INSTRUCTIONS: THIS AFFIDAVIT MUST BE USED FOR SERVICE OF INITIATING PAPERS (A SUMMONS AND COMPLAINT, SUMMONS WITH NOTICE, NOTICE OF PETITION AND PETITION, OR ORDER TO SHOW CAUSE AND PETITION). SERVER MUST SIGN HIS/HER NAME IN THE PRESENCE OF A NOTARY PUBLIC. PRINT AND USE BLACK INK ONLY. FILL IN THE NAMES OF THE PARTIES AND COMPLETE THE BLANK SPACES PRINTED IN BOLD TYPE.

COUNTY OF QUEENS	
[FILL IN NAME(S)]  Plaintiff(s)/Petitioner(s)	Index Number / [INSERT INDEX NUMBER]
-against-	AFFIDAVIT OF SERVICE OF INITIATING PAPERS
[FILL IN NAME(S)]	
Defendant(s)/Respondent(s)	X
STATE OF NEW YORK COUNTY OFss.: [FI	LL IN COUNTY WHERE AFFIDAVIT WAS SIGNED]
l,	[NAME OF PERSON WHO
SERVED PAPERS], being duly sworn, depose and	say: I am over 18 years of age and am not a
party to this case. I reside at	[SERVER'S
<b>ADDRESS</b> ]. On, 200 <b>[DATE</b>	of service], at A.M./P.M. [TIME of DAY],
I served the attached papers, namely the	[IDENTIFY
THE PAPERS SERVED] on	[INSERT NAME OF PARTY
SERVED], a Defendant/Respondent [CIRCLE ONE] ir	this case. The address of the place where the
papers were served is	
LOCATION WHERE PAPERS WERE SERVED].	

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. [FILL OUT DESCRIPTION BELOW.]						
2)	CORPORATION, a domestic						
	corporation, by delivering a true copy of each to						
	SERVED], who is [IDENTIFY THE INDIVIDUAL TO						
	WHOM THE PAPERS WERE DELIVERED AND HIS/HER JOB TITLE]; I knew the corporation						
	to be that listed in the papers served and I knew the title of the person named above						
	and that he/she was authorized to accept service.						
3)	SUBSTITUTED SERVICE by delivering a true copy of each to						
	[INSERT NAME OF PERSON], 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.						
	SUBSTITUTED SERVICE by affixing a true copy to the door at						
	Which is the defendants						
	I made prior attempts to serve at this location on the following dates and times:						

I served the papers in the manner indicated below [CHECK OFF THE APPROPRIATE BOX]:

									<del>.</del>								
MAILING	I also enclosed a copy of the above papers in a postpaid (already had the stamps on it), sealed envelope properly addressed to defendant at defendant's last																
(USE																	
WITH 3)	known res	sidence	or	actual	place	of I	ousiness,	locate	d at								
					[AI	DDRESS]	, 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.																
DESCRIP-	The individual I served had the following characteristics:  Male Female Hair color Skin Color 21-34 yrs 35-50 yrs 51-61 yrs Over 61																
TION																	
(USE WITH																	
1,2 OR 3) 120-150 lbs 151-181 lbs Over 182 lbs.																	
	MILITARY SERVICE I asked the person to whom I spoke whether the																
	defendant was in active service in the military of the United States or New York State in any capacity and I 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 bases for my belief are the conversations and observations described above.																
													ISEDVE	O'S NAME	SIGNED]		
								Sworn to bef	ore me on				JOLINVEN	C O NAME	- SIGNED]		
								this day	y of, <i>2</i>	20			[SERVER	R'S NAME	PRINTED]		-
	Notary Public	<del></del>															