

**SUPREME COURT OF THE STATE OF NEW YORK
APPELLATE DIVISION, THIRD DEPARTMENT**

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STATEMENT OF E-FILING

Appellate Division

Case/Docket No.: _____

-against-

Originating Court No.:

Date Notice of Appeal Filed:

_____/_____/_____

-----X

PLEASE TAKE NOTICE:

Statement of prior E-Filing (appellant):

- [] I, _____, am [] an attorney in good standing representing a party in the above-captioned action, [] an attorney admitted pro hac vice representing a party in this matter, or [] a self-represented party in this matter, and **hereby certify** under penalty of perjury that the above matter was electronically filed through the New York State Courts Electronic Filing System (“NYSCEF”) in the court of original instance. I understand that this matter must be perfected through the NYSCEF system, and am aware of the rights and responsibilities of parties (including unrepresented parties) under the Appellate Divisions e-filing rules (22 NYCRR Part 1245). Additionally, I understand that once an appellate number is assigned, I must serve this **Statement of E-Filing** together with Notification of Case Number (AD-EF-01) in accordance with Appellate Division e-filing rules, as supplemented by local rules.

OR

Stipulation and consent of parties:

- [] We the undersigned, counsel in good standing representing parties, counsel admitted pro hac vice, and/or an unrepresented party in this matter, hereby **stipulate and consent** to the use of the New York State Courts Electronic Filing System (“NYSCEF”) in this matter. We agree to be bound by Appellate Division e-filing rules (22 NYCRR Part 1245), as supplemented by local court rules.

The undersigned confirm that they are registered as authorized e-filers with NYSCEF and understand that the primary e-mail addresses, listed below, will be used for service of documents.

Dated:

Attorney [] Pro Hac [] Unrep []

Attorney [] Pro Hac [] Unrep []

Signature

Signature

Print Name

Print Name

Attorney for (Identity of Parties)

Attorney for (Identity of Parties)

UCS Attorney Registration #

UCS Attorney Registration #

Firm Name

Firm Name

Address

Address

Phone #

Phone #

E-Mail

E-Mail

(Primary Service E-Mail Address)

(Primary Service E-Mail Address)

Attorney [] Pro Hac [] Unrep []

Attorney [] Pro Hac [] Unrep []

Signature

Signature

Print Name

Print Name

Attorney for (Identity of Parties)

Attorney for (Identity of Parties)

UCS Attorney Registration #

UCS Attorney Registration #

Firm Name

Firm Name

Address

Address

Phone #

Phone #

E-Mail

E-Mail

(Primary Service E-Mail Address)

(Primary Service E-Mail Address)