[Print in black ink to fill in the spaces next to the instructions. Both pages must be completed. This summons cannot be used for divorce actions.] SUPREME COURT OF THE STATE OF NEW YORK COUNTY OF BRONX SUMMONS WITH NOTICE Index No. -against-Montenere www Rocheller & Janned Parenthoot [Name(s) of party being sued] Defendant(s) Date Index No. purchased To the Person(s) Named as Defendant(s) above: PLEASE TAKE NOTICE THAT YOU ARE HEREBY SUMMONED to appear in this action by serving a notice of appearance on the plaintiff(s) at the address set forth below, and to do so within 20 days after the service of this Summons (not counting the day of service itself), or within 30 days after service is complete if the summons is not delivered personally to you within the State of New York. YOU ARE HEREBY NOTIFIED THAT should you fail to answer or appear, a judgment will be entered against you by default for the relief demanded below. Dated: [Date of summons] [Sign your name(s)] [Print your name(s)] 1225 Carpenter Ave [Your address(es) and telephone no.(s)] Defendant(s) 16 Guion Pl, New John, Nd

[Address(es) of party being sued]

26 Blee Clay St, NJ, NJ,

Permanent Cervix of Parmanent Cervix of Parmanent Cervix of Cervix of Parmanent Cervix of Cervix	breach of contract, negligence]:
IFUl - Vaginal, bleeding,	Adominal Pain
rearse 1 = Pain and Surreng	· loss or daily routines s
The relief sought is [briefly desc	ribe the kind of relief you are
asking for, such as, money damages of \$	25,000]
2 million	
Should defendant(s) fail to appear	herein, judgment will be entered
oy default for the sum of	[amount of money demanded]
with interest form the date of	[date from which
interest on the amount demanded is also	modl and the costs of this setion
interest on the amount demanded is claim	med] and the costs of this action
	med] and the costs of this action
interest on the amount demanded is claim	med] and the costs of this action
	y as the place of trial. The
<u>Venue:</u> Plaintiff(s) designate Bronx Count	y as the place of trial. The that applies]:
Venue: Plaintiff(s) designate Bronx Count basis of this designation is [check box	y as the place of trial. The that applies]:

VERIFICATION

STATE OF NEW YORK)		
COUNTY OF BLONY) ss:		
	2	
nair E	[your name],	
being duly sworn, deposes and says: That I am the plaintiff in this proceeding, that I have read		
the foregoing complaint and know the contents there	of; that the same is true to my own	
knowledge, except as to matters therein stated to be	alleged on information and belief; and that as	
to those matters I believe them to be true.		
Savoro do la Coma de d	1///	
Sworn to before me on the	A Com	
7 day of October, 2019	This 100	
	Plaintiff	
Sharmall. La Oland	[Sign your name before a Notary]	
Notary Public	Brank Baker	
	[Print your name]	
Shayna G. LaPlante Notary Public, State of New York No. 03LA6396562 Qualified in Bronx County Commission Expires August 19, 2023		