

AFFIDAVIT OF SERVICE

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

I, Deborah Allen, being sworn, say, I am not a party to this action, am over 18 years of age, and reside in Westchester County, New York.

On the 26th day of April, 2016, I served a true copy of the within **VERIFIED ANSWER TO SECOND AMENDED COMPLAINT WITH CROSS-CLAIMS** by electronically filing a true copy thereof under the exclusive care and custody of the New York State Courts Electronic Filing System within New York State, addressed to the attorney(s) for the respective parties in this action, at the address(es) designated by said attorney(s) for that purpose, to the e-mail address(es) designated by said attorney(s) for that purpose.

I also served a true copy of the within via regular mail, addressed to the respective parties unrepresented by counsel in this action, by depositing true copies of same enclosed in a postpaid, properly addressed wrapper, in an official depository under the exclusive care and custody of the United States Post Office within the State of New York.

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Deborah Allen

Sworn to before me this
26th day of April, 2016.


Notary Public

DINA R. MACDONALD
Notary Public, State of New York
No. 01MA6157579
Qualified in Westchester County
Commission Expires December 11, 2018