SUPREME COURT OF THE STATE OF NEW YORK COUNTY OF QUEENS

	X		
(Fill in name(s	s)) Plaintiff(s)/Petitioner(s)	Index Number	
	- against -	Affidavit of Service	
(Fill in name(s	s) Defendant(s)/Respondents(s)		
	NEW YORK FSS:		
Ι,	bei	ng duly sworn says:(NAME OF PERSON	
WHO SERVE	s papers) I am not a party to the action, a	m over 18 years of age And reside	
at		(ADDRESS	
OF PERSON S	SERVING PAPERS). On, 20(DAT	E OF SERVICE), I served a true copy of	
the followin	g papers,	(IDENTIFY THE PAPERS	
SERVED) wh	ich are attached to this affidavit, in the following	g manner: [CHECK ONE]	
	By personally delivering the papers to:	[PERSON	
	SERVED] at [ADDRESS]	<u>.</u>	
PERSONAL	The individual I served had the following characteristics: [FILL IN]		
SERVICE	Male Female Skin Color	Hair Color	
	21-34 yrs 35-50 yrs 51-61 yrs.	Over 61	
	120-150 lbs 151-181 lbs (Over 182 lbs.	
	Approximate height		
	Other distinguishing features		

	By mailing the same in a sealed envelope, with postage prepaid				
MAIL	thereon, in a post-office or official depository of the U.S. Postal Service within the				
	State of New Yor	rk, addressed to the last-l	known address of the addressee	e(s) as	
	indicated below:				
	By depositing the	same with an overnight d	elivery service in a wrapper prop	erly	
OVERNIGHT	addressed. Said delivery was made prior to the latest time designated by the				
DELIVERY	overnight delivery	service for overnight deli	very.		
SERVICE	·	The			
	name(s) and addr	ress(es) of person(s) serv	ed are indicated below:		
Name(s) and a	address(es) of Person	n(s) served:			
			[SIGN NAME] Before a Notary		
			[PRINT NAME]		
Sworn to be day of	fore me this , 20				

Notary Public