

STATE OF NEW MEXICO  
COUNTY OF \_\_\_\_\_  
TWELFTH JUDICIAL DISTRICT

\_\_\_\_\_,  
Petitioner,

v.

No. \_\_\_\_\_

\_\_\_\_\_,  
Respondent.

### RESPONSE

Respondent, \_\_\_\_\_, responds to the Petition for Dissolution of Marriage, and states:

1. I admit (agree with) the statements in the following paragraphs (*list the paragraph numbers below*) of the Petition:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. I deny (disagree with) the statements in the following paragraphs (*list the paragraph numbers below*) of the Petition: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. I also want a divorce and the legal remedies to which I am entitled.

4. OPTIONAL (*Cross out if this does not apply to you*): I want my name to be restored to my former name, \_\_\_\_\_.

Respondent asks that the Court:

- A. Enter a *Final Decree of Dissolution of Marriage* on the grounds of incompatibility;
- B. Confirm any separate property and separate debt of the parties;
- C. Equitably divide any community property and community debt of the parties;

- D. Enter an order for spousal support, as appropriate;
- E. Provide for the custody, support, and maintenance of the child/children. (*cross out if this does not apply*);
- F. Order that my name be restored to my former name of \_\_\_\_\_  
 \_\_\_\_\_ (*cross out if this does not apply*); and
- G. Provide for such other and further relief as the Court may deem just and proper.

|  |   |
|--|---|
|  | Submitted by:   |
|  | _____   |
|  | Name  |
|  | _____   |
|  | Mailing address   |
|  | _____   |
|  | City, State, Zip  |
|  | _____   |
|  | Physical Address ( <i>this must be provided unless address is sealed by court order</i> ) |
|  | _____   |
|  | City, State, Zip  |
|  | _____   |
|  | Telephone number  |

**VERIFICATION OF SERVICE**

I affirm under penalty of perjury under the laws of the State of New Mexico that on \_\_\_\_\_ (*date*), I (*check the applicable item below and fill in all information*)

mailed a copy of this response by United States mail, postage prepaid, to:  
 Name: \_\_\_\_\_  
 Mailing address: \_\_\_\_\_  
 City, state, and zip code: \_\_\_\_\_;

delivered a copy of this response to \_\_\_\_\_ (*the other party or the other party's attorney*); or

faxed a copy of this response to \_\_\_\_\_ (*the other party or the other party's attorney*) using the following fax number: \_\_\_\_\_. The transmission was reported as complete and without error. The time and date of the transmission was \_\_\_\_\_ (a.m.) (p.m.) on \_\_\_\_\_ (*date*).

|  |   |
|--|---|
|  | _____<br>Signature of person who made service |
|  | _____<br>Date of signature                    |

[Approved by Supreme Court Order No. 13-8300-010, effective for all pleadings and papers filed on or after May 31, 2013, in all cases pending or filed on or after May 31, 2013; as amended by Supreme Court Order No. 14-8300-011, effective for all pleadings and papers filed on or after December 31, 2014, in all cases filed or pending on or after December 31, 2014.]