STATE OF NEW YORK

| SURROGAT | TE'S COURT COUNTY OF CORTLA | ND | |
|---------------|---|--|--|
| Proceeding | ESTATE OF | AFFIDAVIT FOR SERVICE OF PROCESS BY MAIL SCPA 307(2) | |
| | Deceased | | |
| STATE OF | NEW YORK | _ | |
| COUNTY O | ss: OF CORTLAND | | |
| | | , being duly sworn says: | |
| 1. | I am over 18 years of age. | | |
| 2. | On I sent to the persons | named below a true copy of the process | |
| issued in the | above proceeding by: (Check appropriate boxes) | | |
| | ☐ Certified Mail, Return Receipt Reques ☐ Registered Mail, Return Receipt Requ ☐ Special Mail Service by: ☐ Federal Express ☐ Airborne ☐ DHL ☐ United Parcel Service ☐ U.S. Postal Service Expr | | |
| 3. | Enclosed with the process was one of the follow | h the process was one of the following (Delete Lines Not Applicable) | |
| PROBATE: | A copy of the will being offered for probate | | |
| ACCOUNTI | NG: A copy of the summary statement of the acco | unt | |
| OTHER PRO | OCEEDINGS: | | |
| | | ocuments if any) | |
| | NAME | ADDRESS | |
| | | | |
| | | | |
| | | | |
| | (If necessary, add additional names and addi | esses on reverse side) | |
| Sworn to befo | • | , | |
| | , 20 | · | |
| | | | |
| (Notar | y Public) | | |

STATE OF NEW YORK SURROGATE'S COURT COUNTY OF

Notary Public

| Proceeding for | AFFIDAVIT CONCERNING DELIVERABILITY OF PROCESS SERVED BY MAIL SCPA 307(2) |
|---|---|
| ESTATE OF | |
| Deceased | |
| STATE OF NEW YORK | |
| ss: | · |
| COUNTY OF | |
| | , being duly sworn says: |
| (1) I am an attorney-at-law, duly admitted to practice in the Stathe work in the above entitled proceeding. This affidavit is made to copies of process served by certified or registered mail or special nundeliverable. | o advise the Court whether any of the |
| (2) On, 20, a true copy of the pr by certified or registered mail or special mail service in a prepaid wit: | ocess issued in this proceeding was sent envelope containing a return address, to |
| (set forth return address on enve to the following named persons at the addresses opposite their nam | |
| Name | Address |
| | |
| | |
| (if necessary, add additional names and addres | ses on reverse side) |
| (3) On, 20, the process issued was own knowledge, I know that I have in my possession return receipt all of the persons listed above, except | ts for certified or registered mail signed by |
| OR I have in my possession receipts for special mail service by □ Federal Express □ Airborne □ DHL □ United Parcel Services and the possession receipts for special mail service by | ice □ U.S. Postal Service Express Mail |
| upon all of the persons listed above, except | icable |
| (4) This affidavit is made in addition to the affidavit of mailing of the Court of the effectiveness of the service of process by mail. | he process heretofore filed herein, and informs |
| Sworn to before me on, 20 | |