



# ADMINISTRATIVE FEE DEDUCTION ACKNOWLEDGMENT

**Karen A. Cassidy, Assistant Commissioner**  
Treasury Division, 66 John Street, 12 floor, New York, NY 10038  
Tel. 212-908-7619. Fax 646-500-7072

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Index number.: \_\_\_\_\_

Account number: \_\_\_\_\_

I, \_\_\_\_\_, am a claimant or a claimant's attorney in the above-  
PRINT NAME

referenced case. I understand that pursuant to section 8010 of the CPLR, Finance is entitled to retain two per cent (2%) of the amount awarded to me or my client (including accrued interest, if any). By signing below and submitting this document to the Department of Finance, Treasury/Court Assets Unit, I acknowledge and consent to a deduction of two percent (2%) from the amount stated in the court order.

Print Claimant's Name: \_\_\_\_\_

Signature of Claimant: \_\_\_\_\_

OR

Print Claimant's Attorney's Name: \_\_\_\_\_  
(If applicable)

Signature of Attorney: \_\_\_\_\_  
(If applicable)

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
Notary Public

STAMP OR SEAL