ITEM 32

_____

Today's Date

Tort Claims Act Notice

ADDRESS OF RESPONSIBLE PARTY

_____

_____

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To Whom It May Concern:

This letter shall serve notice pursuant to §41-4-16 NMSA 1978 that a cause of action may be brought against the _____ **(insert entity and agency name here)**, State of New Mexico, and their agents in both their individual and official capacities. This is what happened: ***(give the date of the incident, time, place, names of officials involved, etc.)***

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I request adequate compensation for the pain, suffering, and emotional distress that I have suffered at the hands of your Department and/or it's agents.

Sincerely, _____ **(sign name here)**

_____**(print name here)**

_____**(write address here)**

_____