## STATE OF NEW MEXICO COUNTY OF\_SIXTH JUDICIAL DISTRICT COURT

Plaintiff/Petitioner,	
VS.	Case Number: D
Defendant/Respondent.	
MOTION FOR /	то
Ι,	, the $\square$ Plaintiff $\square$ Petitioner $\square$ Defendant
□Respondent (check one) in	the above-entitled action, request the Court to consider the
following:	
_	

	Signature
	Printed Name
	Mailing Address
	City, State & Zip
	Telephone No.
	Email Address
CERTIFICA	TE OF SERVICE
I certify that I have □mailed □persor	nally served  faxed (check one) a copy of this
Motion to opposing party pro se, or counsel for	r opposing party, on the day of
, 20 at the following add	lress(es):
Name of other party	Name of other party
Address of other party or fax number	Address of other party or fax number
City, State & Zip	City, State & Zip
	Signature

[Do not write on the back of this document. Use additional paper if needed.]

## STATE OF NEW MEXICO COUNTY OF\_SIXTH JUDICIAL DISTRICT COURT

Plaintiff/Petitioner,				
VS.	Case Numbe	er: D	_	
Defendant/Respondent.				
Determination permatric				
	ORD	FR		
	ORD	LIC		
IT IS HEREBY ORDERED	тилт			
II IS HEREDI ORDEREL	/ IIIAI			
		District Judge		

Order (Generic Form)