AFFIDAVIT OF SERVICE

Your State)
Your County)
I, Your Name, being duly sworn, deposes and says: I am not a party to this
action and am over 18 years of age. On the day of, 20, I
served the within Notice of Motion with attached Verified Show Cause upon the
names and addresses are set forth below, by mailing a true copy of the attached
papers, enclosed and properly sealed in a postpaid envelope, which I deposited in
an official depository under the exclusive care and custody of the United States
Postal Services within the State of New York addressed to:
Your County District Attorney Address City, State, and zip code Others if necessary
NOTARY
Your State, Your County on this day of, 20 before me, the subscriber, personally appeared Your Name to me known to be the living (wo)man describe herein and who executed the forgoing instrument and sworn before me that (s)he executed the same as their free will act and deed.
Notary