

STATE OF NEW MEXICO
COUNTY OF _____
FIRST JUDICIAL DISTRICT COURT

Case No.: D- _____ -DM- _____

Petitioner/Plaintiff,

vs.

Respondent/Defendant.

**This form must be
filled out.**

INTERPRETER FORM

1. Do you need an interpreter?: Yes No
2. An interpreter is requested for: Petitioner/Plaintiff Respondent/Defendant
 Witness in matter
(This party request is for the entire case.)
3. The type of interpreter needed: Spanish American Sign Language
 _____ speaker
(language)

Dated: _____

<p><i>A copy of this Request was:</i> <input type="checkbox"/> mailed to the address set forth below <input type="checkbox"/> hand delivered to the address set forth below</p> <p>On _____ to: <i>Date</i></p> <p><input type="checkbox"/> Petitioner/Plaintiff pro se <input type="checkbox"/> Respondent/Defendant pro se <input type="checkbox"/> Intervenor</p> <p>_____ <i>(Street Address)</i></p> <p>_____ <i>(City, State and Zip Code)</i></p>
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(Name)

Petitioner/Plaintiff Pro Se
 Respondent/Defendant Pro Se

(Street Address)

(City, State and Zip Code)

(Telephone Number -- Indicate If None)