

-----X

Index No. \_\_\_\_\_

\_\_\_\_\_  
Plaintiff(s)/Petitioner(s)  
- against -

AFFIDAVIT OF SERVICE  
OF INITIATING PAPERS

\_\_\_\_\_  
Defendant(s)/Respondent(s)  
-----X

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

I, \_\_\_\_\_ . being duly sworn,  
depose and say:

I am over 18 years of age and am not a party to this case.

I reside at \_\_\_\_\_

On \_\_\_\_\_, 20 \_\_, at \_\_\_\_\_ AM/PM, I served the attached  
papers \_\_\_\_\_

on the defendant in this case. The address of the place where the papers were  
served is \_\_\_\_\_

I served the papers in the manner indicated below: **[check the right box]**

1)  **individual** By delivering a true copy of each to the defendant personally.  
I knew the person served to be the person named in those papers  
because \_\_\_\_\_

2)  **Corporation** \_\_\_\_\_ . a  
domestic corporation, by delivering a true copy of each to  
\_\_\_\_\_ who is \_\_\_\_\_ . I knew the  
corporation to be that listed in the papers served and I knew  
the title of person named above and that she/she was authorized  
to accept service

3)  **Substituted Service** By delivering a true copy of each to \_\_\_\_\_,  
a person of suitable age and discretion, at the actual place  
of business, dwelling house, or usual place of abode in the  
state, and mailing, as indicated below.

**Mailing** I also enclosed a copy of the above papers in a postpaid,  
**(Use with 3)** sealed envelope properly addressed to defendant's last known  
residence or actual place of business, located at \_\_\_\_\_

\_\_\_\_\_ and I deposited the envelope in a post office depository under  
the exclusive care and custody of the United States Postal  
Service within New York State.

**Description** The individual I served had the following characteristics:  
**(Use with** **[Check the right boxes]:**

**1, 2, or 3)**

<u>Sex</u>	<u>Height</u>	<u>Weight</u>	<u>Age</u>
<input type="checkbox"/> Male	<input type="checkbox"/> Under 5"	<input type="checkbox"/> Under 100 lbs.	<input type="checkbox"/> 21-34 years
<input type="checkbox"/> Female	<input type="checkbox"/> 5'0"-5'3"	<input type="checkbox"/> 100-130 lbs.	<input type="checkbox"/> 35-50 years
	<input type="checkbox"/> 5'4"-5'8"	<input type="checkbox"/> 131-160 lbs.	<input type="checkbox"/> 51-61 years
	<input type="checkbox"/> 5'9"-6'0"	<input type="checkbox"/> 161-200 lb	<input type="checkbox"/> Over 61 yrs.
	<input type="checkbox"/> Over 61	<input type="checkbox"/> Over 200 lbs.	

Color of skin [describe] \_\_\_\_\_  
Color of hair [describe] \_\_\_\_\_  
other identifying features, if any [describe] \_\_\_\_\_  
\_\_\_\_\_

military  
Service

I asked the person to whom I spoke whether the defendant was in the military of the United States or New York State in any capacity and was told that he/she was not. Defendant did not wear a military uniform. I state upon information and belief that the defendant is not in the military service of the United States or New York State. The basis for my belief is the conversation(s) and observation(s) described above.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print your name

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

\_\_\_\_\_  
Notary Public