STATE OF NEW MEXICO
COUNTY OF BERNALILLO
METROPOLITAN COURT

_____,
                              Plaintiff,

v.   No. _____

_____,
                              Defendant.

MOTION TO DISMISS ACTION

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

_____

_____

_____

_____

_____

_____

_____

_____

_____
(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

_____   _____
Address   Name

_____   _____
City, State and Zip Code   Address

on this _____ day of _____, 20____   _____
                                            City, State and Zip Code

_____
Signature

_____
Printed Name

USE NOTE

1. 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.