sr. on November 28, 1971. He said to go to the hospital and he would take care of Bill. His wife also said to go to the hospital

and she would take care of Bill if she had to,

- 83. See number 81
- 84. See number 81
- 85. yes
- 86. (a)

(b) I was burned and I didn't

do much talking to anyone. I told Mr. White Sr., how the fire got started

- 87. I don't know
- 88. (a) (g) I don't know
- 89. yes
- 90. (a) Shipyard, Mississippi, Shirley Jean Day, 208 Hickery Street, Bay Minette, Alabama (b) no
- 91. Taken by a man working for Press Register, Bay Minette, Alabama, I do not now remember his name.
 - 92. no
 - 93. (a)

(b)

- 94. no (a) (b) none have been taken
- 95. no
- 96. (a) (e) am not aware of any
- 97. unknown
- 98. (a) Mr. Charlie White, Sr., Holly's Shell Station, Bay Minette, Alabama; Mrs. Charlie White Sr., Holly's Shell Station, Bay Minette, Alabama; Mr. Charlie White Jr., Bay Minette, Alabama; Mrs. Sara Gordner, 312 Hickery Street, Bay Minette, Alabama; Mr. Johnny Gordner 312 Hickery Street, Bay Minette, Alabama; Mr. Jimmy White, Bay Minette,
- Alabama (b) I don't know (c) I don't know
 - 99. November 28, 1971, about 7:30 p. m.
 - 100. Charlie White Sr., Holly's Shell Station, Bay Minette, Alabam
 - 101. Mr. Charlie White Sr., Holly's Shell Station, Bay Minette, Alabama
 - 102. Mr. Charlie White Sr., Holly's Shell Station, Bay Minette, Alabama, 103. November 25th, 1971 at Holly Shell Station
 - 103. November 25th, 1971 at Holly Shell Station
 - 104. I had been hired at Holly Shell for four days

STATE OF ALABAMA

COUNTY OF MOBILE

I, the undersigned Notary Public in and for said County, in said state, hereby certify that Charles M. Day, whose name is signed to the foregoing instrument and who is known to me, acknowledged before me on this day that, being informed of the contents of said instrument, he executed the same voluntarily on the day same bears date.

Given under my hand and seal this **Znd** day of **Detate**.

CERTIFICATE OF SERVICE

This is to certify that I have this day served counsel for the opposing party in the foregoing matter with a copy of this pleading by depositing in the United States Mail a copy of same in a properly addressed envelope with adequate postage thereon.

Attorney for

FILED

UBLIC, MOBILE COUNTY, ALABAMA

DUT 1 1972

EUNICE B. BLACKMON GIRGUIT

ARMBRECHT, JACKSON & DEMOUY LAWYERS

MERCHANTS NATIONAL BANK BUILDING

P. 0. BOX 290

MOBILE, ALABAMA

36601

TELEPHONE AREA CODE 205 432-6751

CABLE ADDRESS SEALAW

October 11, 1972

Mrs. Eunice Blackmon, Clerk Circuit Court of Baldwin County Baldwin County Courthouse

Bay Minette, Alabama 36507

WM. H. ARMBRECHT

RAF M. CROWE

BROOX G. HOLMES W. BOYD REEVES FRANK B. MCRIGHT

THEODORE K, JACKSON

MARSHALL J. DEMOUY

WM. H. ARMBRECHT, DII

CLIFFORD FOSTER, III
T.K.JACKSON, III
E.B.PEEBLES, III
F. M. KEELING
GEOFFREY V. PARKER
THOMAS M. AMMONS.III
WILLIAM B. HARVEY
KIRK C. SHAW

NORMAN E. WALDROP, JR. CONRAD P. ARMBRECHT, II

> Re: Charles M. Day v. Mothershead Oil Co., et al; Case No. 10, 369

Dear Mrs. Blackmon:

We enclose a Notice of Deposition which we kindly request that you file on our behalf. We would appreciate if you would acknowledge receipt of this Notice by marking the date filed on a copy of this letter and returning the same in the self-addressed envelope provided.

Thank you for your cooperation.

Yours very truly,

ARMBRECHT, JACKSON & DeMOUY

NEW, Jr/lr

Enclosures

ARMBRECHT, JACKSON & DEMOUY LAWYERS

MERCHANTS NATIONAL BANK BUILDING

P. O. BOX 290

MOBILE, ALABAMA

36601

TELEPHONE AREA CODE 205 432-675!

CABLE ADDRESS SEALAW

October 12, 1972

THEODORE K. JACKSON MARSHALL J. DEMOUY WM. H. ARMBRECHT, III RAE M. CROWF BROOK G. HOLMES W. BOYD REEVES FRANK B. MCRIGHT CLIFFORD FOSTER, TIT T. K. JACKSON, III E.B. PEFRLES, TIT F. M. KEELING GEOFFREY V. PARKER THOMAS M. AMMONS, III WILLIAM B. HARVEY KIRK C. SHAW NORMAN E. WALDROP, JR. CONRAD P. ARMBRECHT, II

WM. H. ARMBRECHT

Mrs. Eunice Blackmon, Clerk Circuit Court of Baldwin County Baldwin County Courthouse Bay Minette, Alabama 36507

> Re: Charles M. Day v. Mothershead Oil Co., et al; Case No. 10,369

Dear Mrs. Blackmon:

The Defendant, Mothershead Oil Company, requests that a subpoena duces tecum be issued to the Custodian of Records at the Bay Minette Infirmary to prepare a Certified Copy of the hospital records pertaining to Charles M. Day, a patient admitted to this hospital on November 28, 1971, and deliver the same to the Clerk of the Circuit Court of Baldwin County, Alabama, as provided for in Act No. 77, 2nd Spec Session of the Legislature of Ala of 1965.

Thank you for your cooperation.

Yours very truly,

ARMBRECHT, JACKSON & DeMOUY

By_

Norman E. Waldrop, Jr.

NEW, Jr/lr

SEALE, MARSAL, SEALE & DUKE

LAWYERS

2410 FIRST NATIONAL BANK BUILDING

MOBILE, ALABAMA

M. A. MARSAL A. J. SEALE LEON G. DUKE

36601

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March 9, 1973

Mrs. Eunice Blackmon Clerk of Circuit Court Baldwin County Courthouse Bay Minette, Alabama

Re:

Charles M. Day vs Mothershead Oil Company

Case No. 10369

Dear Mrs. Blackmon:

Please note the following corrections in my letter of March 8, 1973:

Please dismiss the above-styled case with prejudice and send the Cost Bill to the Defendant, Charles White.

Yours very truly,

JOHN J. PILGRIM

JJP/mdf

cc: Honorable Norman E. Waldrop, Jr.