UNITED STATES DISTRICT COURT District of New Mexico

CM/ECF PRO SE NOTIFICATION FORM

Case Management/Electronic Case Files

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This form is used to elect the type of notification of filing to be received from the Court's Case Management/Electronic Case File (CM/ECF) system. Please select only **ONE** type of notification and complete the necessary information.

Case Number:

First/Middle/Last Name: lacqueline Wood Contact Phone Number: (Include Area Code) Complete the following information for either a P.O. Box or physical address, not both. Box 1406 Address: Crownpoint, NM 87313 City/State/Zip: Please choose the method of notification (select only one) I elect to receive notification via postal mail (Using the address entered above, either a P.O. Box or physical address.) I elect to receive notification via E-Mail ** (Complete the following information) E-Mail Address: I elect to receive notification via Fax ** (Complete the following information. Failures due to invalid or busy fax numbers will be delivered via postal mail to the address above) FAX Number: (Include Area Code) **For Fax or E-mail, by submitting this notification form, the undersigned consents to receiving notice of filings pursuant to Fed. R. Civ. P. 5(b) and 77(d) via the Court's electronic filing system. Repeated failures, of either the fax number or e-mail address, will result in the information being removed from the case and subsequent notifications will be delivered via postal mail. 9-18-13 acquille Ward Submission: You may submit this completed AND signed form via one the following: E-Mail United States District Court 505-348-2028 cmecf@nmcourt.fed.us ATTN: CM/ECF Notifications 333 Lomas Blvd NW, Suite 270 Albuquerque, NM, 87102 (Scan to PDF file format) Note: Questions regarding this form may be directed to our CM/ECF Help Desk at (505) 348-2075 or via email (at the above email address).

CM/ECF Pro Se Notification Form December 2012

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