

STATE OF NEW MEXICO
PUBLIC EMPLOYEE LABOR RELATIONS BOARD

_____,
Complainant

v.

PELRB No:

_____,
Respondent

ANSWER TO PROHIBITED PRACTICES COMPLAINT

Respondent for its Answer STATES:

1. The following allegations are admitted: [Identify admitted allegations by paragraph or by description. A separate sheet may be attached if necessary.]

2. The following allegations are denied:

3. The following allegations cannot be admitted or denied, for lack of knowledge or information:

4. The following affirmative defenses are asserted

[Choose one of the following as may be appropriate:]

Respondent's Signature: _____ Date: _____

_____ Printed name:

OR

Signature of Respondent's Representative [if different than Respondent]

Printed name: _____

Address: _____

Telephone Number: _____

Fax Number: _____

Email: _____

Certificate of Service

I hereby declare that a true and correct copy of this Answer to Prohibited Practice Complaint was served on the following representatives of the Respondent by:

Hand delivery

US Mail

Electronic submission

on or about _____

Party served: _____

Name of individual served: _____

Address: _____

Additional persons served:

Signature

Printed Name