

At the time I received it, and news of an attempt to seize my possessions, I was dumbfounded and didn't understand how they pulled off this \$65,000 judgment in favor of the New York State Department of Social Services. I was never aware of this nor was I in New York State and never once was I ever in a courtroom to get this judgment. That judgment is about what my house in Pennsylvania was worth at the time and it wasn't hard to figure out why they did this to me.

It was later discovered that the judgment was a complete forgery, with the "signatures" literal rubber stamps. Those responsible even tried to get it removed from court records in a cover-up but by law were unable to do so.

This is how a family court examiner in Suffolk County, New York worked with local police detectives who were looking for me to find out where I lived and to fabricate an illegal judgment against me to confiscate my grandfather's house. They abused the Family Court to cook up a weapon of mass destruction that haunts me still to this day. These are the documents and how the court examiner and others tried to cover it up over a six year period 1998 to 2004.

April 12, 2000

I, Joseph Waiksnis, couldn't live in South Carolina anymore, so I was staying with my four-year-old son at my parents, Veronica and Edward Snyder, at their home, 40 East Half Hollow Road, Dix Hills, New York 11746. My wife Dawn stayed in South Carolina because she was still active Navy.

Sometime at the beginning of 2000 I must have received a summons, and for the very first time I went to Family Court in Central Islip, New York. From what I can remember I must have met Susan Henderson at the probation intake while filling out a financial disclosure that was signed and notarized on April 12, 2000.

FAMILY COURT OF THE STATE OF NEW YORK  
COUNTY OF SUFFOLK

Docket No. F-2456-98

Date: 3/12/2000

FINANCIAL DISCLOSURE AFFIDAVIT

INSTRUCTIONS AND DIRECTIONS TO PARTIES IN SUPPORT PROCEEDINGS:

In order to expedite and simplify the hearing in this case, you should come to the Court hearing prepared to give testimony as to your financial condition. You are advised to prepare two (2) copies of this expense and earning statement and bring both copies with you on the date you appear in court. One (1) copy is for the Court and one (1) copy is for your records. In order to verify your income, bring your payroll slips for the past several months and a copy of your withholding statement for the preceding fiscal year or a letter from your employer showing the amount you are earning (including overtime, if any). If you have any income other than from salary, bring all documents to substantiate the amount. If your allegation is to the effect that your spouse has sustained a change of circumstance, any documentary evidence of the old circumstance, as well as the present one, should be brought to Court.

BY ORDER OF THE FAMILY COURT, SUFFOLK COUNTY

INCOME

ASSETS

Employer NONE

Savings Account Balance WIFES \$130.00

Employer's Address "

Name of Bank (s) NAVY FEDERAL UNION

Social Security # [REDACTED]

Checking Account Balance \$460.00

No. of Dependents claimed "

Name of Bank (s) "

Weekly Gross Salary NONE

Automobile (year and make) NONE

Weekly Deductions "

Automobile (year and make) NONE

Social Security "

Residence owned (address) NONE

N. Y. State tax "

Federal Tax "

Other Payroll Deductions "

Other real estate owned NONE

Total Payroll Deductions "

Weekly Net Salary NONE

Other Property  
i. e., Stocks, bonds, trailer, boat, etc.

Overtime  
Average No. Hrs. per week "

NONE

Income from other sources  
i. e. (part-time job, tips, rents, pensions, dividends,  
unemployment insurance, disability, etc.) NONE

Total gross income last year \_\_\_\_\_

LIST ALL ASSETS TRANSFERRED IN ANY MANNER DURING PRECEDING THREE YEARS OR LENGTH OF MARRIAGE, WHICHEVER IS SHORTER:

Description of Property	To Whom Transferred	Date of Transfer	Value
<u>NONE</u>			
<u>"</u>			
<u>"</u>			

(over)



ROBERT M. O'MARA  
CHIEF CLERK

RESPOND TO:  400 CARLETON AVENUE  
P.O. Box 9076  
CENTRAL ISLIP, N.Y. 11722-9076  
 ATTN: HEARING EXAMINER DEPT.  
400 CARLETON AVENUE  
P.O. Box 9077  
CENTRAL ISLIP, N.Y. 11722-9077

ALAN BETTIS  
DEPUTY CHIEF CLERK

You are required to complete this form and submit it to the court during your appearance.

Information Sheet

- 1. Date: 3/12/2000
- 2. Docket Number: F-2456-98
- 3. Your Name: Joseph Walksniis
- 4. Your Telephone Number: none  
415 OSER AVE 853-2000  
Hauppauge
- 5. Your Social Security Number: [REDACTED]
- 6. Your Driver License Number: [REDACTED]  
F 2456-98
- 7. Your Employer's Name: none  
3RD FLOOR
- 8. Your Employer's Address: none  
PROBATION INTAKE
- 9. Your Employer's Telephone Number: none

The section below is to be completed by t

SUSAN HENDERSON  
853-7904

EXPENSES (you may elect to list all expenses on a weekly basis or all expenses on a monthly basis, however, you must be consistent. If any items are paid on a monthly basis, divide by 4.3 to obtain weekly payment; if any items are paid on a weekly basis, multiply by 4.3 to obtain monthly payment.)

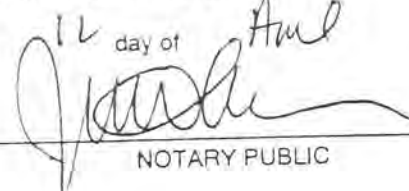
	AMOUNT
Rent or Mortgage Payment: House _____ Apt. _____ Room <u>\$ 50.00</u>	<u>50.00</u>
Real Estate Taxes (if not included in mortgage)	<u>80.00</u>
Food: Self <u>50.00</u> Children <u>30.00</u> (include lunches, etc.)	
Utilities:	
Gas <u>included</u>	
Electric <u>included</u>	
Telephone <u>PHONE CARD</u>	
Heating Fuel <u>included</u>	
Water and Garbage Removal <u>included</u>	
Clothing: Self <u>100.00 A YEAR</u> Children <u>100.00 A YEAR</u>	
Laundry and Dry Cleaning: Self <u>5.00</u> Children <u>5.00</u>	<u>10.00</u>
Medical, Dental and Medication: Self <u>WIFE'S INSURANCE</u> Children <u>"</u>	
Insurance: Life <u>NONE</u> Auto <u>NONE</u> Fire <u>NONE</u>	
Other Insurance (Health and Accident, Hospitalization) (if not deducted from pay) <u>NONE</u>	
Transportation: Carfare <u>NONE</u> Auto Maintenance <u>NONE</u> Gas & Oil <u>NONE</u>	
Auto Payment: Total Balance due on Loan <u>NONE</u>	
Union Dues (if not deducted from pay) <u>NONE</u>	
Tuition (specify) <u>NONE</u>	
Other (For example: baby-sitters, recreation, etc.) <u>\$10.00 FOR MY SON KEVIN</u>	<u>10.00</u>
(Specify) _____	
TOTAL (weekly) (monthly) EXPENSES	<u>\$ 150.00</u>

LIABILITIES, LOANS & DEBITS

Owed to Whom <u>NONE</u>	
Total Balance Due	
Owed to Whom <u>NONE</u>	
Total Balance Due	
Owed to Whom <u>NONE</u>	
Total Balance Due	
Owed to Whom <u>NONE</u>	
Total Balance Due	
TOTAL (weekly) (monthly) LOANS	
TOTAL (weekly) (monthly) PAYMENTS	

Joseph WALKSNIS the (petitioner) (respondent) herein, being duly sworn, deposes and says that the foregoing is an accurate statement of my income, assets, expenses and loans from all sources and statement of assets transferred of whatsoever kind and nature and wherever situated.

I reside at 40 E HALF Hollow Rd Huntington NY 11746

Sworn to before me this  
12 day of April 2000  
  
 NOTARY PUBLIC

JOSEPH DELLISANI (PETITIONER)  
 NOTARY PUBLIC, STATE OF NEW YORK  
 NO. 4895882  
 QUALIFIED IN SUFFOLK COUNTY 2001  
 COMMISSION EXPIRES MAY 26, \_\_\_\_\_

  
 (RESPONDENT)

April 13, 2000

An envelope, postmarked April 6, 2000, was received by me at my parents' home in Dix Hills, NY. This was from Patrick A. Mahoney, Sheriff of Suffolk County, in Central Islip.

Note: Why was a March 9th summons forwarded nearly a month later to the Suffolk County Sheriff for a forthcoming April 13, 2000 appearance? The Sheriff's Department and Court were next to each other at same location. Was this to intimidate?

Inside the envelope was an appearance notice summons with Docket No. F-2456-98, Account No. BD94803C1, dated March 9, 2000, mandating that "you are hereby summoned to appear before the court at 400 Carleton Avenue, Central Islip, NY on April 13, 2000 before PHILIP GOGLAS, ESQ, PART 13 at 10:00 AM of that day to answer the petitioner of Social Services."

This summons from Patrick Mahoney was the first mail to be sent to me c/o my parents after returning to New York from South Carolina.

Again, it was requested that I submit proof of income and assets, which was done, just like the many times prior.

On page 2 of this summons was typed, by Order Dated: November 02, 1998 "as of February 28, 2000, the respondent is in (arrears) of \$83,583.33. ... The above arrears include \$68,250.00 secured by money judgments ... [and] includes interest."

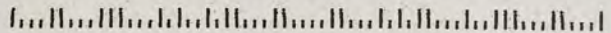
**PATRICK A. MAHONEY**  
**SHERIFF OF SUFFOLK COUNTY**  
**FAMILY COURT BUREAU**  
**400 CARLETON AVENUE - P.O. BOX 9082**  
**CENTRAL ISLIP, N.Y. 11722-9082**



EXPRESS 1ST CLASS MAIL FROM 11733 04-06-00

|||||  
JOSEPH WAIKSNIS  
40 E. HALF HOLLOW  
DIX HILLS, NY 11746

M4 AUM3 11746



In the Matter of a Proceeding Under Article 4  
of the Family Court Act

JOSEPH WAIKSNIS

Respondent

SUMMONS (PERSONAL SERVICE)

Description: DOB: [REDACTED]  
SEX: male  
HEIGHT: 5'7" WT: 160  
RACE: white  
COLOR OF HAIR: blonde  
COLOR OF EYES: blue  
SOC. SEC. NO.: [REDACTED]

NOTICE: FAILURE TO APPEAR IN COURT MAY RESULT IN IMMEDIATE ARREST. AFTER APPEARANCE A FINDING THAT YOU WILLFULLY FAILED TO OBEY THE ORDER MAY RESULT IN JAIL FOR A TERM NOT TO EXCEED SIX (6) MONTHS FOR CONTEMPT OF COURT. YOU HAVE THE RIGHT TO COUNSEL AND TO ASSIGNED COUNSEL, IF INDIGENT.

IN THE NAME OF THE PEOPLE OF THE STATE OF NEW YORK TO THE ABOVE-NAMED RESPONDENT:

40 E HALF HOLLOW, DIX HILLS, NY, 11746 ADDRESS

A petition under Article 4 of the Family Court Act having been filed with this Court, and annexed hereto:

YOU AND EACH OF YOU ARE HEREBY SUMMONED to appear before the Court at 400 Carleton Avenue, Central Islip, New York 11722-9076, on April 13, 2000, before PHILIP GOGLAS, ESQ. PART 13, AT 10:00 AM of that day to answer the petition and to be dealt with in accordance with ARTICLE 4 of the FAMILY COURT ACT.

ON YOUR FAILURE TO APPEAR AS HEREIN DIRECTED, A WARRANT MAY BE ISSUED FOR YOUR ARREST.

NOTICE

YOUR FAILURE TO APPEAR WILL RESULT IN THE ENTRY OF AN ORDER OF DEFAULT UNLESS SERVICE HAS BEEN MADE BY MAIL ALONE, IN WHICH EVENT NO DEFAULT MAY BE ENTERED WITHOUT PROOF SATISFACTORY TO THE COURT THAT YOU HAVE RECEIVED ACTUAL NOTICE OF THE COMMENCEMENT OF THIS PROCEEDING.

YOU MUST PROVIDE THE COURT WITH PROOF OF YOUR INCOME AND ASSETS BY April 13, 2000 ON THE ATTACHED FORM PROVIDED FOR THAT PURPOSE.

A TEMPORARY OR PERMANENT ORDER OF SUPPORT WILL BE MADE ON THE RETURN DATE OF THE SUMMONS WHETHER OR NOT YOU APPEAR.

Dated: March 9, 2000

*3.9.00*

ROBERT M. O'MARA  
CHIEF CLERK

*Lou Pelosi*

BY: LOUIS PELOSI  
ASSOCIATE COURT CLERK



IJDW

FAMILY COURT OF THE STATE OF NEW YORK  
COUNTY OF SUFFOLK

.....  
IN THE MATTER OF A PROCEEDING UNDER  
ARTICLE (4)(5B) OF THE FAMILY COURT ACT

COMMISSIONER OF SOCIAL SERVICES/DESIGNEE  
JAMES FARRELL, CSS IV

SUFFOLK COUNTY DSS/CSEB

OBO  
ANNE SCHNARWYLER  
SSN: [REDACTED]

PETITIONER

DOCKET NO.  
F0245698

PA CASE NO.

AGAINST

JOSEPH WAIKSNIS  
SSN: 077-60-5929

RESPONDENT

IV-D CASE NO.  
BD94803C1

.....  
TO THE FAMILY COURT:

THE UNDERSIGNED PETITIONER OF SOCIAL SERVICES/DESIGNEE  
RESPECTFULLY SHOWS THAT:

1. PETITIONER IS COMMISSIONER/DESIGNEE OF SOCIAL SERVICES  
WHOSE OFFICIAL ADDRESS IS

SCU - P O BOX 18030  
HAUPPAUGE NY 117888830

OBO ANNE SCHNARWYLER WHO RESIDES AT  
CONFIDENTIAL

RESPONDENT IS JOSEPH WAIKSNIS WHO RESIDES AT

40 E HALF HOLLOW  
DIX HILLS NY 11746

AND WHOSE MAILING ADDRESS IS (THE SAME AS ABOVE.)

RESPONDENT HAS AN EMPLOYER WHOSE NAME AND ADDRESS ARE

(2. PETITIONER HAS MADE APPLICATION FOR CHILD SUPPORT SERVICES  
WITH THE LOCAL DEPARTMENT OF SOCIAL SERVICES.)

3. BY ORDER OF THIS COURT, DATED NOVEMBER 02, 1998, THE  
RESPONDENT WAS FOUND TO BE CHARGEABLE WITH THE SUPPORT OF THE  
DEPENDENTS NAMED THEREIN AND WAS DIRECTED TO PAY THROUGH THE  
SUPPORT COLLECTION UNIT:

OBLIGATION AMOUNT	EFFECTIVE DATE	BENEFICIARY
\$150.00 WEEKLY	04/02/99	CURRENT SUPPORT-CLIENT
WEEKLY	11/02/98	ARREARS TO CLIENT
WEEKLY	03/29/99	ARREARS TO CLIENT

4. (UPON INFORMATION AND BELIEF) RESPONDENT HAS WILLFULLY FAILED TO OBEY THE ORDER OF THIS COURT IN THAT:

AS OF FEBRUARY 28, 2000 THE RESPONDENT IS IN ARREARS IN THE SUM OF:  
\$83583.33 DUE ANNE SCHNARWYLER CLIENT

\$83583.33 TOTAL ARREARS  
THE ABOVE ARREARS INCLUDE \$68250.00 SECURED BY MONEY JUDGEMENTS.  
ABOVE AMOUNT INCLUDES INTEREST.

UPON INFORMATION AND BELIEF THERE MAY BE ADDITIONAL ARREARS WHICH HAVE ACCRUED FROM THE DATE OF COMMENCEMENT OF THIS PROCEEDING UP TO THE DATE OF HEARING OR DISPOSITION AND PETITIONER THEREFORE REQUESTS THAT SUCH ADDITIONAL ARREARS SHOULD BE DETERMINED AND ADDED TO THE AMOUNT OF THE ABOVE ARREARS.

5. NO PREVIOUS APPLICATION HAS BEEN MADE TO ANY COURT OR JUDGE FOR THE RELIEF HEREIN REQUESTED (EXCEPT

WHEREFORE, COMMISSIONER/DESIGNEE PRAYS THE COURT TO FIND THAT THE RESPONDENT HAS WILLFULLY FAILED TO OBEY THE ORDER OF SUPPORT AND THAT AN ORDER BE ENTERED DIRECTING ENTRY OF A MONEY JUDGMENT FOR ARREARS IF ANY, AND SUCH OTHER OR FURTHER RELIEF AS THE COURT MAY DEEM JUST AND PROPER PURSUANT TO SECTIONS 454, 460, AND 458-B (IF APPLICABLE) OF THE FAMILY COURT ACT.  
ORDER RESPONDENT TO PAY COUNSEL FEES PURSUANT TO FCA SEC. 438.  
ORDER INCARCERATION.

## NOTE TO PETITIONER AND RESPONDENT:

- (A) A COURT ORDER OF SUPPORT RESULTING FROM A PROCEEDING COMMENCED BY THIS APPLICATION (PETITION) SHALL BE ADJUSTED BY THE APPLICATION OF A COST OF LIVING ADJUSTMENT AT THE DIRECTION OF THE SUPPORT COLLECTION UNIT NO EARLIER THAN TWENTY-FOUR MONTHS AFTER SUCH ORDER IS ISSUED, LAST MODIFIED, OR LAST ADJUSTED, UPON THE REQUEST OF ANY PARTY TO THE ORDER OR PURSUANT TO PARAGRAPH (2) BELOW. SUCH COST OF LIVING ADJUSTMENT SHALL BE ON NOTICE TO BOTH PARTIES WHO, IF THEY OBJECT TO THE COST OF LIVING ADJUSTMENT, SHALL HAVE THE RIGHT TO BE HEARD BY THE COURT AND TO PRESENT EVIDENCE WHICH THE COURT WILL CONSIDER IN ADJUSTING THE CHILD SUPPORT ORDER IN ACCORDANCE WITH SECTION FOUR HUNDRED THIRTEEN OF THE FAMILY COURT ACT, KNOWN AS THE CHILD SUPPORT STANDARDS ACT.
- (B) A PARTY SEEKING SUPPORT FOR ANY CHILD(REN) RECEIVING FAMILY ASSISTANCE SHALL HAVE A CHILD SUPPORT ORDER(S) REVIEWED AND ADJUSTED AT THE DIRECTION OF THE SUPPORT COLLECTION UNIT NO EARLIER THAN TWENTY-FOUR MONTHS AFTER SUCH ORDER IS ISSUED, LAST MODIFIED, OR LAST ADJUSTED BY THE SUPPORT COLLECTION UNIT, WITHOUT FURTHER APPLICATION BY ANY PARTY. ALL PARTIES WILL RECEIVE A COPY OF THE ADJUSTED ORDER.
- (C) WHERE ANY PARTY FAILS TO PROVIDE, AND UPDATE UPON ANY CHANGE, THE SUPPORT COLLECTION UNIT WITH A CURRENT ADDRESS, AS REQUIRED BY SECTION FOUR HUNDRED FORTY THREE OF THE FAMILY COURT ACT, TO WHICH AN ADJUSTED ORDER CAN BE SENT, THE SUPPORT OBLIGATION AMOUNT CONTAINED THEREIN SHALL BECOME DUE AND OWING ON THE DATE THE FIRST PAYMENT IS DUE UNDER THE TERMS OF THE ORDER OF SUPPORT WHICH WAS REVIEWED AND ADJUSTED OCCURRING ON OR AFTER THE EFFECTIVE DATE OF THE DATE OF THE ADJUSTED ORDER, REGARDLESS OF WHETHER OR NOT THE PARTY HAS RECEIVED A COPY OF THE ADJUSTED ORDER.



JAMES FARRELL, CSS IV  
SUFFOLK COUNTY DSS/CSEB  
COMMISSIONER/DESIGNEE

DATED: FEBRUARY 28, 2000

VERIFICATION IN PROCEEDING  
BY GOVERNMENTAL AGENCY

STATE OF NEW YORK )  
 )  
:SS.: )  
COUNTY OF SUFFOLK )

*James Farrell*

JAMES FARRELL, CSS IV SUFFOLK COUNTY DSS/CSEB BEING  
DULY SWORN, DEPOSES AND SAYS:

THAT (S)HE IS (COMMISSIONER) (DESIGNEE) AND IS ACQUAINTED  
WITH THE FACTS AND CIRCUMSTANCES OF THE ABOVE-ENTITLED PROCEEDING;  
THAT (S)HE HAS READ THE FOREGOING PETITION AND KNOWS THE CONTENTS  
THEREOF; THAT THE SAME IS TRUE TO HIS/HER OWN KNOWLEDGE EXCEPT AS  
TO THOSE MATTERS THEREIN STATED TO BE ALLEGED UPON INFORMATION AND  
BELIEF, AND THAT AS TO THOSE MATTERS (S)HE BELIEVES IT TO BE TRUE.

*James Farrell*

JAMES FARRELL, CSS IV  
SUFFOLK COUNTY DSS/CSEB  
COMMISSIONER/DESIGNEE

SWORN TO BEFORE ME ON  
FEBRUARY 28, 2000.

*Christa Higgin*

(DEPUTY) CLERK OF THE COURT

CC: ANNE SCHNARWYLER

COUNTY OF SUFFOLK

RESPOND TO:  400 CARLETON AVENUE  
P.O. Box 9076  
CENTRAL ISLIP, N.Y. 11722-9076  
 ATTN: HEARING EXAMINER DEPT.  
400 CARLETON AVENUE  
P.O. Box 9077  
CENTRAL ISLIP, N.Y. 11722-9077

ALAN BETTIS  
DEPUTY CHIEF CLERK

You are required to complete this form and submit it to the court during your appearance.

Information Sheet

- 1. Date:
- 2. Docket Number:
- 3. Your Name:
- 4. Your Telephone Number:
- 5. Your Social Security Number:
- 6. Your Driver License Number:
- 7. Your Employer's Name:
- 8. Your Employer's Address:
- 9. Your Employer's Telephone Number:

The section below is to be completed by the parent who has custody of the children.

Child's Name	Date of Birth	Social Security Number
_____	_____	_____
_____	_____	_____
_____	_____	_____

FAMILY COURT OF THE STATE OF NEW YORK  
COUNTY OF SUFFOLK

Docket No.

Date:

FINANCIAL DISCLOSURE AFFIDAVIT

INSTRUCTIONS AND DIRECTIONS TO PARTIES IN SUPPORT PROCEEDINGS:

In order to expedite and simplify the hearing in this case, you should come to the Court hearing prepared to give testimony as to your financial condition. You are advised to prepare two (2) copies of this expense and earning statement and bring both copies with you on the date you appear in court. One (1) copy is for the Court and one (1) copy is for your records. In order to verify your income, bring your payroll slips for the past several months and a copy of your withholding statement for the preceding fiscal year or a letter from your employer showing the amount you are earning (including overtime, if any). If you have any income other than from salary, bring all documents to substantiate the amount. If your allegation is to the effect that your spouse has sustained a change of circumstance, any documentary evidence of the old circumstance, as well as the present one, should be brought to Court.

BY ORDER OF THE FAMILY COURT, SUFFOLK COUNTY

INCOME

Employer \_\_\_\_\_  
Employer's Address \_\_\_\_\_  
Social Security # \_\_\_\_\_  
No. of Dependents claimed \_\_\_\_\_  
Weekly Gross Salary \_\_\_\_\_  
Weekly Deductions \_\_\_\_\_  
Social Security \_\_\_\_\_  
N. Y. State tax \_\_\_\_\_  
Federal Tax \_\_\_\_\_  
Other Payroll Deductions \_\_\_\_\_  
Total Payroll Deductions \_\_\_\_\_  
Weekly Net Salary \_\_\_\_\_  
Overtime  
Average No. Hrs. per week \_\_\_\_\_  
Income from other sources  
i. e. (part-time job, tips, rents, pensions, dividends,  
unemployment insurance, disability, etc.) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Total gross income last year \_\_\_\_\_

ASSETS

Savings Account Balance \_\_\_\_\_  
Name of Bank (s) \_\_\_\_\_  
Checking Account Balance \_\_\_\_\_  
Name of Bank (s) \_\_\_\_\_  
Automobile (year and make) \_\_\_\_\_  
Automobile (year and make) \_\_\_\_\_  
Residence owned (address) \_\_\_\_\_  
\_\_\_\_\_  
Other real estate owned \_\_\_\_\_  
\_\_\_\_\_  
Other Property  
i. e., Stocks, bonds, trailer, boat, etc.  
\_\_\_\_\_  
\_\_\_\_\_

LIST ALL ASSETS TRANSFERRED IN ANY MANNER DURING PRECEDING THREE YEARS OR LENGTH OF MARRIAGE, WHICHEVER IS SHORTER:

Description of Property	To Whom Transferred	Date of Transfer	Value
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

(over)

EXPENSES (you may elect to list all expenses on a weekly basis or all expenses on a monthly basis, however, you must be consistent. If any items are paid on a monthly basis, divide by 4.3 to obtain weekly payment; if any items are paid on a weekly basis, multiply by 4.3 to obtain monthly payment.)

	AMOUNT
Rent or Mortgage Payment: House _____ Apt. _____ Room _____	
Real Estate Taxes (if not included in mortgage)	
Food: Self _____ Children _____ (include lunches, etc.)	
Utilities:	
Gas .....	
Electric .....	
Telephone .....	
Heating Fuel .....	
Water and Garbage Removal .....	
Clothing: Self _____ Children _____	
Laundry and Dry Cleaning: Self _____ Children _____	
Medical, Dental and Medication: Self _____ Children _____	
Insurance: Life _____ Auto _____ Fire _____	
Other Insurance (Health and Accident, Hospitalization) (if not deducted from pay) _____	
Transportation: Carfare _____ Auto Maintenance _____ Gas & Oil _____	
Auto Payment: Total Balance due on Loan _____	
Union Dues (if not deducted from pay) _____	
Tuition (specify) _____	
Other (For example: baby-sitters, recreation, etc.) _____ (Specify) _____	
TOTAL (weekly) (monthly) EXPENSES	

LIABILITIES, LOANS & DEBITS

Owed to Whom _____	
Total Balance Due	
Owed to Whom _____	
Total Balance Due	
Owed to Whom _____	
Total Balance Due	
Owed to Whom _____	
Total Balance Due	
TOTAL (weekly) (monthly) LOANS	
TOTAL (weekly) (monthly) PAYMENTS	

\_\_\_\_\_ the (petitioner) (respondent) herein, being duly sworn, deposes and says that the foregoing is an accurate statement of my income, assets, expenses and loans from all sources and statement of assets transferred of whatsoever kind and nature and wherever situated.

I reside at \_\_\_\_\_

Sworn to before me this

day of

19

\_\_\_\_\_  
NOTARY PUBLIC

\_\_\_\_\_  
(PETITIONER)

\_\_\_\_\_  
(RESPONDENT)

#12

F-2456-98

FAMILY COURT : SUFFOLK COUNTY  
400 CARLETON AVENUE  
CENTRAL ISLIP, NEW YORK 11722

Part 13

Your case has been adjourned to

5 - 23 - 00

Date

<sup>10:00 Am</sup>  
at ~~9:00 A.M.~~

You are hereby directed to appear on said adjourned date without further notice

RECEIPT ACKNOWLEDGED

*Pet. + Resp*

*Schnarwyler*

By order of the Court,  
Robert M. O'Mara  
Chief Clerk

DATE *4-13-00* *Waiksnis*

By: *3756*

THE COURT WILL PROCEED BY INQUEST  
AND ENTER A DEFAULT JUDGEMENT  
SHOULD YOU FAIL TO APPEAR

FC 1A

M-1663A

Revised 2/96



April 21, 2000

A letter from Internal Revenue Service states that a payment of \$1,987.00 must be sent to the Suffolk County SCU.



DEPARTMENT OF THE TREASURY  
FINANCIAL MANAGEMENT SERVICE  
P.O. BOX 1686  
BIRMINGHAM, ALABAMA 35201-1686

**THIS IS NOT A BILL - PLEASE RETAIN FOR YOUR RECORDS**

04/21/00

WAIKSNIS, JOSEPH C & DAWN M  
40 E HALF HOLLOW RD  
DIX HILLS NY 11746-6326

Dear WAIKSNIS, JOSEPH C & DAWN M:

As authorized by Federal law, we applied all or part of your Federal payment to a debt you owe. The government agency (or agencies) collecting your debt is listed below.

SUFFOLK COUNTY  
CHILD SUPPORT ENFORCEMENT UNIT  
SUPPORT COLLECTION UNIT  
POST OFFICE BOX 18030  
HAUPPAUGE, NY 11788-8830  
(516) 853-2000 (516) 853-2109  
PURPOSE: Child Support

TIN Num: [REDACTED]  
Debt Trace Num: A04958526  
Acct Num: [REDACTED]  
Amount This Creditor: \$1987.00  
Creditor: 02 Site: NY

The Agency has previously sent notice to you at the last address known to the Agency. That notice explained the amount and type of debt you owe, the rights available to you, and that the Agency intended to collect the debt by intercepting any Federal payments made to you, including tax refunds. If you believe your payment was reduced in error or if you have questions about this debt, you must contact the Agency at the address and telephone number shown above. The U. S. Department of the Treasury's Financial Management Service cannot resolve issues regarding debts with other agencies.

We will forward the money taken from your Federal payment to the Agency to be applied to your debt balance; however, the Agency may not receive the funds for several weeks after the payment date. If you intend to contact the Agency, please have this notice available.

Charles A. Wilson  
Department of the Treasury, Financial Management Service  
(800) 304-3107

**PAYMENT SUMMARY**

PAYEE NAME: WAIKSNIS, JOSEPH C & DAWN M  
PAYMENT BEFORE REDUCTION: \$1987.00  
TOTAL AMOUNT OF THIS REDUCTION: \$1987.00  
PAYING FEDERAL AGENCY: Internal Revenue Service  
(See Insert on Tax Refund Offsets for Additional Information)

PAYMENT TYPE: EFT  
PAYMENT DATE: 04/21/00



FAMILY COURT : SUFFOLK COUNTY  
400 CARLETON AVENUE  
CENTRAL ISLIP, NEW YORK 11722

Your case has been adjourned to Rt. 13

Aug 12/100 at ~~9:00 A. M.~~  
Date 11:00

You are hereby directed to appear on said adjourned date without further notice

RECEIPT ACKNOWLEDGED

RESP.

DATE 8/17/00

By order of the Court,  
Robert M. O'Mara  
Chief Clerk  
By: 6296

THE COURT WILL PROCEED BY INQUEST  
AND ENTER A DEFAULT JUDGEMENT  
SHOULD YOU FAIL TO APPEAR

FC 1A

M-1663A

Revised 2/96

WALKSNI'S

FAMILY COURT : SUFFOLK COUNTY  
400 CARLETON AVENUE  
CENTRAL ISLIP, NEW YORK 11722

F. 2456-98

Your case has been adjourned to

9 - 26 - 00

Pt. 13

2:30 PM  
at 9:00 A. M.

Date

You are hereby directed to appear on said adjourned date without further notice

RECEIPT ACKNOWLEDGED

P & R

By order of the Court,  
Robert M. O'Mara  
Chief Clerk

DATE

8/24/00

By: 

THE COURT WILL PROCEED BY INQUEST  
AND ENTER A DEFAULT JUDGEMENT  
SHOULD YOU FAIL TO APPEAR

FC 1A

M-1663A

Revised 2/96

September 11, 2000

Since I was unemployed, I had to request Legal Aid and went to the Suffolk County Court in Central Islip, NY. My legal aid attorney was now Joseph Orzechowski.

Joseph Orzechowski asked for copies of all the court documentation I had received. After reviewing the documentation, he noted that from the beginning there were pages missing from the petitioner. I happened to have the original documents that were mailed to me for reference. Mr. Orzechowski read over what was mailed to me, and he then explained that pages were missing from the petitioner. "What pages?" I asked. The petitioner's signature was one thing he pointed out. He thought this whole case was strange as I explained to him that all this had started back in 1998 when I was living in South Carolina. Reading over the documents and thinking out loud, he said, "I'll get to the bottom of this and get copies of the missing pages for you."

Mr. Orzechowski kept his word and retrieved the missing copies from court. It was sometime later when I was straightening out the documents that my mother and I noticed that the petitioner's signature, dated July 07, 1998, didn't look right. I had saved years' worth of documents, and when comparing original signatures to the one on the missing document, we noticed the first name didn't match. Ann had remarried, so the last name was different, but her first name had never changed. I could compare a letter I'd received from her in 2004 with her first name signed just like she had back in the 1980s.

Note: While I had a legal aid attorney, the petitioner, Anne Schnarwyler, hired a Garden City attorney, Roberta Leventhal, Esq.

ROBERTA R. LEVENTHAL, ESQ.  
1103 STEWART AVENUE  
GARDEN CITY, NEW YORK 11530  
Telephone (516) 222-0500  
Facsimile (516) 222-2462

TELECOPY COVER PAGE

DATE: September 11, 2000 FAX NO. (631) 853-7798

TO: Joseph P. Orzechowski, Esq.

FROM: Roberta Leventhal, Esq. RE: Schnarwyler v. Waiksnis

Joseph

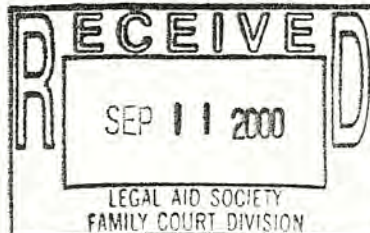
COMMENTS:

return in 1 week to  
Legal Aid

There will be a total of 10 page(s) to follow.  
Transmitted from: (516) 484-5600

Please call (516) 484-5600 for confirmation, trouble in transmission, or if you do NOT receive all pages.

The information contained in the accompanying transmission is confidential. It is intended only for the use of the individual or entity identified above. If the reader of this message is not the intended recipient, you are hereby notified that any dissemination or distribution of the accompanying communication is prohibited. No applicable privilege is waived by the party sending the accompanying documents. If you have received this communication in error, please notify us immediately by telephone and return the original message to us at the above address via the U.S. Postal Service and you will be reimbursed for phone and postage charges. Thank you.



*Roberta R. Leventhal, Esq.*

ATTORNEY AT LAW  
1103 STEWART AVENUE  
GARDEN CITY, NEW YORK 11530

(516) 222-0500  
FAX (516) 222-2462

September 11, 2000

**BY FAX AND FIRST CLASS MAIL**

Joseph P. Orzechowski, Esq.  
Legal Aid Society of Suffolk County  
John P. Cohalan Court Complex  
400 Carleton Avenue  
P.O. Box 9082  
Central Islip, New York 11722

Re: Schnarwyler v. Waiksnis  
Docket No. F-2456/98

Dear Mr. Orzechowski:

Enclosed please find Interrogatories and Demand for Financial Disclosure Affidavit for service upon the Legal Aid Society.

As we discussed, in lieu of conducting an Examination Before Trial of your client, I have enclosed the aforesaid written demands based on your assurance that same would be completed and returned to my office prior to our date for hearing.

Should you have any questions regarding the foregoing, please do not hesitate to contact me. Your professional courtesies are appreciated.

Very truly yours,



ROBERTA LEVENTHAL

RL/rw

cc: A. Schnarwyler

FAMILY COURT OF THE STATE OF NEW YORK  
COUNTY OF SUFFOLK

-----X

ANNE SCHNARWYLER

Plaintiff,

Docket No. F-2456/98

-against-

DEMAND FOR FINANCIAL  
DISCLOSURE AFFIDAVIT

JOSEPH WAIKSNIS

Defendant.

-----X

S I R :

PLEASE TAKE NOTICE that demand is hereby made upon you that, in conformance with Section 250 of the Domestic Relations Law, within twenty (20) days from the date of service hereof, you file with the undersigned a statement of the net worth of the Respondent herein, which shall include income, assets, of whatsoever kind and wheresoever situate, expenses and liabilities.

Dated: Garden City, New York  
September 8, 2000

Yours, etc.,

ROBERTA R. LEVENTHAL, ESQ.  
Attorney for Petitioner  
1103 Stewart Avenue  
Garden City, New York 11530  
(516) 222-0500

TO: JOSEPH P. ORZECOWSKI, ESQ.  
Attorney for Respondent  
Legal Aid Society of Suffolk County  
John P. Cohalan Court Complex  
400 Carleton Avenue  
P.O. Box 9082  
Central Islip, New York 11722



FAX TO LEVENTHAL  
14 PAGES

FAMILY COURT OF THE STATE OF NEW YORK  
COUNTY OF SUFFOLK

-----X  
ANNE SCHNARWYLER

Petitioner,

Docket No. F-2456/98

-against-

INTERROGATORIES

JOSEPH WAIKSNIS

Respondent.

-----X  
Pursuant to C.P.L.R. Article 31 and D.R.L. (236 (b) (4),  
Petitioner requests that the Respondent answer the following  
interrogatories within twenty (20) days of the date of service  
thereof.

1. State your full name, date of birth, social security  
number, home street address, business address, and home and  
business telephone numbers. JOSEPH WAIKSNIS BORN [REDACTED]  
SS# [REDACTED] PRESENTLY STAYING 40E, HALF Hollow Rd.  
DIX HILLS NY 11746

2. State the names, birth dates and present addresses of all  
children born or adopted during the marriage between yourself and  
your current spouse. KELVIN WAIKSNIS BORN [REDACTED]  
ALSO STAYING 40E, HALF Hollow Rd.  
DIX HILLS NY 11746

3. Indicate whether any child receives extra-ordinary medical  
or psychiatric care and describe in detail the nature of said care.  
IN S.C. SON KELVIN, DIAGNOSED AFTER MUCH EVALUATION  
WITH [REDACTED] RECEIVING NAVY PROVIDED SPEECH/AUTISM  
THERAPY

4. State whether you have any need of extra-ordinary medical  
or psychiatric care or other special financial needs and describe  
same in detail. DIAGNOSED WITH DEPRESSION GUTHERIE MEDICAL CLINIC;  
DIAGNOSED WITH DEPRESSION STONYBROOK UNIV. MEDICAL HOSPITALS  
DIAGNOSE WITH DEPRESSION VA HOSPITAL; DIAGNOSED WITH DEPRESSION  
RIVERHEAD CORRECTIONAL FACILITY WHERE I WAS IN SUICIDAL WARD,

5. Indicate the state of your present health as well as the  
names of your physician(s). DEPRESSED. HAVE BEEN UNDER  
MEDICATIONS PROZAC, MOCCLAZINE AND UNDER OLANZAPINE  
AND RANITIDINE. MEDICAL RECORDS ON FILE EACH FACILITY.

6. If you have any disability which impairs your ability to

NIL

work or to earn a living, state precisely the nature of said disability, the names and addresses of all physicians who have ever treated said disability and the frequency and cost and nature of said treatment.

7. Describe your educational background, stating the names of all schools attended, years of attendance, and degrees conferred. I \*

not, state the names, ages and relationship to you of all of those persons with whom you reside.

I RESIDE PRESENTLY WITH MY SON KELVIN, IN A SMALL 3 BEDROOM RANCH HOME WITH MY STEPFATHER + MOTHER EDWARD AND VERONICA SNYDER.

10. If your current residence is rented or leased, set forth in detail the monthly rental cost of the premises, to whom said rental is paid and at what address, and whether any person other than yourself contributes to the payment of said rental and the amount of their contribution, if any. Attach copies of all canceled rent checks for the last year as well as a copy of your current rental or lease agreement.

NIL

11. State the names, addresses and telephone numbers of all your employers since having been divorced from the petitioner, providing the dates of employment, position held, reason for termination and salary.

(S.C.) DL CONSTRUCTION Co. which had government contract to do work on NAVAL WEAPONS STATION. I WORKED AROUND CLOCK ON TEMPORARY BASES AS HELPER UNTIL CONTRACT WAS COMPLETED. THEN MANY OF US WERE LET GO (IN 1995)

12. With regard to your present employment, set forth the name and address of your employer, the type of business and your position, and length of employment.

NIL

13. Set forth your current rate of pay or earnings

NIL

specifically including your gross and net weekly salary, wages, commissions, overtime pay, bonuses and gratuities, if any.

NIL

14. Attach hereto copies of all federal, state and local income tax returns for the last seven (7) years as well as all schedules and worksheets thereof and all other papers, documents or memoranda referring to any adjustment or audit in connection therewith.

15. Indicate whether you have received in the past seven (7) years or are receiving any form of compensation, monetary or otherwise, from any work and/or services performed for persons or business entities other than those individuals or business entities heretofore disclosed.

NIL

16. Attach hereto copies of all IRS 1099 forms filed during the last seven (7) years.

17. Set forth the names of the banks and account numbers of all bank accounts (savings, checking, certificates of deposit, or otherwise) which are in your name individually, jointly, in trust, as custodian for a minor, or otherwise, or upon which you are an authorized signatory. Attach copies of all passbooks, records and memoranda, checkbook registers, checkbook, check stubs, and deposit slips for all such accounts, current as well as canceled.

NAVY FEDERAL SAVINGS ACCT [REDACTED]

18. Set forth the names and addresses of your stock brokers. 22704

NIL

19. Indicate whether you have a safe deposit box in your name individually or jointly, or to which you have access and indicate (a) location of the box and number; (b) the name in which the box is registered and the names and addresses of all persons having access thereto, and (c) list the contents of said box.

NIL

20. State whether you have in your possession or under your control cash in excess of \$250.00 and if so, set forth the amount of the cash, its location, and the source of that cash.

NIL

21. Indicate whether you have any interest of any kind in any vehicles including but not limited to automobile, trucks, campers, vans, motorcycles, mobile homes, snowmobiles, boats, airplanes, bicycles and if so, state: (a) type of vehicle; (b) nature of your interest therein; (c) the name in which the vehicle is in; (d) date of purchase and purchase price. Attach copies of bills of sale; (e) the name of the principal operator of the vehicle, the present location of each vehicle, the nature of any interest in said vehicle other than your own (e.g. security interest) and the name of the person or institution so interested. Attach copies of all documents relating to financing for this vehicle; (f) indicate the present value of all such vehicles. *My wife DAWN owns one vehicle (JEEP) which is stored at 46 E HALF Hollow Rd. Dix Hills; It is NOT IN BETHESDA, MD. but here for our use for school, clinic, hospital, airport, etc.*

22. Indicate whether you have any interest in a horse or other animal valued in excess of \$250.00. If so, indicate (a) type of animal; (b) date of purchase and purchase price of same; (c) the present location of the animal; (d) its market value at the time of purchase and at present; and (e) the names and addresses of any co-owners and the nature and size of their interest in the animal.

*NIL*

23. List all items of personal property (furniture, jewelry, furs, household goods, etc.) with a value in excess of \$250.00 indicating the nature of each, its present location, purchase price and date of purchase and present value. *WE HAVE SECOND FURNITURE REFINISHED; NO FURS; NO JEWELRY VALUED OVER \$250*

24. Indicate whether you own or have any interest in art, stamps, coins, precious metals, antiques, books and other collections with a value in excess of \$250.00. State the nature of each, its present location, purchase price and date of purchase and present value. *WE HAVE ONLY JUNK STORE BOUGHT JUST COLLECTORS WAY UNDER \$250*

25. State whether you own or have an interest in any minerals, gems, or commodities, and if so, state (a) the date and purchase price of same; (b) the nature of your interest, whether in a tangible item or intangible interest such as a future; (c) location of the item if your interest is a tangible one; and (d) the present value of the asset (market value if applicable).

*NIL*

26. State whether you are receiving or are entitled to receive any royalty income. If so, state the nature of such income including the nature and title, if applicable, of the creative work or patent. Attach a copy of any agreement relating to same.

*NIL*

27. Indicate whether you have any legal actions pending for money damages and whether you are entitled to receive any settlements or insurance recovery. Indicate (a) the amount of money demanded in your pleadings or to which you may be entitled as insurance recovery or legal settlement; (b) the court in which the action is or was pending, the name of the action and its index number; (c) whether any person besides you has any interest in any amount recovered and if so, their name and the nature of their interest; and (d) describe in brief the circumstances underlying your legal claim for your right to an insurance recovery or legal settlement.

NIL

28. State whether you have any Keogh or IRA plan. If so, indicate the date each such plan was created, the amounts contributed by you to each such plan, and the current value of your account in each such plan.

NIL

29. State whether you are entitled to receive any gambling awards or prizes. If so, indicate the nature thereof and the amount and the manner in which you became entitled to same.

NIL

30. Indicate the names and addresses of all persons or institutions which owe you money and have not heretofore been disclosed, setting forth the amount of the debt, when and in what manner repayment is due, and attach copies of all written agreements concerning same.

NIL

31. With respect to any inheritances received by you since your divorce from the petitioner, set forth (a) name of the person from whom you inherited; (b) nature and amount of inheritance; and (c) ultimate disposition of inherited assets. If inherited monies were invested, trace these monies to the present time and given present value of these investments.

NIL

32. Set forth in detail the nature and amount of any inheritances you expect to receive.

NIL

33. With respect to any items of personal property which you have sold or transferred during the last 7 years, set forth the

NIL

following information: (a) description of the property; (b) date and method of transfer; (c) name and address of transferee and his relationship, if any, to you; (d) amount received upon transfer; and (e) disposition of proceeds from transfer. *NIL*

34. With respect to any gift of money or personal property made by you during the last 7 years, indicate (a) name and address of the person to whom the gift was made and the relationship of that person to you, if any; (b) description of the gift or the total sum of money given; (c) date of gift. *NIL*

35. With respect to any trust of which you are the grantor, beneficiary or in which you have the power of appointment, or of which your spouse or children are beneficiaries, or holders of powers of appointment, attach a copy of the trust instrument and any amendments thereto. Indicate the amount of trust principal at the time of the trust's creation and the present amount of the principal. Attach hereto income statements and balance sheets for the last seven (7) years. *NIL*

36. list all policies of insurance, annuity policies, disability policies not heretofore disclosed stating for each (a) name and address of insurance company; (b) policy type and number; (c) name and address of policy owner; (d) present beneficiary(ies) and any and all former beneficiaries indicating dates of change in beneficiary; (e) face amount of said policy; (f) annual premium and name of person currently paying said premium; (g) present cash surrender value of policy; (h) details of any loans taken out against said policy indicating amount of loan and use made of proceeds thereof; (i) if said policy has been assigned, date of assignment and identity of assignee(s); (j) if any such policy has been surrendered during the last 7 years, indicate date of surrender, cash surrender value at time of surrender, and the name of the person who received same, as well as the nature and amount of consideration received for said assignment and the person who received it. *NIL*

37. If you are entitled to any disability benefits, set forth (a) nature of disability; (b) the amount of disability award and schedule of payment thereof; (c) whether there are survivor benefits and if so, the details thereof; (d) if you currently claim a right to any disability benefits which have not yet been awarded you, state the nature and basis of your claim and the amount claimed. *NIL*

38. If you receive any income, support or maintenance not

heretofore disclosed, set forth: *n i l*

(a) The source of the income, including name and address of the person providing same, if applicable, and that person's relationship to you;

(b) The amount of support received by you during each of the last seven years; and

(c) The nature of said support, whether in money or otherwise.

39. List all credit cards upon which you are personally liable, whether individually or together with some other person, including:

(a) The title of the account; *MBNA, DISCOVER*

(b) The total amount due at present; and *\$35,000 +*

(c) Your average monthly payment, as well as the lowest permissible monthly payment. *CAR LOAN NAVY FEDERAL \$400 + CREDIT CARDS \$400 +*

Attach hereto copies of all statements for said credit cards received by you during the last seven years.

40. If there are any judgments outstanding against you and/or your spouse, set forth:

(a) The amount of the judgment; *APPROX. \$90,000 by Schnarwylor*

(b) The place entered and date of entry; and *?*

(c) The caption of the action, including index and calendar number and court. *?*

41. With respect to any of the aforementioned judgments, are there now pending or have there been during the last five years, any enforcement proceedings taken against you and/or your spouse, such as income execution, property execution, etc.? If so, set forth the dates of said enforcement proceedings, the amounts

received by the judgment creditor on account thereof, and if any enforcement proceeding is ongoing, the amounts for which you are currently liable. RECEIVED NOTICE THAT SUFFOLK CO. TOOK MY WIFE'S OWN PERSONAL TAX REFUND FROM MONEY EARNED IN NAVY TO BE APPLIED AGAINST MY JUDGEMENT.

42. Attach hereto the following, if applicable:

(a) Any financial statement which you have prepared or which has been prepared on your behalf during the last seven years; and

(b) Copies of any and all loan applications made by you during the last seven years. If any loans were approved, attach hereto a copy of the loan agreement. NIL

43. State the date in which you began your incarceration in Pennsylvania and the date of your release. Provide any documentation as to the same. MAY 1, 2000 - JULY 10, 2000

Dated: Garden City, New York

Yours, etc.,

ROBERTA R. LEVENTHAL, ESQ.  
Attorney for Petitioner  
1103 Stewart Avenue  
Garden City, New York 11530  
(516) 222-0500

TO: JOSEPH P. ORZECZOWSKI, ESQ.  
Attorney for Respondent  
Legal Aid Society of Suffolk County  
John P. Cohalan Court Complex  
400 Carleton Avenue  
P.O. Box 9082  
Central Islip, New York 11722



Legal Aid Society Suffolk County, N.Y.  
*Family Court Bureau*

Joseph P. Orzechowski  
Staff Attorney

Legal Aid Society of Suffolk County  
John P. Cohalan Court Complex  
400 Carleton Avenue  
P.O. Box 9082  
Central Islip, New York 11722-9082

(631) 853-4343

9-26-00 Part 13

2:30 PM

F-2456-98

September 26, 2000

An envelope dated August 30, 2000 from the Suffolk County Court was sent to me c/o my parents at their Dix Hills home. Once again, I was summoned to personally appear on September 26, 2000 before Philip Goglas.

Having taken over my case, Mr. Orzechowski was aware of my depression and the causes contributing to such. From the papers I had provided him, he was aware that I had received treatment from both Stony Brook Hospital and the V.A. Hospital in Northport.

He was also aware that I was full time caregiver to my four-year-old son Kelvin. From all the information provided, Legal Aid petitioned Suffolk court for MODIFICATION and ARREARS VACATED, both of which were denied.

At the September 26, 2000 hearing in front of Philip Goglas, after reviewing my finances and seeing the whole picture, Anne Schnarwyler's female attorney screamed at her client in front of many witnesses, yelling the following statements I can loosely recall: "You said he had money! He's got nothing! Who's going to pay my attorney fees? He's not! He owns nothing!" These comments should most certainly be in the court transcript.

Note: That same day at the hearing, both Anne and I were told to wait out in the court hallway while her attorney was arguing in court. I finally got a chance to talk with her and inquire about the \$65,000 judgment I had received back in 1998. In an angry voice she stated that she knew nothing of the \$65,000 judgment, stating that it had popped up and just "magically appeared" when she started getting court documents in the mail. She explained that when she'd first met Philip Goglas in 1998, he'd ordered her to have no contact or talk with me. That made sense since when I had first seen her and Goglas, she would storm out of courtroom and disappear while I was still held after court.

I asked Anne, "You did not start this charade? No, she replied. Anne stated So, why are you dragging me to court Joe? I left you alone all these years, and I was happy. I have been missing work because of this."

Note: Further proof she wanted nothing to do with me. Back in 1990 Anne went all out and even had our marriage null and void, granted by the Bishop of Rockville Centre.

I didn't know what to make of this at the time. Anne was pissed, telling me Goglas told her to hire a lawyer and that I was going to pay for the lawyer's services. He'd told her this was legal and that I wanted to give her money that I'd inherited.

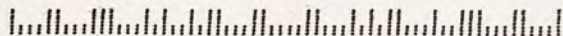
Nothing made sense at first. What was Anne really saying about the \$65,000.00? But then it hit me as to why. Inheritance. The Real Reason Why Hearing Examiner Philip Goglas Did This To Me.

FAMILY COURT OF THE STATE OF NEW YORK  
COUNTY OF SUFFOLK  
ATTN: HEARING EXAMINER DEPARTMENT  
400 CARLETON AVENUE  
P.O. BOX 9077  
CENTRAL ISLIP, NEW YORK 11722-9077



JOSEPH WAIKSNIS  
C/O SNYDER  
40 E. HALF HOLLOW RD  
DIX HILLS, SC 11747

11746-6326 43



FAMILY COURT : SUFFOLK COUNTY  
400 CARLETON AVENUE  
CENTRAL ISLIP, NEW YORK 11722

F. 2456-98

Your case has been adjourned to

9 - 26 - 00

Pt. 13

2:30 PM  
at 9:00 A. M.

Date

You are hereby directed to appear on said adjourned date without further notice

RECEIPT ACKNOWLEDGED

P + R

By order of the Court,  
Robert M. O'Mara  
Chief Clerk

DATE

8/24/00

By: 

THE COURT WILL PROCEED BY INQUEST  
AND ENTER A DEFAULT JUDGEMENT  
SHOULD YOU FAIL TO APPEAR

FC 1A

M-1663A

Revised 2/96

FAMILY COURT OF THE STATE OF NEW YORK  
COUNTY OF SUFFOLK

.....  
In the Matter of a Proceeding Under Article 4 or 5  
of the Family Court Act

ANNE SCHNARWYLER

, NY

JOSEPH WAIKSNIS  
C/O SNYDER  
40 E. HALF HOLLOW RD  
DIX HILLS, SC 11747

.....  
RE: ANNE SCHNARWYLER, PETITIONER  
VS.  
JOSEPH WAIKSNIS, RESPONDENT

DOCKET NO. F-2456-98      SUMMONS

IN THE NAME OF THE PEOPLE OF THE STATE OF NEW YORK TO THE ABOVE-NAMED PETITIONER AND  
RESPONDENT

A Petition under Article 4 or 5 of the Family Court Act having been filed with this Court,  
and annexed hereto

YOU AND EACH OF YOU ARE HEREBY SUMMONED to appear before the Court on September 26,  
2000 at 02:30 PM before PHILIP GOGLAS, ESQ., Part 13 which will be heard at the Family Court,  
400 CARLETON AVENUE, CENTRAL ISLIP, NY 11722, to answer the petition and to be dealt with in  
accordance with Article 4 or 5 of the Family Court Act.

ON YOUR FAILURE TO APPEAR AS HEREIN DIRECTED, A WARRANT MAY BE ISSUED FOR YOUR ARREST.

NOTICE

Your failure to appear will result in the entry of an order of default unless service has  
been made by mail alone, in which event no default may be entered without proof satisfactory to  
the court that you have received actual notice of the commencement of this proceeding (Section  
427(c) F.C.A.). You have a right to bring a lawyer with you, if you choose.

You must provide the court with proof of your income and assets on the attached form  
provided for that purpose. You are required to attach a current and representative paycheck  
stub and most recently filed state and federal income tax returns to said form. You must  
provide the social security number(s) of the child(ren) involved in this proceeding and the  
name and address of any group health insurance plan available to you through your employment.

You may be required to furnish past and present income tax returns; employer statements;  
pay stubs; corporate, business or partnership books and records; corporate and business tax  
returns; and receipts for expenses or such other measures of verification as the court  
determines appropriate.

A temporary or permanent order of support will be made on the return date of the summons  
whether or not you appear.

Robert M. O'Mara  
Chief Clerk

Dated: August 30, 2000

By:

8-30-00  
AS

**LOUIS PELOSI**

\_\_\_\_\_  
LOUIS PELOSI  
Associate Court Clerk

ALL REQUESTS FOR ADJOURNMENTS MUST BE IN WRITING WITH NOTICE TO THE OTHER SIDE. ALL PERSONS  
ENTERING FAMILY COURT MUST PASS THROUGH A WEAPONS/METAL DETECTOR.  
ALL LITIGANTS WILL BE EXPECTED TO BE DRESSED APPROPRIATELY.

(GGD)

ALL PETITIONS FILED THIS DATE: FORM-12 SUPPORT

General Form 12(c)

FAMILY COURT OF THE STATE OF NEW YORK  
COUNTY OF SUFFOLK

Docket No. F-2456-98

Anne Schnarwyler

Petitioner

-against-

PETITION FOR MODIFICATION OF  
ORDER MADE BY FAMILY COURT

Joseph Waiksnis

Respondent

TO THE FAMILY COURT:

The undersigned Respondent respectfully shows that:

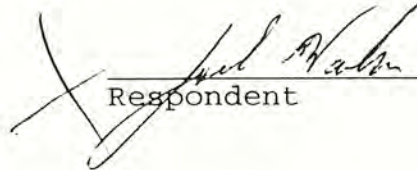
1. The petitioner is the Ex-wife of the respondent and resides at:  
C/O CSEB, P.O. Box 18030, Hauppauge, NY 11788.
2. The respondent is the Ex-husband of the petitioner and resides at:  
C/O Snyder, 40 E. Half Hollow Road, Dix Hills, NY 11746.
3. That heretofore on 11/2/98, an Order was made by this Court under Article IV of the Family Court Act directing: The respondent to pay to CSEB \$150.00 weekly child support for [REDACTED] children.
4. That said Order has not been modified and is now in full force and effect.
5. That the present status of the compliance or non-compliance with the Order is as follows: To be supplied by Child Support Enforcement Bureau/Support Collection Unit.
6. That since the entry of the last Order herein there has been a change in circumstances in that: The respondent has been unemployed since 1996. The respondent is remarried and is the full-time caretaker for his 4 year old son Kelvin Waiksnis DOB [REDACTED]. The respondent is still unemployed to date. The respondent is financially supported by his present wife Dawn Waiksnis who is employed full-time active military U.S. Navy. Also, the respondent suffers from Depression and is on Medication for his Depression. The respondent is not able to maintain employment due to his depression. Respondent will provide additional proof at time of Hearing.

7. That by reason of said subsequent change of circumstances, the said Order of the Family Court should be modified in the following respects: The order of support to be modified and reduced to \$25.00 weekly child support. The arrears to be vacated.

8. No previous application has been made for the relief herein requested.

WHEREFORE, Respondent respectfully prays that the said Order be modified as set forth herein and for such other relief as to the Court may seem just and proper.

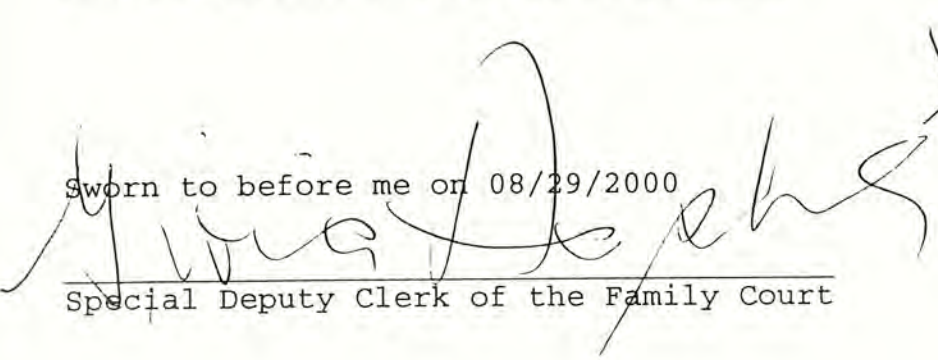
Dated: 08/29/2000

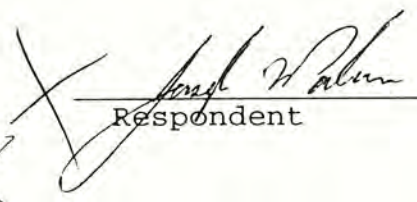
  
Respondent

VERIFICATION

STATE OF NEW YORK )  
                          ) ss:  
COUNTY OF SUFFOLK )

Joseph Waiksnis, being duly sworn says: I am the Respondent in the foregoing petition; that said petition is true of my own knowledge except as to the matters therein stated to be alleged upon information and belief, and as to those matters I believe it to be true.

  
Sworn to before me on 08/29/2000  
Special Deputy Clerk of the Family Court

  
Respondent



FAMILY COURT OF THE STATE OF NEW YORK  
COUNTY OF SUFFOLK

AFFIDAVIT (FCA Sec. 451)

Anne Schnarwyler

Petitioner

-against-

Docket No. F-2456-98

Joseph Waiksnis

Respondent

STATE OF NEW YORK)  
                                  ) ss:  
COUNTY OF SUFFOLK)

Respondent, being duly sworn, deposes and says:

1. I am the Respondent in the above entitled proceeding.

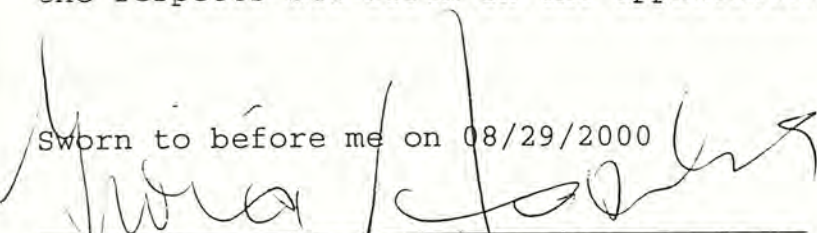
2. This affidavit is being submitted pursuant to Family Court Act Sec. 451 in support of the application to Modify the Order of support in this matter dated 11/2/98 .

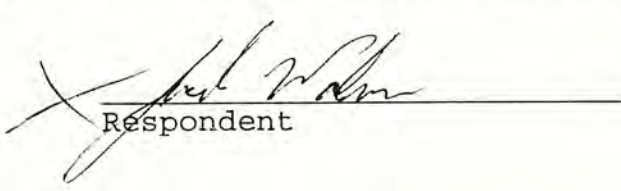
3. Upon information and belief, there has been the following change of circumstances: The respondent has been unemployed since 1996. The respondent is remarried and is the full-time caretaker for his 4 year old son Kelvin Waiksnis DOB [REDACTED]. The respondent is still unemployed to date. The respondent is financially supported by his present wife Dawn Waiksnis who is employed full-time active military U.S. Navy. Also, the respondent suffers from Depression and is on Medication for his Depression. The respondent is not able to maintain employment due to his depression. Respondent will provide additional proof at time of Hearing.

4. The attached material is provided in support of the application.

5. On this basis, Respondent is requesting that the order be modified in the respects set forth in the application.

Sworn to before me on 08/29/2000

  
Special Deputy Clerk of the Family Court

  
Respondent

October 11, 2000

A letter dated October 11, 2000 was sent to me c/o my parents in Dix Hills. It was signed by Philip Goglas, advising that my petition for modification was **DISMISSED**, rubber stamped in bold letters.

Note 1: I notice an order of support for \$150.00, dated January 04, 1990 and issued by the Supreme Court Suffolk County Index No. 87-00335. I had never heard of this order or the judgement of \$9,300.00 that was made on the same date of January 04, 1990.

Goglas had referred me to the ERASE program, located on Oser Avenue in Hauppauge. It turned out to be a Gestapo-type headquarters run by a female Hitler-like woman named Gina, who went around screaming and yelling. She threatened to have me arrested and locked up, and the most disgusting thing from her mouth was that she would have my son taken from me and given to social services. Was this Suffolk's finest employee?

Fold flap over top of envelope to  
the right of the return address

**CERTIFIED**

Z 567 372 606

**MAIL**

Joseph Waiksnis  
40 E Half Hollow Rd  
Dix Hills, NY 11746



**PRESENT:**

**PHILIP GOGLAS**  
**HEARING EXAMINER**

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

---

In the Matter of

**ANNE SCHNARWYLER**

Petitioner

-against-

**JOSEPH SCHNARWYLER**

Respondent

**DOCKET NO. F-2456-98**

**FINDINGS OF FACT**

---

**ATTORNEY FOR PETITIONER**

Robert Leventhal, Esq.  
1103 Stewart Avenue  
Garden City, NY 11530

---

**ATTORNEY FOR RESPONDENT**

Joseph Porzechowski, Esq.  
Legal Aid Society  
400 Carleton Avenue  
Central Islip, NY 11722

---

By violation petition dated February 28, 2000, the petitioner alleges that the respondent is in violation of the order of support.

By modification petition dated August 29, 2000 the respondent requests a modification of the order of support.

A hearing was held on September 26, 2000 to determine these petitions. The following facts were adduced at the hearing.

The Child Support Enforcement Bureau representative testified about the order of support and payments made and arrears.

The order of support is \$150.00 per week, as issued by the Supreme Court, Suffolk County Index No. 87-00335, dated January 4, 1990 for two children. Respondent had made the following payments:

April 24, 2000	\$100.00
May 1, 2000	60.00
May 15, 2000	75.00
August 30, 2000	35.00 (25.00, 10.00)
September 22, 2000	75.00 (25.00, 25.00, 25.00)

(Petitioner's #1)

The petitioner testified. The parties were divorced and the order of support was issued at \$150.00 per week. She has not received any monies until April 2000 from this Court. She testified that the respondent had been employed as a sheet metal mechanic and school bus mechanic.

Respondent testified that he was in South Carolina on November 17, 1998, March 29, 1999 and April 6, 1999. On May 23, 2000 he was incarcerated in Riverhead.

His present wife is in the Navy. She has been in Bethesda, Maryland since January 2000.

He claims he has not worked since 1985. He is taking care of his new child who he claims has speech therapy and behavioral problems. The child is now 4 years old.

He admits that he is taking medication presently. He was incarcerated from May 1, 2000 to July 2000 in Pennsylvania.

He submitted his financial disclosure affidavits. (Respondent's A). He reports no income. (Respondent's B).

He submitted a credit card statement. (Respondent's C). He owes over \$7,000.00 to this company. He also submitted a copy of his 1999 income tax returns. (Respondent's D). He only reported his present wife's income of \$17,187.00. The address given is 40 East Half Hollow Road, Dix Hills 11746.

This Court has reviewed the evidence and testimony presented. The following determinations are made.

The respondent has not complied with the Supreme Court order or the Family Court order for child support.

He has not worked since about 1995 and shows no signs of trying to get gainful employment.

He has failed to prove to this Court that he has tried to comply with the order and he has failed to show why the order of support should be modified.

In short he has not done much of anything. This Court cannot reward him with a modification of the order when he has not made any attempt to comply with the order. Only recently has money been applied on this account through the efforts of Family Court.

His petition for modification is therefore dismissed. He is likewise found in violation of the order of support. He will be referred to the ERASE program in an effort to provide him with information on paying support and a possible referral for the Labor Department.

ENTER

Dated: October 11, 2000

PHILIP GOGLAS

---

PHILIP GOGLAS  
HEARING EXAMINER



November 20, 2000

A letter was mailed to my parent's home containing another money judgement for \$11,490.00, entered November 08, 2000 and signed with a bold letter rubber stamp "Philip Goglas" with state seal next to it.

Same docket No. F-2456-98.

The Petition was filed by Anne Schnarwyler on February 28, 2000, alleging I had failed to obey the November 02, 1998 court order for \$150.00 a week.

Note: The February 28, 2000 document was some kind of Petition from Social Services SCU, signed by James Farrell.

Note: What had happened to January 04, 1990 the order for \$150.00 a week?



At a term of the Family Court  
of the State of New York, held  
in and for the County of  
SUFFOLK, at CENTRAL ISLIP,  
New York, on October 20, 2000

PRESENT: PHILIP GOGLAS, ESQ.  
Hearing Examiner

.....  
In the Matter of a Proceeding under  
Article 4 of the Family Court Act

Docket No. F-2456-98  
File No.

ANNE SCHNARWYLER, Petitioner

ORDER OF DISPOSITION  
(Violation of Support Order)

-against-

JOSEPH WAIKSNIS, Respondent

DECISION RENDERED

Soc. Sec. No. [REDACTED]

.....  
NOTICE: YOUR WILLFUL FAILURE TO OBEY THIS ORDER MAY, AFTER COURT HEARING,  
RESULT IN YOUR COMMITMENT TO JAIL FOR A TERM NOT TO EXCEED SIX MONTHS,  
FOR CONTEMPT OF COURT.  
SPECIFIC WRITTEN OBJECTIONS TO THIS ORDER MAY BE FILED WITH THIS COURT  
WITHIN 30 DAYS AFTER ENTRY OF THE ORDER.

ANNE SCHNARWYLER having filed a petition in this Court sworn to on  
February 28, 2000, alleging that JOSEPH WAIKSNIS failed to obey the order  
of this Court dated November 2, 1998, directing payment of support for the  
dependents indicated therein, and

RESPONDENT having appeared before a Hearing Examiner of this Court  
to answer the petition, and to show cause why the relief prayed for in the  
petition should not be granted, and having been advised by the Court of  
the right to counsel, and JOSEPH WAIKSNIS having denied the allegations  
of the petition; and

The matter having duly come on to be heard before this Court;

NOW, after examination and inquiry into the facts and circumstances  
of the case and after hearing the proofs and testimony offered in relation

thereto and upon the attached findings of fact;

ADJUDGED that JOSEPH WAIKSNIS willfully failed to obey the order of this Court;

and it is

ORDERED that the order of support dated November 2, 1998, is hereby continued;

and it is further

ORDERED that JOSEPH WAIKSNIS, upon notice of this order, pay or cause the aforesaid amounts to be paid by income execution to the Support Collection Unit at Suffolk County SCU, PO Box 15347, Albany New York 12212-5347

ORDERED that JOSEPH WAIKSNIS provide changes of address at all times should JOSEPH WAIKSNIS move from the address last known to the Court by reporting such change to the Support Collection Unit at P.O. Box 18030, Hauppauge, NY 11788-8830, and shall further provide employer's name and address and future changes in employment status affecting compensation received including rate of compensation or loss of employment to the Support Collection Unit; and it is further

AND it is further

ORDERED that judgment be entered in favor of the Petitioner against JOSEPH WAIKSNIS in the amount of \$11480.00 together with costs and disbursements in the amount of \$10.00, for a total sum of \$11490.00;

and it is further

ORDERED that this order shall be enforceable pursuant to section 5241 or 5242 of the Civil Practice Law and Rules, or in any other manner provided by law ("Default", as defined in CPLR section 5241, means the failure to remit three payments on the date due in the full amount directed in this order, or the accumulation of arrears, including amounts arising from retroactive support, that are equal to or greater than the amount directed to be paid for one month, whichever occurs first);

and it is further

ORDERED that when the person or family to whom public assistance is being paid, no longer receives public assistance, support payment shall continue to be made to the Support Collection Unit, unless such person or family requests otherwise;

NOTE:

(1) A COURT ORDER OF SUPPORT RESULTING FROM A PROCEEDING COMMENCED BY THIS APPLICATION (PETITION) SHALL BE ADJUSTED BY THE APPLICATION OF A COST OF LIVING ADJUSTMENT AT THE DIRECTION OF THE SUPPORT COLLECTION UNIT NO EARLIER THAN TWENTY-FOUR MONTHS AFTER SUCH ORDER IS ISSUED, LAST MODIFIED OR LAST ADJUSTED, UPON THE REQUEST OF ANY PARTY TO THE ORDER OR PURSUANT TO PARAGRAPH (2) BELOW, SUCH COST OF LIVING ADJUSTMENT SHALL BE ON NOTICE TO BOTH PARTIES WHO, IF THEY OBJECT TO THE COST OF LIVING ADJUSTMENT, SHALL HAVE THE RIGHT TO BE HEARD BY THE COURT AND TO PRESENT EVIDENCE WHICH THE COURT WILL CONSIDER IN ADJUSTING THE CHILD SUPPORT ORDER IN ACCORDANCE WITH SECTION FOUR HUNDRED THIRTEEN OF THE FAMILY COURT ACT, KNOWN AS THE CHILD SUPPORT STANDARDS ACT.

(2) A PARTY SEEKING SUPPORT FOR ANY CHILD(REN) RECEIVING FAMILY ASSISTANCE SHALL HAVE A CHILD SUPPORT ORDER(S) REVIEWED AND ADJUSTED AT THE DIRECTION OF THE SUPPORT COLLECTION UNIT NO EARLIER THAN TWENTY-FOUR MONTHS AFTER SUCH ORDER IS ISSUED, LAST MODIFIED OR LAST ADJUSTED BY THE SUPPORT COLLECTION UNIT, WITHOUT FURTHER APPLICATION BY ANY PARTY. ALL PARTIES WILL RECEIVE A COPY OF THE ADJUSTED ORDER.

(3) WHERE ANY PARTY FAILS TO PROVIDE, AND UPDATE UPON ANY CHANGE, THE SUPPORT COLLECTION UNIT WITH A CURRENT ADDRESS, AS REQUIRED BY SECTION FOUR HUNDRED FORTY-THREE OF THE FAMILY COURT ACT, TO WHICH AN ADJUSTED ORDER CAN BE SENT, THE SUPPORT OBLIGATION AMOUNT CONTAINED THEREIN SHALL BECOME DUE AND OWING ON THE DATE THE FIRST PAYMENT IS DUE UNDER THE TERMS OF THE ORDER OF SUPPORT WHICH WAS REVIEWED AND ADJUSTED OCCURRING ON OR AFTER THE EFFECTIVE DATE OF THE ADJUSTED ORDER, REGARDLESS OF WHETHER OR NOT THE PARTY HAS RECEIVED A COPY OF THE ADJUSTED ORDER.


and it is further

ORDERED ARREARS FIXED BY CSEB/SCU ARE \$11,480.00 DUE PETITIONER AND REDUCED TO A MONEY JUDGMENT PLUS COSTS. RESPONDENT IS REFERRED TO ERASE PROGRAM. MODIFICATION PETITION DISMISSED--RESPONDENT FAILED TO PROVE HIS CASE FOR A DOWNWARD MODIFICATION.;



Dated: .

ENTER

**ENTERED**  
  
NOV 8 2000  
ROBERT M. O'MARA  
BY: 

**PHILIP GOGLAS**

PHILIP GOGLAS, ESQ.  
Hearing Examiner

ENTERED

CLERK OF FAMILY COURT  
DATE: \_\_\_\_\_

BY: \_\_\_\_\_

**DISTRIBUTION:**

PETR: ANNE SCHNARWYLER

ATTY: Robert Leventhal, Esq.

RESP: JOSEPH WAIKSNIS

ATTY: Joseph Porzechowski, Esq.

SUPPORT COLLECTION UNIT

ANNE SCHNARWYLER

\*

NY

Robert Leventhal, Esq.  
1103 Stewart Avenue  
Garden City, NY 11530

JOSEPH WAIKSNIS  
40 E. HALF HOLLOW RD.  
DIX HILLS SC 11747-

Joseph Porzechowski, Esq.  
Legal Aid Society  
400 Carlton Avenue  
Central Islip, Ny 11722

Secs. 439, 460 F.C.A.

Form 4-H.E.-14  
(Order-Entry of  
Money Judgment)  
12/87

At a term of the Family Court  
of the State of New York, held  
in and for the County of  
SUFFOLK, at CENTRAL ISLIP,  
New York, on October 20, 2000

PRESENT: PHILIP GOGLAS, ESQ.  
Hearing Examiner

.....  
In the Matter of a Proceeding under  
Article 4 of the Family Court Act

Docket No. F-2456-98  
File No.

ANNE SCHNARWYLER, Petitioner

ORDER  
(Entry Money Judgment)

-against-

JOSEPH WAIKSNIS, Respondent

Soc. Sec. No. [REDACTED]

.....  
An application having been made for an order directing the entry of  
judgment in the sum of \$11480.00 that being the amount of arrears having  
accrued because of non-payment by JOSEPH WAIKSNIS of sums directed to be  
paid by an order dated November 2, 1998, of the Family Court, County of  
Suffolk together with costs and disbursements, and

The matter having duly come on to be heard before a Hearing  
Examiner of this court;

NOW, after examination and inquiry into the facts and circumstances  
of the case and after hearing the proofs and testimony offered in relation  
thereto and upon the attached findings of fact; and the defaulting party  
not having shown good cause for failure to make application for relief  
from the judgment or order directing such payment prior to the accrual of  
such arrears; it is therefore

ADJUDGED that JOSEPH WAIKSNIS willfully failed to obey the order of  
this Court in that JOSEPH WAIKSNIS willfully failed to pay the sum of \$  
11480.00 which amount the Court finds to be the arrears due and owing  
under said order;

and it is

ADJUDGED that JOSEPH WAIKSNIS knowingly, conciously and voluntarily disregarded the obligation under a lawful court order;

and it is further

ORDERED that judgment be entered in favor of the Petitioner against JOSEPH WAIKSNIS in the amount of \$11480.00 together with costs and disbursements in the amount of \$10.00, for a total sum of \$11490.00, (interest will accrue at the prevailing rate of interest on judgments as provided in the Civil Practice Law and Rules).


Dated:

ENTER

**ENTERED**

NOV 8 2000

ROBERT M. O'MARA

BY 

**PHILIP GOGLAS**

PHILIP GOGLAS, ESQ.  
Hearing Examiner

ENTERED

CLERK OF FAMILY COURT  
DATE: \_\_\_\_\_

BY: \_\_\_\_\_

DISTRIBUTION:

- PETR: ANNE SCHNARWYLER
- ATTY: Robert Leventhal, Esq.
- RESP: JOSEPH WAIKSNIS
- ATTY: Joseph Porzechowski, Esq.

SUPPORT COLLECTION UNIT