

For help in completing this form, click on the yellow question marks or comment symbol for instructions. Please note that you *cannot* save this form. Once complete you will be able to print it, but not save it. Please make sure that your **Highlight Fields** option is on so that the fields that need to be completed are light blue in color on the form. Turn it on by clicking on the **Highlight Fields** button that is on the far right side of the purple message bar.

STATE OF NEW YORK)
SURROGATE'S COURT :) COUNTY ?

Proceeding for the Appointment of a
Guardian for

Pursuant to SCPA Article 17-A

AFFIDAVIT OF SERVICE

STATE OF NEW YORK)
COUNTY OF) ss.: ?

_____, being duly sworn, deposes and says:

I am not a party to this action, am over eighteen (18) years of age and reside at:

_____ Street, _____ City, _____ State, _____ Zip

I personally served the within Citation upon the following person(s) by leaving a copy of the Citation with said person(s) at the time and place set forth below:

① Name: _____ Date: ____/____/____
Place: _____ Time: ____:____ am / pm

- | | | | |
|---------------------------------|--|---|---|
| Sex: | Age: | Height: | Weight: |
| <input type="checkbox"/> Male | <input type="checkbox"/> 14 - 17 years | <input type="checkbox"/> Under 5' | <input type="checkbox"/> Under 100 lbs. |
| <input type="checkbox"/> Female | <input type="checkbox"/> 18 - 20 years | <input type="checkbox"/> 5' 0" to 5' 3" | <input type="checkbox"/> 100 - 130 lbs. |
| | <input type="checkbox"/> 21 - 35 years | <input type="checkbox"/> 5' 4" to 5' 8" | <input type="checkbox"/> 131 - 160 lbs. |
| | <input type="checkbox"/> 36 - 50 years | <input type="checkbox"/> 5' 9" to 6' 0" | <input type="checkbox"/> 161 - 200 lbs. |
| | <input type="checkbox"/> 51 - 65 years | <input type="checkbox"/> Over 6' | <input type="checkbox"/> Over 200 lbs. |
| | <input type="checkbox"/> Over 65 years | | |

Skin Color (describe): _____

Hair Color: Black Brown
 Blond Gray
 Red White
 Balding Bald

② Name: _____ Date: ____/____/____
Place: _____ Time: ____:____ am / pm

- | | | | |
|---------------------------------|--|---|---|
| Sex: | Age: | Height: | Weight: |
| <input type="checkbox"/> Male | <input type="checkbox"/> 14 - 17 years | <input type="checkbox"/> Under 5' | <input type="checkbox"/> Under 100 lbs. |
| <input type="checkbox"/> Female | <input type="checkbox"/> 18 - 20 years | <input type="checkbox"/> 5' 0" to 5' 3" | <input type="checkbox"/> 100 - 130 lbs. |
| | <input type="checkbox"/> 21 - 35 years | <input type="checkbox"/> 5' 4" to 5' 8" | <input type="checkbox"/> 131 - 160 lbs. |
| | <input type="checkbox"/> 36 - 50 years | <input type="checkbox"/> 5' 9" to 6' 0" | <input type="checkbox"/> 161 - 200 lbs. |
| | <input type="checkbox"/> 51 - 65 years | <input type="checkbox"/> Over 6' | <input type="checkbox"/> Over 200 lbs. |
| | <input type="checkbox"/> Over 65 years | | |

Skin Color (describe): _____

Hair Color: Black Brown
 Blond Gray
 Red White
 Balding Bald

? 3

Name: _____

Date: ___ / ___ / ___

Place: _____

Time: : ___ am / pm

Sex:

- Male
- Female

Age:

- 14 - 17 years
- 18 - 20 years
- 21 - 35 years
- 36 - 50 years
- 51 - 65 years
- Over 65 years

Height:

- Under 5'
- 5' 0" to 5' 3"
- 5' 4" to 5' 8"
- 5' 9" to 5' 0"
- Over 6'

Weight:

- Under 100 lbs.
- 100 - 130 lbs.
- 131 - 160 lbs.
- 161 - 200 lbs.
- Over 200 lbs.

Skin Color (describe):

Hair Color:

- Black
- Blond
- Red
- Balding
- Brown
- Gray
- White
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? 4

Name: _____

Date: ___ / ___ / ___

Place: _____

Time: : ___ am / pm

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- Male
- Female

Age:

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- 161 - 200 lbs.
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Skin Color (describe):

Hair Color:

- Black
- Blond
- Red
- Balding
- Brown
- Gray
- White
- Bald

Further, deponent knows the individual(s) served to be the person(s) mentioned in said Citation.

Signature

Sworn to before me this _____
day of _____, 20 ____.

?

Notary Public