

STATE OF NEW YORK  
FAMILY COURT COUNTY OF \_\_\_\_\_

\_\_\_\_\_  
MATTER OF \_\_\_\_\_ )  
\_\_\_\_\_) )  
\_\_\_\_\_) )  
\_\_\_\_\_) )  
\_\_\_\_\_) )  
\_\_\_\_\_) )  
(INSERT TITLE OF ACTION ABOVE) )  
\_\_\_\_\_ )

**NOTICE OF APPEAL**

# \_\_\_\_\_  
(Insert Family Court Docket Number)

PLEASE TAKE NOTICE, that \_\_\_\_\_ hereby appeals to the Supreme Court, Appellate Division, Fourth Department, from an Order of the \_\_\_\_\_ County Family Court (Hon. \_\_\_\_\_, J.), entered in the \_\_\_\_\_ County Family Court Clerk's Office on \_\_\_\_\_, 20\_\_\_\_ and from each and every part thereof (and from each and every intermediate Order therein entered).

DATED: \_\_\_\_\_, 20 \_\_\_\_

\_\_\_\_\_  
(Name and address of moving party/attorney)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

TO: \_\_\_\_\_ County Family Court Clerk

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Names and addresses of opposing parties/attorneys, and Attorney for the Child, if any (use additional sheet if needed)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SUPREME COURT OF THE STATE OF NEW YORK  
APPELLATE DIVISION, FOURTH DEPARTMENT

\_\_\_\_\_  
MATTER OF \_\_\_\_\_ )  
\_\_\_\_\_) )  
\_\_\_\_\_) )  
\_\_\_\_\_) )  
\_\_\_\_\_) )  
(INSERT TITLE OF ACTION ABOVE) )  
\_\_\_\_\_ )

**AFFIDAVIT OF  
SERVICE BY MAIL  
OF NOTICE OF APPEAL**

# \_\_\_\_\_  
(Insert Family Court Docket Number)

STATE OF NEW YORK )  
COUNTY OF \_\_\_\_\_ ) ss.:

\_\_\_\_\_, being duly sworn, deposes and says that (s)he is not a party to this action, is over 18 years of age, and resides at \_\_\_\_\_.

That on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, your deponent served the within **Notice of Appeal** by depositing a true copy thereof enclosed in a post-paid wrapper in an official depository under the exclusive care and custody of the U.S. Postal Service within New York State, addressed to each of the following parties and/or their attorneys at the last known address set forth after each name:

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

\_\_\_\_\_  
(PRINT NAME BELOW SIGNATURE)

Sworn to before me this  
\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
NOTARY PUBLIC/COMMISSIONER OF DEEDS

My commission expires: \_\_\_\_\_