

**SUMMARY STATEMENT ON APPLICATION FOR  
EXPEDITED SERVICE AND/OR INTERIM RELIEF  
(SUBMITTED BY MOVING PARTY)**

Date \_\_\_\_\_

Title of Matter \_\_\_\_\_ Index/Indict # \_\_\_\_\_

Appeal by \_\_\_\_\_ from order judgment of Supreme Surrogate's Family Court \_\_\_\_\_  
County \_\_\_\_\_ Court entered on \_\_\_\_\_, 20 \_\_\_\_\_

Name of Judge \_\_\_\_\_ Notice of Appeal filed on \_\_\_\_\_, 20 \_\_\_\_\_

If from: administrative determination, state agency \_\_\_\_\_

Nature of action or proceeding \_\_\_\_\_

Provisions of order judgment appealed from \_\_\_\_\_  
decree \_\_\_\_\_

This application by \_\_\_\_\_ appellant respondent is for \_\_\_\_\_

If applying for a stay, state reason why requested \_\_\_\_\_

Has any undertaking been posted \_\_\_\_\_ If "yes", state amount and type \_\_\_\_\_

Has application been made to court below for this relief \_\_\_\_\_ If yes, state Disposition \_\_\_\_\_  
Has there been any prior application herein in this court \_\_\_\_\_ If "yes", state dates and nature \_\_\_\_\_

Has adversary been advised of this application \_\_\_\_\_ Does he/she consent \_\_\_\_\_

Attorney for Movant

Attorney for Opposition

Name \_\_\_\_\_

\_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Tel. No. \_\_\_\_\_

\_\_\_\_\_

Appearing by \_\_\_\_\_

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DISPOSITION

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Justice

Date

Motion Date \_\_\_\_\_ Opposition \_\_\_\_\_ Reply \_\_\_\_\_

EXPEDITE \_\_\_\_\_ PHONE ATTORNEYS \_\_\_\_\_ DECISION BY \_\_\_\_\_

ALL PAPERS TO BE SERVED PERSONALLY.

\_\_\_\_\_  
Court Attorney