## ALEXANDER, POOLE & COMPANY, INC.

= "THE ATTORNEY'S SERVICENTER"

## CELEBRATING 50 YEARS OF SERVICE!

P.O. Box 69 • Albany, New York 12201
TELEPHONE (518) 436-0895 • Fax (518) 436-7366
TAX ID # 14-1482374

**Invoice** # 1118087 October 28, 2011

The Montauk Friends of Olmstead Parks, Inc. / Town of Montauk Robert A. Ficalora
P.O. Box 2612
Montauk, NY 11954

## Your File #

ion:	The Seaview at Amagansett, Ltd., et al  vs  Town of Montauk, Intervenor et ano etc.		Plaintiff/Petitioner	Date Received: 10/27/2011 Serve By Date: 11/8/2011 Date Returnable: Docket or ID #: 09-34714		
			Defendant/Respondent	Court: Si		
Re: [		Attorney General of the State of	County: Su	County: Suffolk		
s. Ser	ved: Notice of	Filing, Affirmation of Service, Notice	Date Served: 10/27/2011	Original:	We File:	
OR				rver: Christopher Warn	er	
Provid	ded:		Place Served: Justice Bldg, A	lbany, NY		
ſ	Date	Service Description		Service Fee	Payments	
Ī	10/28/2011	Process Serving-Local		\$28.00		
		To Ronald House				
;	10/27/2011	Advance Payment by Customer 3416 (8 Jewelry Boutique)	34) 3416		\$28.00	
			ce Fees and Total Fees Prepa	id: \$28.00	\$28.00	
	Fees 30 days	a \$25.00 late charge added to all past due past due will accrue interest at the rate of onable costs of collection. Fed I.D.# 14-14	iii accrue interest at the rate of 1.5% per month		Amount Due = \$0.00	

## Payable upon receipt. Please pay from this invoice.

Please detach and return this section with your payment. Make checks payable to Alexander Poole & Co., Inc. \*There will be a \$25.00 service fee on all returned checks\*\_

We now accept eChecks, Visa, Mastercard and Discover

The Montauk Friends of Olmstead Parks, Inc. / Robert A. Ficalora P.O. Box 2612 Montauk, NY 11954

Alexander, Poole & Co., Inc. P.O. Box 69 Albany, New York, 12201 Invoice Work Order #: 1118087 Invoice Date: October 28, 2011

Attorney's ID#: A10310

Total Amount Due= \$0.00

Amount Paid\_\_\_\_\_

	The Seaview at Amaş vs	gansett, Ltd., et al		Plaintiff(s)/Petitioner(s)				
	Town of Montauk, Int	ervenor et ano etc.		Defendant(s)/Respondent(s)				
STATE OF NEW	V YORK: COUNTY OF ALBANY	,	SS.:					
	Christopher Warner	, being duly sworn d	leposes and says depo	nent is not a party herein,				
is over the age o	of eighteen years and resides in the Stat	te of New York. That on	October 27, 2011	at 12:55 pm				
at	NYS Justice Bldg., Alba	any, NY	deponent(did,	did not) serve the following :				
	Affirmation of Service, Notice			•				
on:	·	ey General of the State of New	v York					
#1 INDIVIDUAL	(herein called recipient) therein nar By delivering a true copy of each to said person therein.		knew the person served to					
#2 CORP.	Axxxxxxx corporation, by delivering thereat a true copy of each to Ronald House personally, deponent knew said corporation so served to be the corporation, described in same as said recipient and knew said individual to be Authorized Agent thereof.							
	Service was made in the following manner after your deponent was unable, with due diligence, to serve the defendant in person including an effort to reach the defendant by telephone, (if such telephone number was available) and an attempt to locate the defendant's place of employment.							
#3 SUITABLE AGE PERSON	PERSON is recipient's [ ] actual place of business [ ] dwelling house (usual place of abode) within the state  FIXING By affixing a true copy of each to the door of said premises, which is recipient's [ ] actual place of business [ ] dwelling house							
#4 AFFIXING TO DOOR								
#5 MAILING COPY	On	deponent completed service unde	er the last two sections by	depositing a copy of the				
	to the above address in a First Class postpaid properly addressed envelope marked "Personal and Confidential" in an offici depository under the exclusive care and custody of the United States Post Office in the State of New York.							
	Deponent called at the aforementioned ad							
	on the day of	•						
	on the day of on the day of							
	on the day of	ar at						
#6 NON- SERVICE	After due search, careful inquiry and diligent attempts, I have been unable to effect process upon the person/entity being served because of the following:  [ ] Unknown at Address [ ] Evading [ ] Moved left no forwarding [ ] Address does not exist [ ] Other							
	• • • • • • • • • • • • • • • • • • • •		•	[ 1 Other				
#7 DESCRIPTION  [X] (use with #1, 2 or 3)	A description of the Defendant, or other person served, on behalf of the Defendant is as follows:  Sex Male Color of skin White Color of hair Gray Approx.Age 51 - 65 Yrs. Approx.Height Over 6' Apweight Over 200 Lbs. Other Glasses							
#8 WIT. FEES	\$, the authorized travel expenses and one day's witness fee was paid (tendered) to the recipient.							
<del></del> _	Deponent asked person spoken to whethe duty in the military service in the State of N			d States Government or on activ				
Sworn to before m	ne on this			. \				
28th day of	October, 2011		Dewith	Lebenn				
Johnson	S CORN		Christopher V	Varner				

FAITH COZZY NOTARY PUBLIC, State of New York No. 01CO6158874, Albany County Commission Expires Jan 8, 2015

Invoice Work Order # 1118087