Please fill in the underlined spaces on the following form with answers appropriate to your motion. Motions are returnable in this Court on a Monday (or if a Monday falls on a holiday, on the next business day). You must give 13 days' notice (prior to the return date) if you serve the office of the District Attorney by mail or eight days' notice if you use personal service. Return the original motion papers to this office (addressed to Supreme Court, Appellate Division, Third Judicial Department, P.O. Box 7288, Capitol Station, Albany, NY 12224-0288), serve the office of the District Attorney with one copy, and provide this office with proof of service.

STATE OF NEW YORK SUPREME COUR APPELLATE DIVISION THIRD DEPARTM					
THE PEOPLE OF THE STATE OF NEW YORK,	<u>ILIVI</u>				
THE FEOR LE OF THE OTHER TORK,	MOTION FOR				
V					
	Appellate Division				
	Case No.:				
	_ ,				
Defendant	•				
PLEASE TAKE NOTICE that, upon the anne	xed affidavit sworn to the day of				
, 20 , a motion will be made	de at a term of this Court to be held in the City				
of Albany, New York on the da	ay of , 20 , for an				
order (Specify relief which you seek.):					
Datada					
Dated:					
(Signature)					
(Print Name)					
(Address)					
(Address) _					
(Telephone)					
(Telephone)					

Revised: September 18, 2018

## AFFIDAVIT IN SUPPORT OF MOTION

## STATE OF NEW YORK COUNTY OF \_\_\_\_\_ SS.: , being duly sworn, deposes and says: 1. I am the in the above-entitled action. I have appealed to the Appellate Division from an order or judgment of the County, dated (specify the status of the appeal.) 2. By this motion I seek the following relief: 3. The grounds for the motion and reasons the relief should be granted are (attach additional documentation, if necessary.): (Signature) (Print Name) Sworn to before me this , 20 . day of **Notary Public**

Revised: September 18, 2018

## **AFFIDAVIT OF SERVICE OF MAILING**

STATE OF NEV	V YORK		)			
COUNTY OF			) ss.:			
	, being d	uly sworn, d	eposes and says:			
On the	day of			, I served a true copy of the		
annexed notice of motion and supporting affidavit by mailing the same in a sealed envelope, with						
postage prepaid	I thereon, in a post offic	ce or official	depository of the L	J.S. Postal Service within the		
(Insert here the	ork, addressed to the la name[s] and address[e ourt. If necessary, attac	s] of the per	rson[s] to whom yo	u are mailing the papers being		
Name & Address		Name & Address				
(Signature) _						
	(Pr	int Name) _				
Sworn to before	me this	<u> </u>				
day of	, 20					
Not	ary Public	_				