F.C.A. §439(e) Form 4-7b (1/2024)

 FAMILY COURT OF THE STATE OF NEW YORK

 COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

IN THE MATTER OF Docket No.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Petitioner, OBJECTION TO SUPPORT MAGISTRATE

 -against- ORDER

 Respondent.

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

 I am a Party in the above-entitled proceeding and object to the order, dated [specify]: \_\_\_\_\_\_\_\_

a copy of which is attached, for the following reasons [specify; use additional sheets, if necessary]:

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

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Dated: . \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature (Petitioner or Respondent)

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

 Print or Type Name

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

 Signature of Attorney,if any

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

 (Attorney’s name) Print or Type

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

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

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**IMPORTANT:** You have the right to file specific objections in writing to a final Order of a Support Magistrate. The objections must contain: the name and docket number of the case, the date and specific provisions of the order to which you are objecting and the specific grounds for your objections. The objections must be served in person or by mail upon the opposing party and his or her attorney, if any, within thirty (30) days of the date the order was received in court or personally served or, if the order was received by mail, within thirty-five (35) days of the mailing of the order. If the objections are served in person, service must be made by an individual 18 years of age or older who is not a party to this action. You must file the objections with the Clerk of Court, together with an affirmation of service upon the party and attorney, if any. The affirmation of service form is on the second page of this objection form. The party who receives the objections has the right to respond by serving a written rebuttal upon you, along with a an affirmation of service, within 13 days of receiving the objection. All forms are also available at: [www.nycourts.gov/forms/familycourt/index.shtml.](http://www.nycourts.gov/forms/familycourt/index.shtml.)

**Affirmation of  Personal Service  Mail Service  Other: \_\_\_\_\_\_\_\_**

FAMLY COURT RETURN DATE: \_\_\_\_\_\_\_\_\_\_\_

STATE OF NEW YORK \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_: DOCKET NO.

PART \_\_\_\_\_\_\_\_\_\_\_\_\_

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, affirm and state the following:

 (Name of Person Making Service)

|  |  |  |
| --- | --- | --- |
| **YOU****MUST** |  |  |
| **Complete****This****Section** | 1. |  That I am at least 18 years of age, and I am not a party to the above action, and reside at: |

 (Street) (City) (County)

|  |  |
| --- | --- |
|  |  (Specify time) |
| at \_\_\_\_\_\_\_\_\_\_\_\_\_ |  in the City of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ , County of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, |

1. On the day of , 20 , at\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
|  | State of New York, I personally served a copy of: |
| **Check All** |   Order  Petition  Summons  Order to Show Cause |
| **that Apply** |  Objections to Support Magistrate Final Order  Notice of Motion/Affidavit in Support  Rebuttal to Objections to Hearing Examiner Final Order  UCCJEA Notice |

 on\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, in the above-mentioned action by:

1. I personally served \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ copies of the said papers by

 (Name of Person Served)

|  |  |  |  |
| --- | --- | --- | --- |
| **If Papers****SERVED****IN PERSON*****Complete this*** ***Section*** | 4. |  delivering and leaving with \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ at the above time and place. (Name / to whom papers given) I knew the person so served to be \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Name / to whom papers given) a.  the person named in the papers as the  Respondent  Petitioner in this actionb.  I believe this person would give the papers to the  Respondent  Petitioner. (You must also mail a copy and complete paragraph #6) |  |

 5. DESCRIPTION OF PERSON SERVED:

 sex: \_\_\_\_\_ color of skin: \_\_\_\_\_ hair: \_\_\_\_\_ approximate age: \_\_\_\_\_ approximate height: \_\_\_\_\_ approximate weight: \_\_\_\_\_ other identifying features: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |
| --- | --- | --- | --- |
|  |  6. | I deposited a true copy of the papers upon \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Name of Person Served) |  |
| ***You Must Complete*****IF MAIL SERVICE****ORDERED BY COURT or Paragraph 4b IS CHECKED** | enclosed in a post-paid envelope in the  Post Office  a Branch Post Office  a Post Office Box |  |
|  regularly maintained by the United States government at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
|  County of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, State of New York, directed to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Address papers mailed to) |  |
|   the residence of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Person papers mailed to) **OR**the address within the State designated by (him)(her) to receive communication by mail. |  |

|  |  |  |  |
| --- | --- | --- | --- |
|  |  7. |  The court ordered the papers to be served by the following alternative method:  |  |
| ***Complete this Section*****IF ALTERNATIVE SERVICE OR DIRECTED BY COURT** |  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. I, therefore, served the papers as follows: (Specify method ordered by Court) |  |
|  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Describe all actions taken, including dates, how and to whom papers were transmitted) |  |

|  |  |  |
| --- | --- | --- |
| I affirm this \_\_\_ day of \_\_\_\_\_\_, \_\_\_\_, under the penalties of perjury under the laws of New York, which may include a fine or imprisonment, that the above statements are true, and I understand that this document may be filed in an action or proceeding in a court of law. |  |  |
|  |  |  |

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

 (Signature / Person Serving)