[Fill in the spaces next to the instructions. Attach copies of the indicated documents and mark them as exhibits. Sign your name in the presence of a notary public]

COUNTY OF NASSAU		X	
			[1. Index No. & Year] Index No.
[2. Fill in name(s)]	Pla	intiff(s)/Petitioner(s)	/ EMERGENCY AFFIDAVIT
-against-			EMERGENCY AFFIDAVII
[3. Fill in name(s)]	Def	endant(s)/Responden	t(s)
STATE OF NEW YORK, COUNTY OF NASSAU ss:		X	
I, [4. Your name]			, am the [5. Circle One]
plaintiff/petitioner/defendant			
request immediate judicial re	eview of r	ny [6. List the docum	ent you are presenting]
on the following grounds [7. merits of your underlying		_	eed immediate relief, not the
		[8. Sign your nam	ne before a Notary Public]
Sworn to before me this			
day of,	20	[9. Print Your Nar	ne]
Notary Public [10. Affidavit	t must be	notarized]	