[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		
[11. Fill in name(s)] -against- [12. Fill in name(s)]	Plaintiff(s)  Defendant(s)	[10. Index No. & Year] Index No. / AFFIDAVIT IN SUPPORT OF TEMPORARY RESTRAINING ORDER IN CIVIL ACTION
	)	<
STATE OF NEW YORK,		
COUNTY OFss:		
[13. Your name]		, being duly sworn,
deposes and says:		
1) I am the [14. Circle one] plair	ntiff/defendant, in this acti	on. I make this affidavit in
support of my motion for an orde	er [15. State what you wa	ant the Court's Order to
provide/grant you include why	you should be granted	immediate relief pending the
hearing of this motion by the C	Court. The above statem	nent must also be included
in the Order to Show Cause or	Notice of Motion.]	

2) I believe the Court should grant my motion because [16. Explain your reasons.  Attach additional pages if necessary]			
<del></del>			
<del></del>			
3) I request that the Court issue an Order temporarily restraining the plaintiff/defendant			
from [17. State the nature of the action or activity sought to be restrained.]			
The management of the decision of decisions of decisions and the management of the m			
for the reason(s) that			
[18. State the reasons- specifically why the order needs to be immediately			
granted.]			
4)A prior application [19. Check that a prior application has been made only if you			
are seeking the same relief again]has or has not been made for the relief			
requested herein. If a prior application has been made then provide the following			
information [20. What Court, when, who made the application, the result of the			
application, attach a copies of the application and explain why you are making			
another application.]			
another approachemi			

WHEREFORE, I respectfully re-	quest that this motion be granted, that the Court
issue a temporary restraining order, ar	nd that I have such other and further relief as the
Court may find to be just and proper.	
	[21. SIGN YOUR NAME BEFORE NOTARY]
	[22. PRINT YOUR NAME]
Sworn to before me this	
day of, 20	_
Notary Public	
[23. Affidavit must be notarized]	

COUNTY OF NASSAL	SUPREME COURT OF THE STATE OF NEW YORK COUNTY OF NASSAU	
[25. Fill in name(s)]	Plaintiff(s)	[24. Index No. & Year] Index No.
-against-		
[26. Fill in name(s)]	Defendant(s)	
	X	
	[27. Insert name(s) of papers subn	nitted]
-	120 VOLID SIGNATUREI	
	[28. YOUR SIGNATURE]	
	[29. PRINT YOUR NAME]	
	[30. YOUR ADDRESS]	
	[31. CITY, STATE ZIP CODE]	
	[32. YOUR PHONE NUMBER	<u> </u>