

SUPREME COURT OF THE STATE OF NEW YORK  
COUNTY OF \_\_\_\_\_

X

Index No.: \_\_\_\_\_

Plaintiff

-against-

Defendant

X

**AFFIDAVIT OF SERVICE**  
[ Summons with Notice ]  
[ Summons and Complaint ]

STATE OF \_\_\_\_\_ }

ss:

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

\_\_\_\_\_ being duly sworn, says:  
(Name of server)

I am not a party to the action, I am over 18 years of age and reside at: \_\_\_\_\_

(Server's Address)

On \_\_\_\_\_, at \_\_\_\_\_ a.m./p.m., at \_\_\_\_\_  
(Date) (Time) (Address / place of service)

Address / place of service)

I served the  Summons with Notice (Form A-1)  
 Summons and Verified Complaint (Form A-2 and Form A-3)  
 Sworn statement of Removal of Barriers to remarriage (Form A-6)  
on \_\_\_\_\_, the Defendant named herein, by delivering a true  
(Defendant's name)  
copy to the Defendant personally.

\* SAID DOCUMENTS WERE ENDORSED WITH THE INDEX NUMBER AND DATE OF FILING THEREON.

The notice required by the Domestic Relations Law, Section 232 -- "ACTION FOR A DIVORCE" -- was legibly printed on the face of the summons served on the Defendant.

Form A-4: AFFIDAVIT OF SERVICE

I knew the person so served to be the person described in the summons as the Defendant. My knowledge of the Defendant and how I acquired it is as follows:  
*(select one)*

I have known the Defendant for \_\_\_\_\_ years and \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

OR

I identified the Defendant by a photograph annexed to this affidavit and which was given to me by the Plaintiff. \* STAPLE PHOTO TO AFFIDAVIT

OR

Plaintiff accompanied me and pointed out the Defendant.

OR

I asked the person served if  *he*  *she* was the person named in the summons and Defendant admitted being the person so named.

Deponent describes the individual served as follows:

<u>Sex</u>	<u>Height</u>	<u>Weight</u>	<u>Age</u>	<u>Color of Skin</u>	<u>Color of Hair</u>
<input type="checkbox"/> Male	<input type="checkbox"/> Under 5'	<input type="checkbox"/> Under 100 Lbs	<input type="checkbox"/> 14-17 Yrs.	Describe color: _____ _____ _____	<input type="checkbox"/> Black
<input type="checkbox"/> Female	<input type="checkbox"/> 5'0"-5'3"	<input type="checkbox"/> 100-130 Lbs	<input type="checkbox"/> 18-20 Yrs.		<input type="checkbox"/> Brown
	<input type="checkbox"/> 5'4"-5'8"	<input type="checkbox"/> 131-160 Lbs	<input type="checkbox"/> 21-35 Yrs.		<input type="checkbox"/> Blond
	<input type="checkbox"/> 5'9"-6'0"	<input type="checkbox"/> 161-200 Lbs	<input type="checkbox"/> 36-50 Yrs.		<input type="checkbox"/> Gray
	<input type="checkbox"/> Over 6'	<input type="checkbox"/> Over 200 Lbs	<input type="checkbox"/> 51-65 Yrs.		<input type="checkbox"/> Red
			<input type="checkbox"/> Over 65 Yrs.		<input type="checkbox"/> White
					<input type="checkbox"/> Balding
					<input type="checkbox"/> Bald

Other identifying features, if any \_\_\_\_\_

*At the time I served the Defendant, I asked him/her if he/she was in the military service of this state, any other state, or this nation, and the Defendant responded in the negative.*

**OR**

*The Defendant stated that*  *he*  *she* *is in the following military service \_\_\_\_\_.*

Subscribed and Sworn to  
before me on:

\_\_\_\_\_

\_\_\_\_\_  
NOTARY PUBLIC

\_\_\_\_\_  
Server's Signature

\_\_\_\_\_  
( Print Name )