COUNTY OF	CCITY OF NEW YORK : PART	Index No.:
	Petitioner,	AFFIRMATION OF SERVICE BY MAIL
-aga	uinst-	
	Respondent.	
STATE OF NEW YORK COUNTY OF	SS:	
		, hereby affirms,
deposes and says:		
I am over 18 years of age	and not a party to this action	n. On
I served		
upon	, t	the in this
proceeding, by mailing a tr	rue copy of the attached pap	pers, enclosed and properly sealed in a
postpaid envelope, which I	deposited in an official dep	pository under the exclusive care and
custody of the United State	es Postal Services within th	e State of New York addressed to
	the	
at:		
affirm this day of ws of New York, which ma	, 20 ay include a fine or imprison at may be filed in an action	_, under the penalties of perjury undenment, that the foregoing is true, and or proceeding in a court of law.

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