

STATE OF NEW MEXICO
COUNTY OF BERNALILLO
IN THE METROPOLITAN COURT

_____,
Plaintiff,
v.
_____,
Defendant.

No. _____

MOTION TO DISMISS ACTION

Plaintiff Defendant requests the Court to dismiss the above cause of action for the following reason:

Date

Signed Plaintiff Defendant

Name (*print*)

Address (*print*)

City, state and zip code (*print*)

Telephone number

I certify that I mailed a true and correct copy of the foregoing Motion to the following:

Name (*print*)

Name (*print*)

Address (*print*)

Address (*print*)

City, state and zip code (*print*)

City, state and zip code (*print*)

on this _____ day of _____, 20____.

Signature

Printed Name

USE NOTE

A copy of this motion must be served on the other party or, if represented by an attorney, on the attorney for the other party not less than eight (8) days before the time fixed for the hearing.