STATE OF NEW YORK FAMILY COURT COUNTY OF	
MATTER OF))) NOTICE OF APPEAL)
(INSERT TITLE OF ACTION ABOVE)) #) (Insert Family Court Docket Number))
PLEASE TAKE NOTICE, that	hereby appeals to the
Supreme Court, Appellate Division, Fourth Depart	rtment, from an Order of the
County Family Court (Hon, J.),	entered in the
County Family Court Clerk's Office on	, 20 and from each and
every part thereof (and from each and every inter	rmediate Order therein entered).
DATED:, 20	
O: County Family Court	Clerk
	es of opposing parties/attorneys, and , if any (use additional sheet if needed)

SUPREME COURT OF THE STATE OF NEW YORK APPELLATE DIVISION, FOURTH DEPARTMENT **AFFIDAVIT OF** MATTER OF **SERVICE BY MAIL** OF NOTICE OF APPEAL (Insert Family Court Docket Number) (INSERT TITLE OF ACTION ABOVE) STATE OF NEW YORK) COUNTY OF ______) ss.: _____, being duly sworn, deposes and says that (s)he is not a party to this action, is over 18 years of age, and resides at That on the _____ day of _____, 20___, your deponent served the within Notice of Appeal by depositing a true copy thereof enclosed in a post-paid wrapper in an official depository under the exclusive care and custody of the U.S. Postal Service within the United States, addressed to each of the following parties and/or their attorneys at the last known address set forth after each name: (PRINT NAME BELOW SIGNATURE) Sworn to before me this ____ day of _____, 20____ NOTARY PUBLIC/COMMISSIONER OF DEEDS My commission expires: