W69

Civil Court of the City of New York	
Part Small Claims	Index No. 187 SCNY 20/4
Eleva Sassower Claimant(s)/Plaintiff(s), against	For Vacate achitation (Relief Requested)
Anna Capellen Defendant(s),	decision & restoce
Upon the annexed Affidavit of	a Sassower
the above named Claimant(s)/Plaintiff(s)/Defendant(s), sworn to and upon all the papers and proceedings herein:	on May 27, 2015,
LET the Claimant(s)/Plaintiff(s)/Defendant(s) or the	attorney(s) therefor show cause at:
The Civil Court of the C (Small Claims Part) (Special Term, Par	
Located at: 111 Centre St R	oom 353, New York, NY
County of: New York	20 20/ 1/20
on:on as soon thereafter as counsel may be heard, why an Order show	ald not be made: AM/PM,
Vacating the albit	cator's decision and
and/or granting such other and further relief as may be just.	to the calendar
	nd the entry of an Order thereon, let all proceedings in this
action on the part of the Claimant(s)/Plaintiff(s)/Defendant(s), Sheriff of the City of New York for	the attorney(s) and agents therefor and any Marshal or be stayed.
SERVICE of a copy of this Order to Show Cause, and Claimant(s)/Plaintifs(s)/Defendant(s) or named attorney(s): (Judge to Initial)	d annexed Affidavit, upon the: Sheriff or Marshal: (Judge to Initial)
by Personal Service by "In Hand Delivery" by Certified Mail, R. R. R.	by Personal Service by "In Hand Delivery" by Certified Mail, R. R. R.
by First Class Mail with official Post Office Certificate of Mailing	by First Class Mail with official Post Office Certificate of Mailing
	deemed good and sufficient.
PROOF OF SUCH SERVICE may be filed with the Cl Order to Show Cause or in the Clerk's Office before the return da	erk in the Part indicated above on the return date of this te of this Order to Show Cause.
Attorney(s):	Sheriff/Marshal:
Hodrew Squire	- S.2k11
379 Decatur St.	SOSE A PADELLA, JR.
Drooklyn, M 11655	MON.
Date	Judge, Civil Court

Civil Court of the City of New York	[PLEASE PRESS HARD]
County of Part Small Cains In	ndex Number 187 SCNY 2014
Plaintiff(s), Petitioner(s), Claimant(s) against F Anna Capellen Defendants, Respondent(s)	AFFIDAVIT IN SUPPORT OF AN ORDER TO SHOW CAUSE or Vacate ab decision (Relief Requested)
State of New York, County ofss:	
[Print your name]	, being duly sworn, deposes and says:
1. Party a) I am the party named as (Plaintiff)(Petition entitled proceeding.	er)(Claimant)(Defendant)(Respondent) in the above
2. I request that the Court issue an Order for: Request The Calendar	on decision & restore
or grant such	other relief as the Court may deem to be just and proper.
3. I have a good defense/claim because: Defense/ Claim	standiated 65
(May 1, 2013 + May 17, 2013	as arelles by affic comesphaline
4 I have a good excuse/reason because: Excuse/ Reason	refused to read
5. a) I have not had a previous Order to Show Case Prior b) I have had a previous Order to Show Cause	ause regarding this Index Number. e regarding this Index Number but I am making this
Order further application because	Soo or oak of oth child
A. A. D. 27th	(Sign Name) Tonal IZX XXXXXX
Sworn to before me this	(Print Name) ACAG ROYA SQUARY (Address) 10 SHW ACA PIGO ACAG
Signature of Court Employee and Title CIV-GP-13 (Revised, March, 2000) (4 ply)	City, State, Zip Code Telephone Number