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NYSCEF DOC. NO. 4

Affidavit of Additional Mailing

Index No.: 2023-1665

SUPREME COURT OF THE STATE OF NEW YORK

COUNTY OF SCHENECTADY

ELLIS HOSPITAL
Plaintiff
-againstPamela Raucci
Defendant(s)
STATE OF NEW YORK
:
STATE OF NEW YORK
:
COUNTY OF SARATOGA
:

DONNA HALLORAN, being duly sworn, deposes and says:

1. I am of the age of eighteen years or older and not a party of this action.

1 2 / 0 4 / 2 3 2. On , I served a copy of the summons and complaint upon Pamela Raucci by mailing a copy of the same by first class mail to said defendant at

> 195 SUNNYSIDE RD Schenectady, NY 12302

said defendant's place of residence, in a plain envelope marked personal and confidential and not indicating on the outside of the envelope that the communication is from an attorney or concerns an alleged debt.

DØNNA HALLORAN

Sworn to before me

on

04/23

LAURA PERKINS NOTARY PUBLIC, State of New York No. 01PE6389250 Qualified in Saratoga County Commission Expires April 1, 2027

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