NYSCEF DOC NO 174469- 2020-0975

RECEIVED NYSCEF: 08/25/2020 Index No.: 451625/2020

## SUPREME COURT OF THE STATE OF NEW YORK | COUNTY OF NEW YORK

| PERSON and discretion. Said premises is recipient's [ ] actual place of business [ ] dwelling house [ ] usual place of abode within the state.  MAILING USE WITH 2 WITH 2 WITH 2 Deponent also enclosed a copy of same in a postpaid sealed envelope properly addressed to recipient at recipient's las known [ ] residence [ ] business, at the address of service above, and deposited said envelope in a post office officie depository under exclusive care and custody of the United States Postal Service within the state of service above.  DESCRIPTION USE WITH 1, or 2 [ ] Female [ ] Black Skin [ ] Block Hair [ ] White Hair [ ] 14-20 Yrs [ ] Under 5' [ ] Under 100 Lb [ ] Yellow Skin [ ] Blond Hair [ ] 38-80 Yrs [ ] 5'0'-5'3' [ ] 100-130 Lbs [ ] Brown Skin [ ] Red Hair [ ] Over 65 Yrs [ ] Over 6' [ ] Over 6' [ ] Over 6' [ ] Over 200 Lbs Other identifying features: \( \text{LCAS} \) \( \text{LCAS}  |                      |   |                                  |  |
|--|----------------------|---|----------------------------------|--|
| AFFIDAVIT OF SERVICE  STATE OF ICUITY OF CALL  AFFIDAVIT OF SERVICE  being duly sworn, deposes and says that deponent is not a party to this agino, is over 18 years of age and resides in the State of  |                      |   | Plaintiff                        |  |
| AFFIDAVIT OF SERVICE  STATE OF COUNTY OF SERVICE  being duly sworn, deposes and says that deponent is not a party to this agtion, is over 18 years of age and resides in the State of  | THE NATION           | IAL RIFLE ASSOCIATION OF AMERICA, INC, ET AL.   |                                  |  |
| being duly sworn, deposes and says that deponent is not a party to this agilon, is over 18 years of age and resides in the State of  |                      |   | Defendant                        |  |
| being duly sworn, deposes and says that deponent is not a party to this agilon, is over 18 years of age and resides in the State of  |                      | AEEIDAVIT OE SERVICE  |                                  |  |
| to this action, is over 18 years of age and resides in the State of  | STATE OF COUNTY OF C |   |                                  |  |
| to this action, is over 18 years of age and resides in the State of Virginia Deponent further states that on \$18 2020 at \$605 FONTAINE STREET, ALEXANDRIA, VA 22302 deponent served the within SUMMONS COMPLAINT, RJI, COMMERCIAL DIVISION ADDENDUM AND NOTICE ELECTRONIC FILING on JOHN FRAZER, recipient therein named.  INDIVIDUAL by delivering a true copy of each to said recipient personally; deponent knew the person so served to be the person described said recipient therein.  SUITABLE AGE PERSON  SUITABLE AGE PERSON  AMILING USE  WITH 2  MALING USE  WITH 2  Deponent also enclosed a copy of same in a postpaid sealed envelope properly addressed to recipient at recipient's lat known [ ] residence [ ] business, at the address of service above, and deposited said envelope in a post office officide depository under exclusive care and custody of the United States Postal Service within the state of service above.  DESCRIPTION  USE WITH 1. or 2  [ ] Penson Skin   | 1 0000               | Akaekoone   | that downward in each a wards.   |  |
| DESCRIPTION USE WITH 1. OPPOPENT IN DEPONDENT AND EAST I STATE I Balding   19-50   19- | to this action, is   |   |                                  |  |
| INDIVIDUAL  by delivering a true copy of each to said recipient personally, deponent knew the person so served to be the person described said recipient therein.  by delivering a true copy of each to said recipient personally, deponent knew the person so served to be the person described said recipient therein.  by delivering thereat a true copy of each to and discretion. Said premises is recipient's [] actual place of business [] dwelling house [] usual place of abode within the state.  Deponent also enclosed a copy of same in a postpaid sealed envelope properly addressed to recipient's latenown [] residence [] business, at the address of service above, and deposited said envelope in a post office officide depository under exclusive care and custody of the United States Postal Service within the state of service above.  DESCRIPTION  USE WITH 1. or 2. [] Female [] Black Skin [] Black Thair [] White Hair [] 14-20 Yrs [] Under 50 [] Under 100 LI [] Female [] Black Skin [] Black Thair [] White Hair [] 14-20 Yrs [] Under 50 [] Under 100 LI [] Female [] Black Skin [] Black Thair [] She Syrs [] 50°-53° [] 100-30 Libe [] Female [] Black Skin [] Grey Hair [] 55-65 Yrs [] 50°-50° [] 131-160 Libs [] Female [] Brown Skin [] Grey Hair [] 55-65 Yrs [] 50°-50° [] 131-160 Libs [] Female [] Black Skin [] Red Hair [] She Syrs [] 50°-50° [] 100-30 Libs [] Female [] Black Skin [] Red Hair [] She Syrs [] 50°-50° [] 100-30 Libs [] Female [] Brown Skin []  | on 8 181             | 2020 at 120 at 605 FONTAINE STREET, ALEXAND   | DRIA, VA 22302                   |  |
| said recipient therein.  SUITABLE AGE PERSON 2.  |                      |   | DENDUM AND NOTICE                |  |
| said recipient therein.  SUITABLE AGE PERSON 2.  |                      |   |                                  |  |
| PERSON and discretion. Said premises is recipient's [ ] actual place of business [ ] dwelling house [ ] usual place of abode within the state.  MAILING USE WITH 2 WITH 2 WITH 2 Deponent also enclosed a copy of same in a postpaid sealed envelope properly addressed to recipient at recipient's la known [ ] residence { ] business, at the address of service above, and deposited said envelope in a post office offici depository under exclusive care and custody of the United States Postal Service within the state of service above.  DESCRIPTION USE WITH 1, or 2 [ ] Female   Black Skin   Black Heir   ] White Hair   ] 14-20 Yrs   ] Under 100 List   [ ] Female   ] Black Skin   [ ] Blond Hair   ] 36-60 Yrs   ] 50°-5°   ] 100-130 List   [ ] Brown Skin   ] Grey Heir   [ ] 36-60 Yrs   ] 50°-6°   ] 161-200 List   [ ] Brown Skin   ] Red Skin   ] Red Hair   [ ] Over 65 Yrs   ] Over 6°   ] Over 60 List   ] Other identifying features: A County of the United States and was told with United States Government or on active duty in any branch of the armed forces of the United States and was told with the presence of the United States and was told with the presence of the United States and was told with the presence of the United States and was told with the presence of the United States and was told with the presence of the United States and was told with the presence of the United States and was told with the presence of the United States and was told with the presence of the United States and was told with the presence of the United States and was told with the presence of the United States and was told with the presence of the United States and was told with the presence of the United States and was told with the presence of the United States and was told with the presence of the United States and was told with the presence of the United States and was told with the presence of the United States and was told with the presence of the United States and was told with the presence of the United States and was told with the presence of th | _/                   |   | erved to be the person described |  |
| known [] residence { ] business, at the address of service above, and deposited said envelope in a post office offici depository under exclusive care and custody of the United States Postal Service within the state of service above.  DESCRIPTION  Depopent describes the individual served as follows:  USE WITH 1, or 2.  [] Female [] Black Skin [] Black Hair [] White Hair [] 14-20 Yrs [] Under 5' [] Under 100 Life [] Female [] Black Skin [] Brown Hair [] Balding [] 21-35 Yrs [] 50°-5'3' [] 100–130 Lbs [] Female [] Brown Skin [] Brown Hair [] Balding [] 21-35 Yrs [] 50°-5'3' [] 100–130 Lbs [] Brown Skin [] Brown Skin [] Grey Hair [] 51-65 Yrs [] 50°-6'0' [] 131–160 Lbs [] Brown Skin [] Brown Skin [] Brown Skin [] Grey Hair [] Over 65 Yrs [] Over 6' [] Over 200 Lbs [] The Skin [] Red Skin [] Red Hair [] Over 65 Yrs [] Over 6' [] Over 200 Lbs [] The Hair [] Over 65 Yrs [] Over 6' [] Over 200 Lbs [] The Hair [] Skin [] Brown Spoken to [] other [] Skin [] Brown Spoken to [] other [] Skin [] Brown Spoken to [] Other Grey Hair [] Skin [] Brown Spoken to [] Other Grey Hair [] Skin [] Brown Spoken to [] Other Grey Hair [] Skin [] Brown Spoken to [] Other [] Skin [] Skin [] Brown Spoken to [] Other [] Skin [] Sk |                      | and discretion. Said premises is recipient's [ ] actual place of business [ ] dwelling house [ ] usual place of abode within t  |                                  |  |
| USE WITH  1. or 2.  [] Female  [] Black Skin  [] Brown Hair  [] Balding  [] 21-35 Yrs  [] 50'-5'3'  [] 100-130 Lbs  [] Yellow Skin  [] Brown Skin  [] Brown Skin  [] Brown Skin  [] Red Hair  [] Over 65 Yrs  [] Over 6'  [] Over 200 Lbs  MILITARY  USE WITH LL  Deponent asked the [] person spoken to [] other  | MAILING USE WITH 2   | known ( 1 residence ( 1 business, at the address of service above, and deposited said envelope in a post office office  |                                  |  |
| MILITARY USE WITH ALL Service of the United States Government or on active duty in any branch of the armed forces of the United States and was told INO []YES Branch Location Other Other SIGNATURE  Sworn to before me, this 2 4 day of Argust 20 20 SIGNATURE Location Creeks me.  | 1. or 2.             | White Skin   Black Hair   White Hair   14-20 Yrs   Female   Black Skin   Brown Hair   Balding   121-35 Yrs   1 Yellow Skin   Blond Hair   136-60 Yrs   1 Brown Skin   1 Grey Hair   51-65 Yrs | [ ]5'0'-5'3'                     |  |
| Sworn to before me, this 2 Hong of Argust 20 20  Samuel Creeking  Service of the United States Government or on active duty in any branch of the armed forces of the United States and was told the States and was told the States Branch  Location  Other  Location  Other  Signature  Signature  Location  Other  Signature  Signature  Location  Other  Location  Other  Signature  Location  Other  Locat |                      | Other identifying features: Waring Glasses  |                                  |  |
| Sworm to before me, this 2 4th day of August 20 20  Standard hupe  | USE WITHALL          | Deponent asked the person spoken to [ ] other   |                                  |  |
| Sworn to before me, this 24th day of Argust 2020  Harrah Cheffre  Laws Creekmee  |                      | P INC 1 I LG Granton  | Other                            |  |
| Harratchethue Tang Creekonse   |                      | SEE ALSO & SEPCITATE A HIDOWIT OF MOULING   |                                  |  |
| Tarrat harrie Language   | Swarn to before      | me, this 24th day of Argust 2020  | CHARLES COMPANY                  |  |
| NOTARY PUBLIC PRINT FULL NAME  |                      | NOTARY PUBLIC PRIM  | YT FULL NAME                     |  |

HANNAH CREEKMORE
NOTARY PUBLIC
REGISTRATION #7728541
COMMONWEALTH OF VIRGINIA
MY COMMISSION EXPIRES
SEPTEMBER 30, 2021

Served through Associated Legal

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Account No 174438- 2020-0975 Index No. 451625/2020 SUPREME COURT OF THE STATE OF NEW YORK | COUNTY OF NEW YORK PEOPLE OF THE STATE OF NEW YORK, BY LETITIA JAMES, ATTORNEY GENERAL OF THE STATE OF NEW YORK Plaintiff THE NATIONAL RIFLE ASSOCIATION OF AMERICA, INC, ET AL. Defendant AFFIDAVIT OF SERVICE BY MAIL STATE OF NY COUNTY OF ONONDAGA KAREN PIERSON being duly sworn, deposes and says that deponent is not a party to this action, is over 18 years of age and resides in the State of \_\_\_\_\_\_ New York \_\_\_\_ . Deponent further states that 20 deponent served the within SUMMONS, COMPLAINT, RJI, COMMERCIAL DIVISION ADDENDUM AND NOTICE OF ELECTRONIC FILING on JOHN FRAZER, recipient therein named, MAILING by mailing a true cope of the same, by regular mail, enclosed and properly sealed in a postpaid

X

envelope, marked "Personal and Confidential", and deposited in an official depository under the exclusive care and custody of the United States Postal Service within the state, addressed to <u>JOHN FRAZER</u> at <u>605 FONTAINE STREET, ALEXANDRIA, VA 22302</u>

Sworn to before me, this

NOTARY PUBLIC

BRANIMIRA P ANDREEVA
NOTARY PUBLIC STATE OF NEW YORK

PUBLIC-STATE OF NEW YORK

No. 01AN6203103

Qualified in Onondaga County

My Commission Expires March 30, 20 8

SIGNATURE
KAREN PIERSON

PRINT FULL NAME