

**FAMILY COURT OF THE STATE OF NEW YORK  
COUNTY OF ROCKLAND**

In the Matter of an Article 8 Family Offense Proceeding

**File #:** 37675  
**Docket #:** O-03515-25**John Stampfl** (Petitioner)**Antonina G. Stampfl** (Respondent)**SUMMONS - GENERAL  
(IN PERSON)**

---

**To:** Antonina G. Stampfl  
19 Morris Drive  
New City, NY 10956

A petition under Article 8 of the Family Court Act has been filed with this Court.

**YOU ARE HEREBY SUMMONED** to appear **IN PERSON** before this Court on:

Date/Time/Part:	<b>December 18, 2025 at 09:30 AM in Part 1</b>
Purpose:	<b>Personal Service</b>
Presiding:	<b>Hon. Andrea F. Composto</b>
Location:	<b>1 South Main St., Suite 300 Floor 3, New City, NY 10956</b>
Floor:	<b>3</b>
Room:	<b>361</b>

to answer the attached petition and to be dealt with in accordance with the Family Court Act.

**Please be advised that Covid-19 safety protocols for in person appearances will be followed as long as they are in place. Please check the court webpage at [www.nycourts.gov](http://www.nycourts.gov) for more information.****If you fail to appear as directed, a warrant may be issued for your arrest.****Dated:** December 1, 2025

Sean Farrell, Clerk of Court

**NOTICE: FAMILY COURT ACT §154(C) PROVIDES THAT PETITIONS BROUGHT PURSUANT TO ARTICLES 4, 5, 6, 8 AND 10 OF THE FAMILY COURT ACT, IN WHICH AN ORDER OF PROTECTION IS SOUGHT OR IN WHICH A VIOLATION OF AN ORDER OF PROTECTION IS ALLEGED, MAY BE SERVED OUTSIDE THE STATE OF NEW YORK UPON A RESPONDENT WHO IS NOT A RESIDENT OR DOMICILIARY OF THE STATE OF NEW YORK. IF NO OTHER GROUNDS FOR OBTAINING PERSONAL JURISDICTION OVER THE RESPONDENT EXIST ASIDE FROM THE APPLICATION OF THIS PROVISION, THE EXERCISE OF PERSONAL JURISDICTION OVER THE RESPONDENT IS LIMITED TO THE ISSUE OF THE REQUEST FOR, OR ALLEGED VIOLATION OF, THE ORDER OF PROTECTION. WHERE THE RESPONDENT HAS BEEN SERVED WITH THIS SUMMONS AND PETITION AND DOES NOT APPEAR, THE FAMILY COURT MAY PROCEED TO A HEARING WITH RESPECT TO ISSUANCE OR ENFORCEMENT OF THE ORDER OF PROTECTION.**

ORI No: NY043023J  
Order No: 2025-001480  
NYSID No: \_\_\_\_\_

At a term of the Family Court of the State of New York,  
held in and for the County of Rockland, at 1 South Main St. Suite 300  
Floor 3, New City, NY 10956, on December 01, 2025

**PRESENT: Holly C. Young, Court Attorney Referee**  
**In the Matter of a FAMILY OFFENSE Proceeding**

**John Stampfl (DOB: 11/27/1979),**  
**Petitioner**

**File # 37675**  
**Docket # O-03515-25**  
**Temporary Order of Protection**

**O/B/O**  
**Alessia Stampfl (DOB: 04/02/2009),**  
**Justin Stampfl (DOB: 06/14/2013)**

**Ex Parte**

**- against -**

**Antonina G. Stampfl (DOB: 06/24/1978),**  
**Respondent**

**NOTICE: YOUR FAILURE TO OBEY THIS ORDER MAY SUBJECT YOU TO MANDATORY ARREST AND CRIMINAL PROSECUTION, WHICH MAY RESULT IN YOUR INCARCERATION FOR UP TO SEVEN YEARS FOR CRIMINAL CONTEMPT, AND/OR MAY SUBJECT YOU TO FAMILY COURT PROSECUTION AND INCARCERATION FOR UP TO SIX MONTHS FOR CONTEMPT OF COURT. IF YOU FAIL TO APPEAR IN COURT WHEN YOU ARE REQUIRED TO DO SO, THIS ORDER MAY BE EXTENDED IN YOUR ABSENCE AND THEN CONTINUES IN EFFECT UNTIL A NEW DATE SET BY THE COURT.**

**THIS ORDER OF PROTECTION WILL REMAIN IN EFFECT EVEN IF THE PROTECTED PARTY HAS, OR CONSENTS TO HAVE, CONTACT OR COMMUNICATION WITH THE PARTY AGAINST WHOM THE ORDER IS ISSUED. THIS ORDER OF PROTECTION CAN ONLY BE MODIFIED OR TERMINATED BY THE COURT. THE PROTECTED PARTY CANNOT BE HELD TO VIOLATE THIS ORDER NOR BE ARRESTED FOR VIOLATING THIS ORDER .**

A petition under Article 8 of the Family Court Act, having been filed on December 01, 2025 in this Court and good cause having been shown, and Antonina G. Stampfl having been not present in Court.

**NOW, THEREFORE, IT IS HEREBY ORDERED** that Antonina G. Stampfl (DOB:06/24/1978) observe the following conditions of behavior:

- [01] Stay away from:
  - [A] Alessia Stampfl (DOB: 04/02/2009), John Stampfl (DOB: 11/27/1979) and Justin Stampfl (DOB: 06/14/2013);
  - [B] the home of Alessia Stampfl (DOB: 04/02/2009), John Stampfl (DOB: 11/27/1979) and Justin Stampfl (DOB: 06/14/2013) at 7 Cyr Court, New City, NY 10956;
  - [C] the school of Alessia Stampfl (DOB: 04/02/2009) and Justin Stampfl (DOB: 06/14/2013) and any daycare providers;
  - [E] the place of employment of John Stampfl (DOB: 11/27/1979);
- [14] Refrain from communication or any other contact by mail, telephone, e-mail, voice-mail or other electronic or any other means with Alessia Stampfl (DOB: 04/02/2009), John Stampfl (DOB: 11/27/1979) and Justin Stampfl (DOB: 06/14/2013) also refrain from having a third party contact petitioner on respondents behalf.;
- [17] Refrain from remotely controlling, monitoring or otherwise interfering with any electronic device or other object affecting the home, vehicle or property of John Stampfl (DOB: 11/27/1979) by connection through any means, including, but not limited to, the internet, Bluetooth, a wired or wireless network, or other wireless technology.
- [02] Refrain from assault, stalking, harassment, aggravated harassment, menacing, reckless endangerment, strangulation, criminal obstruction of breathing or circulation, disorderly conduct, criminal mischief, sexual abuse, sexual misconduct, forcible touching, intimidation, threats, identity theft, grand larceny, coercion, unlawful dissemination or publication of intimate image (s) or any criminal offense against Alessia Stampfl (DOB: 04/02/2009), John Stampfl (DOB: 11/27/1979) and Justin Stampfl (DOB: 06/14/2013);



- [99] Observe such other conditions as are necessary to further the purposes of protection: SOCIAL MEDIUMS: Respondent shall refrain from harassing or disparaging Petitioner (or children) on any electronic social mediums. Respondent shall not post messages, discussions, photographs or any other information about the Petitioner (or children) and shall not obtain access to any of the Petitioner's (or children's) social mediums or email accounts. Respondent shall forthwith remove any posts pertaining to the Petitioner (or children).;
- [99] Observe such other conditions as are necessary to further the purposes of protection: The expiration date for this Temporary Order of Protection is subject to modification when the matter appears back in court. This order is subject to modification by subsequent orders of a court of competent jurisdiction.;
- [99] Observe such other conditions as are necessary to further the purposes of protection: The Respondent shall not communicate directly with the Petitioner's place of employment or use a third party to do so.;

It is further ordered that this temporary order of protection shall remain in force until and including June 01, 2026, but if you fail to appear in court on this date, the order may be extended and continue in effect until a new date set by the Court.

Dated: December 01, 2025

ENTER

NOTICE OF ENTRY  
PLEASE TAKE NOTICE that  
the within is a true copy of the  
order entered in the office of  
the Clerk of the Family Court of  
the State of New York in the  
County of ROCKLAND.  
DATE  
OF  
ENTRY 12/1/25  
*Anna L. Roser*  
Chief Clerk of the Court

  
*Holly C. Young*  
Holly C. Young, Court Attorney Referee

PURSUANT TO SECTION 1113 OF THE FAMILY COURT ACT, AN APPEAL FROM THIS ORDER MUST BE TAKEN WITHIN 30 DAYS OF RECEIPT OF THE ORDER BY APPELLANT IN COURT, 35 DAYS FROM THE DATE OF MAILING OF THE ORDER TO APPELLANT BY THE CLERK OF COURT, OR 30 DAYS AFTER SERVICE BY A PARTY OR THE ATTORNEY FOR THE CHILD UPON THE APPELLANT, WHICHEVER IS EARLIEST.

The Family Court Act provides that presentation of a copy of this order of protection to any police officer or peace officer acting pursuant to his or her special duties authorizes, and sometimes requires such officer to arrest a person who is alleged to have violated its terms and to bring him or her before the court to face penalties authorized by law.

Federal law requires that this order is effective outside, as well as inside, New York State. It must be honored and enforced by state and tribal courts, including courts of a state, the District of Columbia, a commonwealth, territory or possession of the United States, if the person restrained by the order is an intimate partner of the protected party and has or will be afforded reasonable notice and opportunity to be heard in accordance with state law sufficient to protect due process rights (18 U.S.C §§ 2265, 2266).

- It is a federal crime to:
- cross state lines to violate this order or to stalk, harass or commit domestic violence against an intimate partner or family member;
  - buy, possess or transfer a handgun, rifle, shotgun or other firearm or ammunition while this Order remains in effect (Note: there is a limited exception for military or law enforcement officers but only while they are on duty) ; and
  - buy, possess or transfer a handgun, rifle, shotgun or other firearm or ammunition after a conviction of a domestic violence-related crime involving the use or attempted use of physical force or a deadly weapon against an intimate partner or family member, even after this Order has expired (18 U.S.C. §§ 922(g)(8), 922(g)(9), 2261, 2261A, 2262).

Check Applicable Box(es):

- ☐ Party against whom order was issued was advised in Court of issuance and contents of Order
- ☐ Order personally served in Court upon party against whom order was issued
- ☒ Service directed by Police Service
- ☐ [Modifications or extensions only]: Order mailed on [specify date and to whom mailed]:
- ☐ Warrant issued for party against whom order was issued[specify date]: \_\_\_\_\_
- ☐ ADDITIONAL SERVICE INFORMATION [specify]: \_\_\_\_\_



# Family Offense Petition

UCS-FC 8-2 (04/2025)

Page 1 of 7

[nycourthelp.gov](http://nycourthelp.gov)

Family Court  
County of Rockland

Petitioner (name of the person filing the case):

John Stampfl DOB 11/27/79 and O/B/O Alessia Stampfl DOB 4/2/09 and Justin Sampfl DOB 6/14/13

Respondent (name of the person you are filing against):

Antonina Stampfl DOB 6/24/78

File #: 37675

0-3515-25

## 1. Petitioner address

Should your address be kept confidential? ☐ Yes ☒ No

**NOTE:** DO NOT list your address if it should be kept confidential. Ask the court clerk for a Request for Address Confidentiality (GF-21).

Physical address: 7 Cyr Ct New City, NY 10956

Mailing address: [Click or tap here to enter text.](#)

## 2. Respondent address

**NOTE:** DO NOT list a respondent's address if the court has ordered that it is confidential.

Physical address: 19 Morris Dr New City, NY 10956

Mailing address: [Click or tap here to enter text.](#)

## 3. Relationships

I am related to the respondent as follows: [check all that apply]

☐ we **are** married

☒ we **were** married

☒ we have a child in common

☐ we are parent and child

☐ we are related by blood or marriage (specify): [Click or tap here to enter text.](#)

### Select the relationship:

☐ we **are** in an intimate relationship (NOT casual, social, or business acquaintances)

### Specify the relationship:

[Click or tap here to enter text.](#)

☐ we **were** in an intimate relationship (NOT casual, social, or business acquaintances)

[Click or tap here to enter text.](#)

☐ I am related by blood or marriage to a person who **was** in an intimate relationship with the respondent (NOT a casual, social, or business relationship)

[Click or tap here to enter text.](#)

☐ we live together

☐ we lived together in the past

☐ we never lived together

☐ Petitioner is an agency, association, society, or institution and is filing under FCA 822(b).



ADA Accommodations  
[ada@nycourts.gov](mailto:ada@nycourts.gov)



Spoken or Sign Language Interpreters  
[interpreter@nycourts.gov](mailto:interpreter@nycourts.gov)



1-800-COURT-NY  
(268-7869)



☐ I am a peace officer and am filing under FCA 822(c).

4. Offenses Alleged

☒ The respondent may have committed one or more of the following family offense(s) against me and/or my child(ren):

Aggravated harassment in the second degree	Harassment in the first degree
Attempted assault in the second degree	Harassment in the second degree
Attempted assault in the third degree	Identity theft in the first degree
Assault in the second degree	Identity theft in the second degree
Assault in the third degree	Identity theft in the third degree
Coercion in the second degree (subdivisions 1, 2 or 3)	Menacing in the second degree
Criminal mischief	Menacing in the third degree
Criminal obstruction of breathing or circulation	Reckless endangerment
Disorderly conduct	Sexual abuse in the second degree (subdivision 1)
Forcible touching	Sexual abuse in the third degree
Grand larceny in the first degree	Sexual misconduct
Grand larceny in the second degree	Stalking
Grand larceny in the third degree	Strangulation
Grand larceny in the fourth degree	Unlawful dissemination or publication of intimate images

Give the details of the offense:

Date: Click or tap here to enter text. Time: Click or tap here to enter text. ☐ AM ☐ PM

Location: Rockland County, NY

Who was injured: Click or tap here to enter text.

Injuries suffered: Click or tap here to enter text.

Weapons used (if any): Click or tap here to enter text.

Briefly describe what happened: [use an extra sheet if you need more space]

The parties are divorced. They have two children in common.

The Respondent has been utilizing social media sites such as Tik Tok to harass the Petitioner. She used his name and spoke about their divorce/custody situation.

On 10/12/25, one of the Respondent's friends reached out to their daughter via social media to pass a message onto her. This violates a standing court order of no contact.

On 11/24/25, an investigative journalist reached out to the Petitioner's work HR department to slander him and referenced their last Family Court appearance in August. This person left no credentials and appears to be a fictitious account or a fake account.

The Petitioner is requesting the court's help.

Click or tap here to enter text.

5. Criminal Complaints

I have filed a criminal complaint concerning these incident(s): ☐ Yes ☐ No

If yes, provide the following information: [use an extra sheet if you need more space]

If no, skip to Question 6.

Court name: Click or tap here to enter text.

Docket number: Click or tap here to enter text.

Date filed: Click or tap here to enter text.

Charge(s): Click or tap here to enter text.

Status of case: ☐ Pending ☐ Finished

6. Household Members

[Check all that apply; use an extra page if you need more space]

☐ I have no children and there are no children living in my household

☒ The following children live with me [include children who are not yours]

Child Name	Date of Birth	Relationship to me	Relationship to respondent
Alessia Stampfl	4/2/09	daughter	daughter
Justin Stampfl	6/14/13	son	son
Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.

☐ The following children are mine but do not live with me

Child Name	Date of Birth	Relationship to respondent	Child lives with:
Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.

**7. Family Offenses Against Child(ren)**

Did the respondent commit a family offense listed in Question 4 against any child(ren) listed above?

☒ Yes ☐ No

If Yes, list child's name and the offense: [use an extra page if you need more space]  
if No, skip to Question 8]

Child Name	Alleged Offense
Alessia Stampfl	See above
Justin Stampfl	See above

**8. Safety of Petitioner, Child(ren), Members of Family**

Has respondent acted in a way you consider dangerous or threatening to you, your child(ren), or any member of your family? ☒ Yes ☐ No

If yes, explain:Click or tap here to enter text.

Has the respondent violated an Order of Protection issued on behalf of you or members of your family or household? ☐ Yes ☒ No

If yes, explain:Click or tap here to enter text.

Does respondent own or have access to firearms? ☐ Yes ☒ No

If yes, explain:Click or tap here to enter text.

Does respondent have a firearms license? ☐ Yes ☒ No

If yes, provide:Click or tap here to enter text.

License or permit number:

Issuing county:

Guns/pistols listed:

Does respondent have a pending application for a firearms license?

☐ Yes ☒ No

Does respondent carry a firearm on their job? ☐ Yes ☒ No

If yes, explainClick or tap here to enter text.

Respondent threatened the following with a firearm or dangerous instrument or object

[check all that apply]:

☐ Me

☐ My child(ren)

☐ A member(s) of my household (list names):Click or tap here to enter text.

Describe the incident:



Click or tap here to enter text.

Is there is a substantial risk that respondent would use or threaten to use a firearm or dangerous instrument or object against you, your child(ren) or member of your household?

☐ Yes

☐ No

If yes, explain:Click or tap here to enter text.

The following court cases are pending between the respondent and me:  
[use an extra page if you need more space]

Docket/Index number	Court name	Court location	Case type
Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	

Respondent has the following criminal convictions: [use an extra page if you need more space]

Docket Number	Court name and location	Conviction Charge	Conviction Date	Sentence
Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.

I am seeking protection for pets ☐ Yes ☐ No

If yes, specify the names and types of pets in the household [use an extra page if you need more space]:

Pet Name	Type of Pet	Threatened or Attempted to Injure or Injured Pet	If yes, explain:
Click or tap here to enter text.	Click or tap here to enter text.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Click or tap here to enter text.
		<input type="checkbox"/> Yes <input type="checkbox"/> No	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	



9. Previous Application for Relief

Have you made any previous application to any court or judge for the relief (an order or finding of aggravated circumstances) requested in this petition?    ☐ Yes    ☐ No

If yes, specify: [use an extra page if you need more space]; if No, skip to Question 10

Date	Court name and location	Relief granted
Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.

10. Petitioner's Request for Relief

I respectfully request this court to:

- ☒ determine the respondent committed one or more of the family offense(s) alleged
- ☒ enter an order of protection, specifying conditions of behavior to be observed by the respondent under FCA 842:

☒ Stay away from petitioner

☒ Stay away from petitioner's home

☒ Stay away from petitioner's workplace

☒ Do not menace, harass, assault, or commit any family offenses against petitioner or petitioner's children

☒ No communication and no contact through social media

☒ No third-party contact


☐ Surrender firearms

☒ enter a finding of aggravated circumstances
- ☐ enter a temporary order of child support under FCA 828(4)
- ☐ enter an order directing the parties to appear within seven business days of the filing of this petition for consideration of an order of temporary spousal support under FCA 828(5)
- and order other and further relief as the court decides is just and proper.

11. Petitioner's Name and Signature

John Stampfl

Print or Type Petitioner's Name



Petitioner's Signature

12 / 1 / 2025

Date

12. Lawyer Information

- I assisted the petitioner with their paperwork:    ☐ Yes    ☐ No
- I will represent the petitioner in court:                      ☐ Yes    ☐ No

Print Lawyer Name

Lawyer Signature

/ /

Date

Lawyer Address

( ) -

Lawyer Phone

Lawyer Email



**THIS IS AN IMPORTANT NOTICE!**  
**READ IT CAREFULLY AND FOLLOW INSTRUCTIONS OR**  
**IT MAY JEOPARDIZE YOUR CASE OR CAUSE IT TO BE DELAYED**

You are required to appear:

☒ in person at the **Rockland County Family Court** located at: 1 South Main Street, Suite 300 New City, NY (please follow all Covid-19 safety protocols for in person appearances.) It is suggested that you arrive at least 15 minutes prior to your scheduled time for an in person appearance. The court will attempt to hear your case as close to its assigned time as is practical. Late arrival may result in a long waiting period.

☐ virtually by MS Teams for a **Family Court** matter as noted in your summons, order to show cause or notice to appear. Please download MS Teams and provide your email address to the court (or notify the court if you do not have internet access) at least two days before the virtual Teams appearance by calling 845-483-8210.

Please refer to your enclosed Summons, Order to Show Cause or Notice to Appear for more information regarding your next court appearance date. Failure of a party to appear on the scheduled date and time without prior notification to the court may result in the case being decided against them.

This notice is to further advise you that you have the right to retain and have an attorney present with you. If you wish to have an attorney represent you, you should provide them with your court date and time, including the virtual appearance information, and have them appear with you on your court date.

If this is a child neglect/abuse, foster care review, or family offense proceeding, or if you are the parent of a child involved in a custody or visitation proceeding, and you are unable to afford an attorney, the court can assign one to represent you. Also, in proceedings alleging a violation of a court order or a referral to the court to confirm findings of the Support Magistrate and impose a sentence of imprisonment, the respondent is entitled to be represented by an attorney and if unable to afford one, the court may assign one to represent him/her.

If you wish to have counsel assigned to represent you, you **must** notify the court by returning the enclosed “**Request For Assigned Counsel**” form to the court **at least seven days** prior to the date the matter is scheduled.

If you do not come with an attorney nor request a court assigned attorney **at least (7) days** prior to the return date, the matter may proceed further without granting an adjournment to obtain an attorney.

---

**ESTE ES UN AVISO MUY IMPORTANTE**

Si usted no sabe leer en Inglés asegúrese de que alguien se lo traduzca inmediatamente.

(Rev. Jan 2021)

REQUEST FOR ASSIGNED COUNSEL - PLEASE FILL OUT CLEARLY AND COMPLETELY (SOLICITUD DE ABOGADO GRATUITO - POR FAVOR, COMPLETE TOTAL Y CLARAMENTE EN INGLÉS)						
Your Information (Datos acerca de Ud.)	Name: (Nombre:)			Docket #: (Nro. de Acta:)		
	Address: (Dirección)			FU #: (Nro. de Familia)		
	Tel. #: home (hogar):			Court Date: (Fecha de la cita:)		
	work (trabajo):			Judge: (Juez/a:)		
Are you employed? (¿Tiene Ud. empleo?)			<input type="checkbox"/> Yes (Sí)		<input type="checkbox"/> No (No)	
If so, what is the name and address of your employer? (Si respondió que sí, de el nombre y dirección de su empleo)			Name: (Nombre)			
			Address: (Dirección)			
What is your job or nature of work? (¿Cuál es su trabajo o qué tipo de trabajo hace?)						
How long have you worked there? (¿Cuánto tiempo hace que trabaja allí?)						
How much do you earn (before deductions)? (¿Cuánto gana (antes de descuentos)?)						
Do you receive income from any other sources? Check all boxes that apply (¿Recibe ingresos de alguna otra fuente? Marque todas las que se apliquen)		Child Support (Manutención infantil)		<input type="checkbox"/> Yes (Sí)	<input type="checkbox"/> No (No)	Amount: (Monto)
		Spousal Maintenance (Manutención Marital)		<input type="checkbox"/> Yes (Sí)	<input type="checkbox"/> No (No)	Amount: (Monto)
		Interest income (Ingresos de intereses)		<input type="checkbox"/> Yes (Sí)	<input type="checkbox"/> No (No)	Amount: (Monto)
		Any other income - specify: (Cualquier otros ingresos - especifique)		<input type="checkbox"/> Yes (Sí)	<input type="checkbox"/> No (No)	Amount: (Monto)
Please attach a copy of your last 3 pay stubs and a copy of your last tax return (Por favor, incluya copias de sus 3 comprobantes de sueldo y de su declaración de impuestos más recientes)						
Are you self employed? (¿Trabaja Ud. por cuenta propia?)			<input type="checkbox"/> Yes (Sí)		<input type="checkbox"/> No (No)	
If so, what is the name of your business? (Si respondió que sí, indique el nombre de su empresa)						
If so, provide income before and after business deductions (Si respondió que sí, indique cuanto gana antes y después de gastos empresariales)			Before: (Antes)		After: (Después)	
If self employed, what do you do? (Si trabaja por cuenta propia ¿a qué se dedica?)			<input type="checkbox"/> painter (pintor)		<input type="checkbox"/> contractor (contralista)	
			<input type="checkbox"/> landscape (jardinería)		<input type="checkbox"/> other - specify: (otro - especifique):	
Are you receiving: (¿Recibe Ud.):			<input type="checkbox"/> SSI - \$:		<input type="checkbox"/> Public assistance - \$: (Asistencia pública - \$):	
			<input type="checkbox"/> SSDI - \$:		<input type="checkbox"/> other - specify: (otro - especifique):	
If you receive any of the above benefits, please attach proof (Si recibe alguno de los beneficios mencionados, por favor incluya pruebas)						



Do you own or have any major assets valued at over \$1,000? (¿Posee Ud. bienes con valor de más de \$1,000?)		<input type="checkbox"/> Yes (Sí)	<input type="checkbox"/> No (No)
If so, please indicate type and value: (Si respondió que sí, indique tipo y valor):	<input type="checkbox"/> Cash - \$: (Efectivo - \$):	<input type="checkbox"/> Savings account - \$: (Cuenta de ahorro - \$):	
	<input type="checkbox"/> Home - \$: (Casa - \$):	<input type="checkbox"/> Stocks - \$: (Acciones - \$):	
	<input type="checkbox"/> Bonds - \$: (Bonos - \$):	<input type="checkbox"/> Mutual funds - \$: (Fondos mutuales - \$):	
	<input type="checkbox"/> Other - specify: (Otro - especifique):		
Do you own real property? (¿Posee Ud. propiedades inmuebles?)		<input type="checkbox"/> Yes (Sí)	<input type="checkbox"/> No (No)
If so, indicate type and value: (Si respondió que sí, indique tipo y valor):	<input type="checkbox"/> Home - \$: (Casa - \$):	<input type="checkbox"/> Condo \$ (Condominio - \$):	
	<input type="checkbox"/> Other - specify: (Otro - especifique):	<input type="checkbox"/> Mobile Home - \$: (Casa rodante - \$):	<input type="checkbox"/> Land - \$: (Terrenos - \$):
What is the balance due on your mortgage? (¿Cuánto debe Ud. aún de su hipoteca?)			
		\$	
Do you pay court-ordered child support? (¿Paga Ud. manutención infantil por orden de la corte?)		<input type="checkbox"/> Yes (Sí)	<input type="checkbox"/> No (No)
If so, indicate the name of person you pay to: (Si respondió que sí, indique el nombre de la persona a quién le paga):			
Indicate amount you pay - \$: (Indique el monto que Ud. paga - \$):		<input type="checkbox"/> monthly (por mes) <input type="checkbox"/> weekly (por semana)	
How many of your children live with you and are under 21 years old? (¿Cuántos de sus hijos/as viven con Ud. y tienen menos de 21 años de edad?)			
Do you have any major medical expenses? (¿Tiene altos gastos por cuestiones de salud?)		<input type="checkbox"/> Yes (Sí)	<input type="checkbox"/> No (No)
If so, indicate the amount you pay - \$: (Si respondió que sí, indique el monto que Ud. paga - \$):		<input type="checkbox"/> monthly (por mes) <input type="checkbox"/> weekly (por semana)	
Knowingly making false statements in this document is punishable as a Class A Misdemeanor pursuant to Penal Law Section 210.45, which may result in criminal prosecution and imposition of a penalty of up to one year in jail. (El hacer intencionalmente declaraciones falsas en este documento constituye un Delito Menor de Clase A, de acuerdo a la sección 210.45 del Código Penal, lo cual puede resultar en una pena de hasta un año de cárcel.)			
Your Signature (Su Firma)	I swear or affirm that the foregoing is an accurate statement of my net worth (assets of whatsoever kind and nature, and liabilities), and statement of income from all sources. (Juro o afirmo que lo que precede es una declaración veraz de mi posición económica (bienes de cualquier naturaleza y pasivos), e ingresos de toda fuente.)		
	Your signature: (Su firma):		

OFFICE USE ONLY	<input type="checkbox"/> APPROVED	<input type="checkbox"/> DENIED	<input type="checkbox"/> No documentation provided/insufficient information
		for reason stated:	<input type="checkbox"/> Excess income
			<input type="checkbox"/> Not eligible under FCA 262
			<input type="checkbox"/> Other