

**UNITED STATES DISTRICT COURT  
WESTERN DISTRICT OF NEW YORK**

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GUY C. GIANCARLO,

Plaintiff,

vs.

AFNI, INC.,

Defendant.

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24 CV 62



**COMPLAINT**

**Jury Trial Demanded**

**INTRODUCTION**

1. This action seeks redress for collection practices that violate the Fair Debt Collection Practices Act, 15 U.S.C. § 1692 et seq. (the “FDCPA”).

2. Since the conduct of Defendant complained of herein is unlawful under New York General Business Law § 349(h) (“GBL § 349(h)”), which declares as unlawful deceptive acts or practices in the conduct of business, trade, or commerce in New York, Plaintiff also seeks redress under GBL § 349(h).

**JURISDICTION AND VENUE**

3. The Court has jurisdiction to grant the relief sought by Plaintiff pursuant to 15 U.S.C. § 1692k, GBL § 349(h), and 28 U.S.C. §§ 1331 and 1367.

4. Venue in this District is proper pursuant to 28 U.S.C. § 1391(b)(2), in that Defendant directed its collection efforts toward Plaintiff in the District.

### **PARTIES**

5. Plaintiff is an individual who resides in the County of Erie, State of New York, which is a county situated within the Western District of New York.

6. Plaintiff is an attorney admitted to practice before this Court, as well as the Courts of the State of New York. Plaintiff represents himself in this action.

7. Plaintiff is a “consumer” as defined in the FDCPA, 15 U.S.C. § 1692a(3), in that Defendant sought to collect from him a purported debt incurred for personal, family or household purposes.

8. Defendant maintains its principal office at 404 Brock Drive, Bloomington, Illinois 61701.

9. Defendant is a “debt collector” as defined in the FDCPA, 15 U.S.C. § 1692a(6), in that Defendant is engaged in the business of using the mails and other instrumentalities of interstate commerce to collect debts originally owed to others, which were incurred for personal, family or household purposes.

### **FACTS**

10. In December 2022, Defendant sent a debt collection letter via U.S. mail (“regular mail”) to Plaintiff regarding a debt which Defendant purported was owed by Plaintiff. A copy of this letter, which is dated December 5, 2022, is attached hereto as Exhibit A.

11. Upon information and belief, the purported debt which Defendant was attempting to collect was incurred for telecommunication services used for personal, family or household purposes.

12. Defendant's letter of December 5, 2022, included the following instructions and representations:

- Call or write to us by January 16, 2023, to dispute all or part of the debt;
- If you write to us by January 16, 2023, we must stop collection on any amount you dispute until we send you information that shows you owe the debt.
- We will not submit information to a credit reporting agency about this credit obligation until the expiration of the time period described above.

See Exhibit A, page 1.

13. In reply to Defendant's letter of December 5, 2022, Plaintiff sent an email to Defendant on January 16, 2023, to dispute the debt and to request pertinent documentation regarding it. The email stated:

I am disputing the debt that Afni, Inc. purports that I owe in its notice to me dated December 5, 2022.

I never had an account with AT&T. I want you to send to me the name and address of the original creditor. I further want you to send to me all documentation supporting your assertion as to my obligation on the debt.

14. A copy of Plaintiff's email of January 16, 2023, is attached hereto as Exhibit B.

15. In the meantime, on the previous day, January 15, 2023, Defendant reported negatively on Plaintiff's creditworthiness to credit reporting agencies, citing the purported debt.

16. Attached hereto as Exhibit C is a printout of an electronic credit alert Plaintiff received from the credit monitoring service offered by Chase and to which Plaintiff subscribed. The credit alert warned "[i]t looks like you received a major derogatory mark on your credit report for your account with AFNI, INC."

17. Notwithstanding Defendant's representation in its letter of December 5, 2022, that it would stop collection on the purported debt if Plaintiff wrote to dispute the debt by January 16, 2023 - a condition which Plaintiff had satisfied (*see* Exhibit B) - Defendant nevertheless continued its collection efforts.

18. In this regard, Defendant sent a collection notice dated January 16, 2023, to Plaintiff via regular mail. A copy of this collection notice is attached hereto as Exhibit D.

19. In the collection notice, Defendant reiterated its position as to the amount it considered due and attempted to induce Plaintiff into settling by offering to accept an amount less than the purported debt.

20. On January 17, 2023, prior to Plaintiff's receipt of the collection notice of January 16, 2023 (which had been sent by regular mail), Defendant sent an

email to Plaintiff. A copy of Defendant's email of January 17, 2023, is attached hereto as Exhibit E.

21. Defendant's email of January 17, 2023, included a copy of Plaintiff's email of January 16, 2023 (*see* Exhibit E, page 3), while the body of Defendant's email stated:

Thank you for your inquiry. We have received your dispute and are investigating. We will contact you in writing via mail with the results.

*See* Exhibit E, page 1.

22. Following Defendant's email of January 17, 2023 (and subsequent to Plaintiff's receipt of Defendant's collection notice dated January 16, 2023), Plaintiff received in the regular mail a letter from Defendant dated January 19, 2023. A copy of Defendant's letter dated January 19, 2023, is attached hereto as Exhibit F.

23. Defendant's letter dated January 19, 2023, stated:

Thank you for contacting Afni, Inc. regarding your account 512188088713.

Afni, Inc. has received your identity theft claim regarding account number 512188088713. For AT&T to address your identity theft claim please fill out the attached declaration. AT&T required that the person whose name is on the account must sign the declaration. As set forth in the attached declaration, AT&T also requires a clear copy of a valid government/stated issued identification and one (1) source of proof of residency from 03-01-2022 to 03-25-2022 within twenty-one (21) days. You may submit the required documentation to:

24. Contrary to the premise underlying Defendant's letter dated January 19, 2023, Plaintiff *never* claimed identity theft. A review of Plaintiff's sole communication with Defendant, the email of January 16, 2023, substantiates that identity theft was not raised by Plaintiff (*see* Exhibit B).

25. Defendant's final communication with Plaintiff was a letter dated February 16, 2023, a copy of which is attached hereto as Exhibit G.

26. In its letter dated February 16, 2023, Defendant continued its false representation that Plaintiff had raised the issue of identity theft. In this regard, the letter stated, "[i]n response to your claim of identity theft..." *See* Exhibit G.

27. Defendant's letter dated February 16, 2023, also served as its verification of the purported debt (no verification had been provided prior thereto). The letter specifically noted, "[t]his letter serves as verification of the debt." *See* Exhibit G.

28. As a result of the conduct of Defendant set forth hereinabove, Plaintiff suffered both economic and non-economic damages.

29. Plaintiff's non-economic damages include, but are not limited to, mental anguish, personal humiliation, embarrassment, and diminished reputation.

**VIOLATIONS OF THE FDCPA [15 U.S.C. §§ 1692e(10) and 1692f]**

**FIRST CAUSE OF ACTION**

30. Plaintiff reincorporates by reference all of the preceding paragraphs.

31. In its debt collection letter dated December 5, 2022, Defendant represented that it would not submit information to a credit reporting agency about the purported debt until after January 16, 2023 (*see* Exhibit A, page 1).

32. However, contrary to its representation, Defendant submitted information to a credit reporting agency on January 15, 2023 (*see* Exhibit C).

### **SECOND CAUSE OF ACTION**

33. Plaintiff reincorporates by reference all of the preceding paragraphs.

34. In its debt collection letter dated December 5, 2022, Defendant represented that if Plaintiff wrote to dispute the purported debt by January 16, 2023, Defendant would stop collection until Defendant provided verification (*see* Exhibit A, page 1).

35. On January 16, 2023, Plaintiff emailed Defendant to dispute the purported debt (*see* Exhibit B).

36. By letter dated February 16, 2023, Defendant provided the verification (*see* Exhibit G).

37. However, contrary to its representation, Defendant did not stop its collection efforts in the interim period. In fact, Defendant attempted to induce payment through a “Collection Notice” that set forth a “Discounted Offer” (*see* Exhibit D).

**THIRD CAUSE OF ACTION**

38. Plaintiff reincorporates by reference all of the preceding paragraphs.

39. In its letters dated January 19, 2023 (Exhibit F), and February 16, 2023 (Exhibit G), Defendant stated that Plaintiff was claiming identity theft.

40. The letter of January 19, 2023 went so far as to include a six-page form “Identity Theft Victim’s Complaint and Affidavit,” seeking private, detailed information about Plaintiff (*see* Exhibit F, pages 3 through 8).

41. Contrary Defendant’s statements, Plaintiff *never* claimed identity theft. A review of Plaintiff’s sole communication with Defendant, the email of January 16, 2023, substantiates that identity theft was not raised by Plaintiff (*see* Exhibit B).

**VIOLATIONS OF GBL § 349(h)**

**FOURTH, FIFTH, AND SIXTH CAUSES OF ACTION**

42. Plaintiff reincorporates by reference all of the preceding paragraphs.

43. The conduct underlying the three causes of action under the FDCPA likewise constitutes causes of action under GBL § 349(h).

**JURY DEMAND**

44. Plaintiff hereby demands a trial by jury.

**PRAYER FOR RELIEF**

WHEREFORE, Plaintiff respectfully requests that the Court enter judgment in



favor of Plaintiff and against Defendant for:

- (a) actual damages;
- (b) statutory damages;
- (c) statutory attorneys' fees, litigation expenses and costs of suit; and
- (d) such other or further relief as the Court deems proper.

Dated: January 14, 2024



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Guy C. Giancarlo, Esq.  
94 Ava Lane  
Amherst, NY 14221  
(716) 863-0620  
guycgiancarlo@gmail.com

Afni, Inc.  
PO Box 3517  
Bloomington, IL 61702-3517  
(877) 284-4245 from Monday – Friday 7am-7pm Central  
[www.afnicollections.com](http://www.afnicollections.com)

GUY GIANCARLO  
94 AVA LN  
BUFFALO NY 14221-3033

Reference: 085284940 - 01  
Date: December 5, 2022

**Afni, Inc. is a debt collector.** We are trying to collect a debt that you owe to AT&T. We will use any information you give us to help collect the debt.

**Our information shows:**

You had an account with AT&T with account number 512188088713.		
As of 06-02-2022 you owed:		\$ 2,684.26
Between 06-02-2022 and today:		
You were charged this amount in interest:	+	\$ 0.00
You were charged this amount in fees:	+	\$ 0.00
You paid or were credited this amount toward the debt:	-	\$ 0.00
<b>Total amount of the debt now:</b>		<b>\$ 2,684.26</b>

**How can you dispute the debt?**

- **Call or write to us by January 16, 2023, to dispute all or part of the debt.** If you do not, we will assume that our information is correct.
- **If you write to us by January 16, 2023,** we must stop collection on any amount you dispute until we send you information that shows you owe the debt. You may use the form below or write to us without the form. You may also include supporting documents. We accept disputes electronically at [www.afnicollections.com](http://www.afnicollections.com) or via email at [recoveryteam@afni.com](mailto:recoveryteam@afni.com). We may furnish information about this account to your credit report. We will not submit information to a credit reporting agency about this credit obligation until the expiration of the time period described above. You may submit a dispute about information furnished at PO Box 3787, Bloomington, IL 61702.

**What else can you do?**

- **Write to ask for the name and address of the original creditor, if different from the current creditor.** If you write by January 16, 2023, we must stop collection until we send you that information. You may use the form below or write to us without the form. We accept such requests electronically at [recoveryteam@afni.com](mailto:recoveryteam@afni.com) or [www.afnicollections.com](http://www.afnicollections.com).
- **Go to [www.cfpb.gov/debt-collection](http://www.cfpb.gov/debt-collection) to learn more about your rights under federal law.** For instance, you have the right to stop or limit how we contact you.
- **Contact us about your payment options.**

**Notice: See reverse side for important information.**

DEPT 555  
PO BOX 4115  
CONCORD CA 94524

RETURN SERVICE REQUESTED

GUY GIANCARLO  
94 AVA LN  
BUFFALO NY 14221-3033

**How do you want to respond?**

*Check all that apply:*

- I want to dispute the debt because I think:**
  - This is not my debt.
  - The amount is wrong.
  - Other (please describe on reverse or attach additional information).
- I want you to send me the name and address of the original creditor.**
- I enclosed this amount:** \$

Make your check payable to Afni, Inc. Include the reference number 085284940 - 01.

**Mail this form to:**

Afni, Inc.  
PO Box 3517  
Bloomington, IL 61702-3517

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**Important Information**

This communication is from a debt collector. This is an attempt to collect a debt and any information obtained will be used for that purpose. All calls may be recorded and/or monitored.

Correspondence Address: Afni, Inc. PO Box 3517, Bloomington, IL 61702 - 3517

We may furnish information about this account to your credit report. We will not submit information to a credit reporting agency about this credit obligation until the expiration of the time period listed in this letter. You may submit a dispute about information furnished at PO Box 3787, Bloomington, IL 61702.

Afni can provide to you an alternative format for this letter. If you would prefer a large print notice, please contact us at (877) 284-4245.

In accordance with the Fair Debt Collection Practices Act, 15 U.S.C. § 1692 et seq., Afni is prohibited from engaging in abusive, deceptive, and unfair debt collection efforts, including but not limited to: (i) the use or threat of violence; (ii) the use of obscene or profane language; and (iii) repeated phone calls made with the intent to annoy, abuse, or harass.

If a creditor or debt collector receives a money judgment against you in court, state and federal laws may prevent the following types of income from being taken to pay the debt:

1. Supplemental security income, (SSI);
2. Social security;
3. Public assistance (welfare)
4. Spousal support, maintenance (alimony) or child support;
5. Unemployment benefits;
6. Disability benefits;
7. Workers' compensation benefits;
8. Public or private pensions;
9. Veterans' benefits;
10. Federal student loans, federal student grants, and federal work study funds; and
11. Ninety percent of your wages or salary earned in the last sixty days.

Additional Information Regarding Dispute of Reference No. 085284940 - 01

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Guy Giancarlo <guycgiancarlo@gmail.com>

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**Your Reference: 085284940-1**

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**Guy Giancarlo** <guycgiancarlo@gmail.com>  
To: recoveryteam@afni.com

Mon, Jan 16, 2023 at 8:09 PM

I am disputing the debt that Afni, Inc. purports that I owe in its notice to me dated December 5, 2022.

I never had an account with AT&T. I want you to send to me the name and address of the original creditor. I further want you to send to me all documentation supporting your assertion as to my obligation on the debt.

Yours truly,  
Guy C. Giancarlo  
94 Ava Lane  
Buffalo, NY 14221-3033

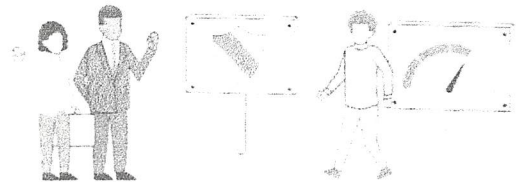
(B)



Credit Alerts Offers Insights Support

### Turn on identity monitoring for free

Get notified if your data is breached or exposed on the dark web. Help keep your information safe with ID monitoring alerts.



#### CREDIT MONITORING

01/18/2023

#### Alert Inbox

### Account update

It looks like you received a major derogatory mark on your credit report for your account with AFNI, INC..

Keep in mind, we monitor all accounts on your credit report, not just the ones you have with Chase.

#### INFORMATION FOUND

Lender: AFNI, INC. ⓘ

Account number: 108528...

Date status reported: 01/15/2023





Office Address:  
1310 Martin Luther King Drive  
PO Box 3517  
Bloomington, IL 61702-3517  
Monday – Friday 7am-7pm Central

Contact Information  
www.afnicollections.com  
(877) 284-4245

<b>WHAT IS MY ACCOUNT INFORMATION?</b>
Creditor: AT&T
Creditor Account: 512188088713
Afni, Inc. Account: 085284940-01
BALANCE DUE: \$2,684.26

January 16, 2023

Collection Notice

**GUY GIANCARLO:**

We are making another attempt to contact you in regards to the past due charges owed to AT&T. In an effort to assist you, we are willing to accept \$2,013.20 to resolve your account. Once you pay this discounted amount, your account will be closed and marked settled in full with Afni, Inc. and AT&T.

**\*\*\*Discounted Offer: \$2,013.20\*\*\***

<b>HOW CAN I MAKE PAYMENT?</b>
Afni accepts payment made via check, money order, check by phone or credit card.
<input type="checkbox"/> Pay online at www.afnicollections.com.
<input type="checkbox"/> Call (877) 284-4245.
<input checked="" type="checkbox"/> Mail in payment using payment stub below.

We are committed to helping you resolve your debt. We have many payment options that may meet your individual needs, please call us at (877) 284-4245 to discuss.

If information about this account has been furnished to the credit reporting agencies, you may submit a dispute about the information furnished to PO Box 3787, Bloomington, IL 61702. No payments should be sent to this address.

If you feel you are or have been a victim of Theft of Identity, please call AT&T for Wireline at 1-866-718-2011 and for Mobility 877-844-5584.

**\*\*\*Additional Disclosures Below. Please Review\*\*\***  
*(Additional disclosures may also be printed on the back of letter.)*

In accordance with the Fair Debt Collection Practices Act, 15 U.S.C. § 1692 et seq., Afni is prohibited from engaging in abusive, deceptive, and unfair debt collection efforts, including but not limited to: (i) the use or threat of violence; (ii) the use of obscene or profane language; and (iii) repeated phone calls made with the intent to annoy, abuse, or harass.

If a creditor or debt collector receives a money judgment against you in court, state and federal laws may prevent the following types of income from being taken to pay the debt:

1. Supplemental security income, (SSI);
2. Social security;
3. Public assistance (welfare)
4. Spousal support, maintenance (alimony) or child support;
5. Unemployment benefits;
6. Disability benefits;
7. Workers' compensation benefits;
8. Public or private pensions;
9. Veterans' benefits;
10. Federal student loans, federal student grants, and federal work study funds; and
11. Ninety percent of your wages or salary earned in the last sixty days.





Guy Giancarlo <guycgiancarlo@gmail.com>

**Afni, Inc. acct#085284940-1**

1 message

**Recovery Team** <RecoveryTeam@afni.com>  
To: Guy Giancarlo <guycgiancarlo@gmail.com>

Tue, Jan 17, 2023 at 2:29 PM

Dear Guy,

Thank you for your inquiry. We have received your dispute and are investigating. We will contact you in writing via mail with the results.

**Recovery Team** | Receivables Management

.....  
Afni, Inc.  
1310 Martin Luther King Drive  
Bloomington, IL 61701  
e. recoveryteam@afni.com  
www.afnicollections.com

Hours: Monday through Friday, 7am-7pm CST

This communication is from a debt collector. If this message is in relation to the collection of the debt, any information obtained will be used for that purpose. We are required under state law to notify consumers of the following rights. This does not mean that there are more or less rights afforded to a consumer in another state. This list does not contain a complete list of the rights consumers have under federal or state law.

All conversations with Afni may be recorded.

California

For requests regarding Cal. Civ. Code 1798.130(a) please call toll free number 1-877-352-0497. You can also visit our website to review our privacy policy at [afnicollections.com/privacy-policy](http://afnicollections.com/privacy-policy).

Colorado

Local Colorado Office: 1776 South Jackson Street, #900, Denver, CO 80210-3808, Phone 720-826-9191

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Connecticut	This collection agency is licensed in Connecticut, License Number: CCA-939588
Massachusetts	<p>Notice of Important Rights:</p> <p>You have the right to make a written or oral request that telephone calls regarding your debt not be made to you at your place of employment. Any such oral request will be valid for only ten days unless you provide written confirmation of the request postmarked or delivered within seven days of such request. You may terminate this request by writing to the debt collector.</p>
Minnesota	<p>This collection agency is licensed by the Minnesota Department of Commerce. If you believe that you are not the person who owes this debt, please call Afni's Consumer Relations Desk at 1-866-716-1284. If your issue or concern remains unresolved, you may contact the Minnesota Attorney General's Office for assistance at 1-800-657-3787.</p>
New York City	<p>New York City Department of Consumer Affairs license number # 1072175</p> <p>Residents of New York City may call Dave at 1-866-716-1284</p>
North Carolina	<p>North Carolina Department of Insurance Company Number 119501620 (Bloomington, IL)</p> <p>Branch Office of Afni, Inc. addresses: 1 Felicity Center, 127 Don Mariano Marcos Ave., Quezon City, Metro Manila, PH 1126 and 7810 East Escalante Rd, Tucson, AZ 85730. Please do not send correspondence to these addresses. Please mail correspondence to the Bloomington, IL location noted in this letter.</p>
Yonkers, NY	<p>Residents of Yonkers may call Dave at 1-866-716-1284</p>
Tennessee	<p>The collection agency is licensed by the collection service board of the department of Commerce and Insurance.</p>

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**From:** Guy Giancarlo <guycgiancarlo@gmail.com>  
**Sent:** Monday, January 16, 2023 7:09 PM  
**To:** Recovery Team <RecoveryTeam@afni.com>  
**Subject:** [EXTERNAL]Your Reference: 085284940-1

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

I am disputing the debt that Afni, Inc. purports that I owe in its notice to me dated December 5, 2022.

I never had an account with AT&T. I want you to send to me the name and address of the original creditor. I further want you to send to me all documentation supporting your assertion as to my obligation on the debt.

Yours truly,

Guy C. Giancarlo

94 Ava Lane

Buffalo, NY 14221-3033

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DEPT 555  
PO BOX 4115  
CONCORD CA 94524

January 19, 2023

ADDRESS SERVICE REQUESTED



1310 Martin Luther King Drive  
PO Box 3517  
Bloomington, IL 61702-3517



Guy Giancarlo  
94 AVA LN  
BUFFALO NY 14221-3033

RE: AT&T Account No: 512188088713  
Afni Account #: 085284940-01  
Balance Due: \$2,684.26

Dear Guy Giancarlo,

Thank you for contacting Afni, Inc. regarding your account 512188088713.

Afni, Inc. has received your identity theft claim regarding account number 512188088713. For AT&T to address your identity theft claim please fill out the attached declaration. AT&T requires that the person whose name is on the account must sign the declaration. As set forth in the attached declaration, AT&T also requires a clear copy of a valid government/state issued identification and one (1) source of proof of residency from 03-01-2022 to 03-25-2022 within twenty-one (21) days. You may submit the required documentation to:

Mobility:  
Online (preferred):  
<https://link.att.com/theftdocuments>

Or mail to:  
AT&T Mobility Theft of Identity Center  
PO Box 189  
Paramus, NJ 07652-0189

Once all required documentation has been received, AT&T will notify you in writing within 14 business days of the outcome of the investigation.

If you have any questions regarding this matter, please contact Afni, Inc. at (866)352-0458 Monday – Friday 7am-7pm Central. This communication is from a debt collector. All conversations with Afni may be recorded.

If any information regarding this account has been furnished to the credit reporting agencies, it will be requested to be removed.

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In order to resolve your disputed claim, you will need to provide two (2) forms of identification from Category I (if US citizen) or Category II (if non-U.S. citizen) and two (2) forms of proof of residency from Category III. The proof of residency documents must be from **two (2) separate sources** that cover the three (3) months during the following dates (03-01-2022 to 03-25-2022). You may choose from the list of acceptable documentation below:

**NOTE: per AT&T, tax documents are NOT valid proof of residency. If no utilities in name, can submit pay statements, health insurance, auto insurance or a letter from employer verifying your mailing address on file for the time period listed above. Be advised they must receive 2 valid proofs of residency to process the fraud claim on your behalf. Documentation with a general date range are not acceptable.**

Category I - Acceptable forms of identification for U.S. citizen	Category II - Acceptable forms of identification for non U.S. citizen
<ul style="list-style-type: none"> <li>• <b>Driver's License</b></li> <li>• <b>Social Security Card</b></li> <li>• Military ID</li> <li>• Military DD214 Form</li> <li>• Military Selective Service Card</li> <li>• Birth Certificate (not a hospital record)</li> <li>• Native American Reservation ID</li> <li>• Passport</li> <li>• State ID</li> <li>• ID from place of employment</li> <li>• Current Student ID</li> </ul>	<ul style="list-style-type: none"> <li>• Country ID</li> <li>• Driver's License</li> <li>• Military ID</li> <li>• Passport</li> <li>• US Immigration and Naturalization Service (INS) department documents:                             <ul style="list-style-type: none"> <li>• I-94 (Refugee arrival document) form</li> <li>• I-688B (Employment Authorization Card)</li> <li>• I-766 (Employment Authorization approval) document</li> </ul> </li> <li>• US Government issued VISA (Document will state that it is a VISA)</li> <li>• <b>Note:</b> Alien Registration Card is not acceptable.</li> </ul>

Category III - Proof of Residency
<ul style="list-style-type: none"> <li>• Auto insurance policy or statement</li> <li>• Bank statements</li> <li>• Cable bill</li> <li>• Electric bill</li> <li>• Gas bill</li> <li>• Health insurance policy or statement (not a medical card)</li> <li>• Home owner's or renter's insurance policy or statement</li> <li>• Local Telephone bill (not a bill from a long distance provider, cellular or paging company)</li> <li>• Life insurance policy or statement</li> <li>• Mortgage Statement</li> <li>• Pay Statements from employer</li> <li>• Water bill</li> <li>• Prison movement documentation</li> <li>• *Rental/Lease Agreement</li> </ul> <p>*We will not accept rental receipts. The Rental/Lease agreement must be from a management company on an official lease agreement.</p>

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# Identity Theft Victim's Complaint and Affidavit

A voluntary form for filing a report with law enforcement, and disputes with credit reporting agencies and creditors about identity theft-related problems. Visit [identitytheft.gov](http://identitytheft.gov) to use a secure online version that you can print for your records.

**Before completing this form:**

1. Place a fraud alert on your credit reports, and review the reports for signs of fraud.
2. Close the accounts that you know, or believe, have been tampered with or opened fraudulently.

## About You (the victim)

**Now**

- (1) My full legal name: \_\_\_\_\_  
First Middle Last Suffix
- (2) My date of birth: \_\_\_\_\_  
mm/dd/yyyy
- (3) My Social Security number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_
- (4) My driver's license: \_\_\_\_\_  
State Number
- (5) My current street address:  
 \_\_\_\_\_  
Number & Street Name Apartment, Suite, etc.  
 \_\_\_\_\_  
City State Zip Code Country
- (6) I have lived at this address since \_\_\_\_\_  
mm/yyyy
- (7) My daytime phone: (\_\_\_\_) \_\_\_\_\_  
 My evening phone: (\_\_\_\_) \_\_\_\_\_  
 My email: \_\_\_\_\_

Leave (3) blank until you provide this form to someone with a legitimate business need, like when you are filing your report at the police station or sending the form to a credit reporting agency to correct your credit report.

## At the Time of the Fraud

- (8) My full legal name was: \_\_\_\_\_  
First Middle Last Suffix
- (9) My address was: \_\_\_\_\_  
Number & Street Name Apartment, Suite, etc.  
 \_\_\_\_\_  
City State Zip Code Country
- (10) My daytime phone: (\_\_\_\_) \_\_\_\_\_ My evening phone: (\_\_\_\_) \_\_\_\_\_  
 My email: \_\_\_\_\_

Skip (8) - (10) if your information has not changed since the fraud.

The Paperwork Reduction Act requires the FTC to display a valid control number (in this case, OMB control #3084-0047) before we can collect – or sponsor the collection of – your information, or require you to provide it.

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Victim's Name \_\_\_\_\_ Phone number (\_\_\_\_) \_\_\_\_\_ Page 2

**About You (the victim) (Continued)**

**Declarations**

- (11) I  did OR  did not authorize anyone to use my name or personal information to obtain money, credit, loans, goods, or services — or for any other purpose — as described in this report.
- (12) I  did OR  did not receive any money, goods, services, or other benefit as a result of the events described in this report.
- (13) I  am OR  am not willing to work with law enforcement if charges are brought against the person(s) who committed the fraud.

**About the Fraud**

(14) I believe the following person used my information or identification documents to open new accounts, use my existing accounts, or commit other fraud.

Name: \_\_\_\_\_  
                    First                            Middle                            Last                            Suffix

Address: \_\_\_\_\_  
                            Number & Street Name                            Apartment, Suite, etc.

\_\_\_\_\_  
                    City                            State                            Zip Code                            Country

Phone Numbers: (\_\_\_\_) \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_

Additional information about this person: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(14):  
Enter what you know about anyone you believe was involved (even if you don't have complete information).

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Victim's Name \_\_\_\_\_ Phone number (\_\_\_\_) \_\_\_\_\_ Page 3

(15) Additional information about the crime (for example, how the identity thief gained access to your information or which documents or information were used):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(14) and (15):  
Attach additional sheets as needed.

**Documentation**

(16) I can verify my identity with these documents:

- A valid government-issued photo identification card (for example, my driver's license, state-issued ID card, or my passport).  
*If you are under 16 and don't have a photo-ID, a copy of your birth certificate or a copy of your official school record showing your enrollment and legal address is acceptable.*
- Proof of residency during the time the disputed charges occurred, the loan was made, or the other event took place (for example, a copy of a rental/lease agreement in my name, a utility bill, or an insurance bill).

(16): Reminder:  
Attach copies of your identity documents when sending this form to creditors and credit reporting agencies.

**About the Information or Accounts**

(17) The following personal information (like my name, address, Social Security number, or date of birth) in my credit report is inaccurate as a result of this identity theft:

(A) \_\_\_\_\_  
(B) \_\_\_\_\_  
(C) \_\_\_\_\_

(18) Credit inquiries from these companies appear on my credit report as a result of this identity theft:

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

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Victim's Name \_\_\_\_\_ Phone number ( ) \_\_\_\_\_ Page 4

(19) Below are details about the different frauds committed using my personal information.

Name of Institution	Contact Person	Phone	Extension
Account Number	Routing Number	Affected Check Number(s)	
Account Type: <input type="checkbox"/> Credit <input type="checkbox"/> Bank <input type="checkbox"/> Phone/Utilities <input type="checkbox"/> Loan <input type="checkbox"/> Government Benefits <input type="checkbox"/> Internet or Email <input type="checkbox"/> Other			
Select ONE: <input type="checkbox"/> This account was opened fraudulently. <input type="checkbox"/> This was an existing account that someone tampered with.			
Date Opened or Misused (mm/yyyy)	Date Discovered (mm/yyyy)	Total Amount Obtained (\$)	

Name of Institution	Contact Person	Phone	Extension
Account Number	Routing Number	Affected Check Number(s)	
Account Type: <input type="checkbox"/> Credit <input type="checkbox"/> Bank <input type="checkbox"/> Phone/Utilities <input type="checkbox"/> Loan <input type="checkbox"/> Government Benefits <input type="checkbox"/> Internet or Email <input type="checkbox"/> Other			
Select ONE: <input type="checkbox"/> This account was opened fraudulently. <input type="checkbox"/> This was an existing account that someone tampered with.			
Date Opened or Misused (mm/yyyy)	Date Discovered (mm/yyyy)	Total Amount Obtained (\$)	

Name of Institution	Contact Person	Phone	Extension
Account Number	Routing Number	Affected Check Number(s)	
Account Type: <input type="checkbox"/> Credit <input type="checkbox"/> Bank <input type="checkbox"/> Phone/Utilities <input type="checkbox"/> Loan <input type="checkbox"/> Government Benefits <input type="checkbox"/> Internet or Email <input type="checkbox"/> Other			
Select ONE: <input type="checkbox"/> This account was opened fraudulently. <input type="checkbox"/> This was an existing account that someone tampered with.			
Date Opened or Misused (mm/yyyy)	Date Discovered (mm/yyyy)	Total Amount Obtained (\$)	

(19):  
 If there were more than three frauds, copy this page blank, and attach as many additional copies as necessary.  
  
 Enter any applicable information that you have, even if it is incomplete or an estimate.  
  
 If the thief committed two types of fraud at one company, list the company twice, giving the information about the two frauds separately.  
  
*Contact Person:* Someone you dealt with, whom an investigator can call about this fraud.  
  
*Account Number:* The number of the credit or debit card, bank account, loan, or other account that was misused.  
  
*Dates:* Indicate when the thief began to misuse your information and when you discovered the problem.  
  
*Amount Obtained:* For instance, the total amount purchased with the card or withdrawn from the account.

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### Your Law Enforcement Report

(20) One way to get a credit reporting agency to quickly block identity theft-related information from appearing on your credit report is to submit a detailed law enforcement report ("Identity Theft Report"). You can obtain an Identity Theft Report by taking this form to your local law enforcement office, along with your supporting documentation. Ask an officer to witness your signature and complete the rest of the information in this section. It's important to get your report number, whether or not you are able to file in person or get a copy of the official law enforcement report. Attach a copy of any confirmation letter or official law enforcement report you receive when sending this form to credit reporting agencies.

Select ONE:

- I have not filed a law enforcement report.
- I was unable to file any law enforcement report.
- I filed an automated report with the law enforcement agency listed below.
- I filed my report in person with the law enforcement officer and agency listed below.

(20):  
Check "I have not..." if you have not yet filed a report with law enforcement or you have chosen not to. Check "I was unable..." if you tried to file a report but law enforcement refused to take it.

Automated report:  
A law enforcement report filed through an automated system, for example, by telephone, mail, or the Internet, instead of a face-to-face interview with a law enforcement officer.

Law Enforcement Department \_\_\_\_\_ State \_\_\_\_\_

Report Number \_\_\_\_\_

Filing Date (mm/dd/yyyy) \_\_\_\_\_

Officer's Name (please print) \_\_\_\_\_

Officer's Signature \_\_\_\_\_

Badge Number \_\_\_\_\_

(\_\_\_\_) \_\_\_\_\_  
Phone Number

Did the victim receive a copy of the report from the law enforcement officer?  Yes OR  No

Victim's FTC complaint number (if available): \_\_\_\_\_

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Victim's Name \_\_\_\_\_ Phone number (\_\_\_\_) \_\_\_\_\_ Page 6

**Signature**

As applicable, sign and date **IN THE PRESENCE OF** a law enforcement officer, a notary, or a witness.

(21) I certify that, to the best of my knowledge and belief, all of the information on and attached to this complaint is true, correct, and complete and made in good faith. I understand that this complaint or the information it contains may be made available to federal, state, and/or local law enforcement agencies for such action within their jurisdiction as they deem appropriate. I understand that knowingly making any false or fraudulent statement or representation to the government may violate federal, state, or local criminal statutes, and may result in a fine, imprisonment, or both.

\_\_\_\_\_  
Signature Date Signed (mm/dd/yyyy)

**Your Affidavit**

(22) If you do not choose to file a report with law enforcement, you may use this form as an Identity Theft Affidavit to prove to each of the companies where the thief misused your information that you are not responsible for the fraud. While many companies accept this affidavit, others require that you submit different forms. Check with each company to see if it accepts this form. You should also check to see if it requires notarization. If so, sign in the presence of a notary. If it does not, please have one witness (non-relative) sign that you completed and signed this Affidavit. If someone has used your Social Security number (SSN) to get a tax refund or a job, or you suspect your SSN has been stolen, alert the IRS using Form 14039 at [www.irs.gov/pub/irs-pdf/f14039.pdf](http://www.irs.gov/pub/irs-pdf/f14039.pdf).

\_\_\_\_\_  
Notary

**Witness:**

\_\_\_\_\_  
Signature Printed Name

\_\_\_\_\_  
Date Telephone Number

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DEPT 555  
PO BOX 4115  
CONCORD CA 94524



February 16, 2023

ADDRESS SERVICE REQUESTED



1310 Martin Luther King Drive  
PO Box 3517  
Bloomington, IL 61702-3517



Guy Giancarlo  
94 AVA LN  
BUFFALO NY 14221-3033

Afni, Inc. Account #: 085284940-01  
Afni, Inc. Toll Free #: (877) 284-4245  
Creditor: AT&T  
Creditor Account #: 512188088713  
Balance: \$2,684.26

RE: AT&T Account No: 512188088713  
Balance: \$2,684.26

Dear Guy Giancarlo,

Thank you for contacting Afni, Inc. regarding your account 085284940-01.

In response to your claim of identity theft, AT&T has reviewed the information provided. AT&T has determined the account to be valid. Additionally, we have verified with the creditor the following information:

Current Creditor: AT&T  
PO BOX 2767  
HOUSTON, TX 772522767  
Original Creditor: AT&T  
Creditor Account #: 512188088713  
Balance: \$ 2,684.26

This letter serves as verification of the debt.

Although AT&T has determined the account to be valid, Afni will cease communication with you on this account.

If you have any questions regarding this matter, please contact us at (877) 284-4245 Monday – Friday 7am-7pm Central. Note: These are general hours and are subject to change.

This communication is from a debt collector.

All conversations with Afni may be recorded.

Sincerely,  
Afni, Inc.

G



**U.S. District Court**

**New York Western - Buffalo**

Receipt Date: Jan 16, 2024 1:06PM

GUY C GIANCARLO  
 94 AVA LANE  
 AMHERST, NY 14221-3033

Rcpt. No: 100003621

Trans. Date: Jan 16, 2024 1:06PM

Cashier ID: #DS

CD	Purpose	Case/Party/Defendant	Qty	Price	Amt
200	Civil Filing Fee- Non-Prisoner	24-CV-62	1	405.00	405.00

CD	Tender			Amt
PC	Paper Check Conversion	#3076	01/16/2024	\$405.00
Total Due Prior to Payment:				\$405.00
Total Tendered:				\$405.00
Total Cash Received:				\$0.00
Cash Change Amount:				\$0.00

**Comments:** CIVIL CASE OPENING FILING FOR GUY C GIANCARLO 94 AVA LANE AMHERST NY 14221-3033

NOTICE: Payment by check will result in a one-time electronic fund transfer (EFT) from your account. Funds may be withdrawn within 24 hours. Only when the bank clears the check, money order, or verifies credit of funds, is the fee or debt officially paid or discharged. A \$53 fee will be charged for any returned check.

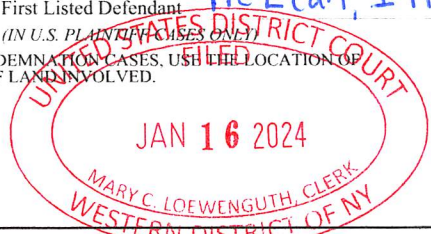
24 CV 62

JS 44 (Rev. 08/18)

CIVIL COVER SHEET

The JS 44 civil cover sheet and the information contained herein neither replace nor supplement the filing and service of pleadings or other papers as required by law, except as provided by local rules of court. This form, approved by the Judicial Conference of the United States in September 1974, is required for the use of the Clerk of Court for the purpose of initiating the civil docket sheet. (SEE INSTRUCTIONS ON NEXT PAGE OF THIS FORM.)

<p><b>I. (a) PLAINTIFFS</b>                  Giancarlo, Guy C. Erie, New York</p> <p><b>(b) County of Residence of First Listed Plaintiff</b>                  (EXCEPT IN U.S. PLAINTIFF CASES)</p> <p><b>(c) Attorneys (Firm Name, Address, and Telephone Number)</b>                  Pro Se</p>	<p><b>DEFENDANTS</b>                  Afni, Inc. McLean, Illinois</p> <p>County of Residence of First Listed Defendant                  (IN U.S. PLAINTIFF CASES ONLY)</p> <p>NOTE: IN LAND CONDEMNATION CASES, USE THE LOCATION OF THE TRACT OF LAND INVOLVED.</p> <p>Attorneys (If Known)</p>
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<p><b>II. BASIS OF JURISDICTION (Place an "X" in One Box Only)</b></p> <p><input type="checkbox"/> 1 U.S. Government Plaintiff</p> <p><input checked="" type="checkbox"/> 3 Federal Question (U.S. Government Not a Party)</p> <p><input type="checkbox"/> 2 U.S. Government Defendant</p> <p><input type="checkbox"/> 4 Diversity (Indicate Citizenship of Parties in Item III)</p>	<p><b>III. CITIZENSHIP OF PRINCIPAL PARTIES (Place an "X" in One Box for Plaintiff and One Box for Defendant)</b>                  (For Diversity Cases Only)</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>PTF</th> <th>DEF</th> <th></th> <th>PTF</th> <th>DEF</th> </tr> </thead> <tbody> <tr> <td>Citizen of This State</td> <td><input type="checkbox"/> 1</td> <td><input type="checkbox"/> 1</td> <td>Incorporated or Principal Place of Business In This State</td> <td><input type="checkbox"/> 4</td> <td><input type="checkbox"/> 4</td> </tr> <tr> <td>Citizen of Another State</td> <td><input type="checkbox"/> 2</td> <td><input type="checkbox"/> 2</td> <td>Incorporated and Principal Place of Business In Another State</td> <td><input type="checkbox"/> 5</td> <td><input type="checkbox"/> 5</td> </tr> <tr> <td>Citizen or Subject of a Foreign Country</td> <td><input type="checkbox"/> 3</td> <td><input type="checkbox"/> 3</td> <td>Foreign Nation</td> <td><input type="checkbox"/> 6</td> <td><input type="checkbox"/> 6</td> </tr> </tbody> </table>		PTF	DEF		PTF	DEF	Citizen of This State	<input type="checkbox"/> 1	<input type="checkbox"/> 1	Incorporated or Principal Place of Business In This State	<input type="checkbox"/> 4	<input type="checkbox"/> 4	Citizen of Another State	<input type="checkbox"/> 2	<input type="checkbox"/> 2	Incorporated and Principal Place of Business In Another State	<input type="checkbox"/> 5	<input type="checkbox"/> 5	Citizen or Subject of a Foreign Country	<input type="checkbox"/> 3	<input type="checkbox"/> 3	Foreign Nation	<input type="checkbox"/> 6	<input type="checkbox"/> 6
	PTF	DEF		PTF	DEF																				
Citizen of This State	<input type="checkbox"/> 1	<input type="checkbox"/> 1	Incorporated or Principal Place of Business In This State	<input type="checkbox"/> 4	<input type="checkbox"/> 4																				
Citizen of Another State	<input type="checkbox"/> 2	<input type="checkbox"/> 2	Incorporated and Principal Place of Business In Another State	<input type="checkbox"/> 5	<input type="checkbox"/> 5																				
Citizen or Subject of a Foreign Country	<input type="checkbox"/> 3	<input type="checkbox"/> 3	Foreign Nation	<input type="checkbox"/> 6	<input type="checkbox"/> 6																				

**IV. NATURE OF SUIT (Place an "X" in One Box Only)** Click here for: Nature of Suit Code Descriptions.

CONTRACT	TORTS	FORFEITURE/PENALTY	BANKRUPTCY	OTHER STATUTES		
<input type="checkbox"/> 110 Insurance <input type="checkbox"/> 120 Marine <input type="checkbox"/> 130 Miller Act <input type="checkbox"/> 140 Negotiable Instrument <input type="checkbox"/> 150 Recovery of Overpayment & Enforcement of Judgment <input type="checkbox"/> 151 Medicare Act <input type="checkbox"/> 152 Recovery of Defaulted Student Loans (Excludes Veterans) <input type="checkbox"/> 153 Recovery of Overpayment of Veteran's Benefits <input type="checkbox"/> 160 Stockholders' Suits <input type="checkbox"/> 190 Other Contract <input type="checkbox"/> 195 Contract Product Liability <input type="checkbox"/> 196 Franchise	<p><b>PERSONAL INJURY</b></p> <input type="checkbox"/> 310 Airplane <input type="checkbox"/> 315 Airplane Product Liability <input type="checkbox"/> 320 Assault, Libel & Slander <input type="checkbox"/> 330 Federal Employers' Liability <input type="checkbox"/> 340 Marine <input type="checkbox"/> 345 Marine Product Liability <input type="checkbox"/> 350 Motor Vehicle <input type="checkbox"/> 355 Motor Vehicle Product Liability <input type="checkbox"/> 360 Other Personal Injury <input type="checkbox"/> 362 Personal Injury - Medical Malpractice	<p><b>PERSONAL INJURY</b></p> <input type="checkbox"/> 365 Personal Injury - Product Liability <input type="checkbox"/> 367 Health Care/ Pharmaceutical Personal Injury Product Liability <input type="checkbox"/> 368 Asbestos Personal Injury Product Liability <p><b>PERSONAL PROPERTY</b></p> <input type="checkbox"/> 370 Other Fraud <input type="checkbox"/> 371 Truth in Lending <input type="checkbox"/> 380 Other Personal Property Damage <input type="checkbox"/> 385 Property Damage Product Liability	<input type="checkbox"/> 625 Drug Related Seizure of Property 21 USC 881 <input type="checkbox"/> 690 Other	<input type="checkbox"/> 422 Appeal 28 USC 158 <input type="checkbox"/> 423 Withdrawal 28 USC 157	<input type="checkbox"/> 375 False Claims Act <input type="checkbox"/> 376 Qui Tam (31 USC 3729(a)) <input type="checkbox"/> 400 State Reapportionment <input type="checkbox"/> 410 Antitrust <input type="checkbox"/> 430 Banks and Banking <input type="checkbox"/> 450 Commerce <input type="checkbox"/> 460 Deportation <input type="checkbox"/> 470 Racketeer Influenced and Corrupt Organizations <input checked="" type="checkbox"/> 480 Consumer Credit <input type="checkbox"/> 485 Telephone Consumer Protection Act <input type="checkbox"/> 490 Cable/Sat TV <input type="checkbox"/> 850 Securities/Commodities/Exchange <input type="checkbox"/> 890 Other Statutory Actions <input type="checkbox"/> 891 Agricultural Acts <input type="checkbox"/> 893 Environmental Matters <input type="checkbox"/> 895 Freedom of Information Act <input type="checkbox"/> 896 Arbitration <input type="checkbox"/> 899 Administrative Procedure Act/Review or Appeal of Agency Decision <input type="checkbox"/> 950 Constitutionality of State Statutes	
REAL PROPERTY	CIVIL RIGHTS	PRISONER PETITIONS	LABOR	PROPERTY RIGHTS	SOCIAL SECURITY	FEDERAL TAX SUITS
<input type="checkbox"/> 210 Land Condemnation <input type="checkbox"/> 220 Foreclosure <input type="checkbox"/> 230 Rent Lease & Ejectment <input type="checkbox"/> 240 Torts to Land <input type="checkbox"/> 245 Tort Product Liability <input type="checkbox"/> 290 All Other Real Property	<input type="checkbox"/> 440 Other Civil Rights <input type="checkbox"/> 441 Voting <input type="checkbox"/> 442 Employment <input type="checkbox"/> 443 Housing/Accommodations <input type="checkbox"/> 445 Amer. w/Disabilities - Employment <input type="checkbox"/> 446 Amer. w/Disabilities - Other <input type="checkbox"/> 448 Education	<p><b>Habeas Corpus:</b></p> <input type="checkbox"/> 463 Alien Detainee <input type="checkbox"/> 510 Motions to Vacate Sentence <input type="checkbox"/> 530 General <input type="checkbox"/> 535 Death Penalty <p><b>Other:</b></p> <input type="checkbox"/> 540 Mandamus & Other <input type="checkbox"/> 550 Civil Rights <input type="checkbox"/> 555 Prison Condition <input type="checkbox"/> 560 Civil Detainee - Conditions of Confinement	<input type="checkbox"/> 710 Fair Labor Standards Act <input type="checkbox"/> 720 Labor/Management Relations <input type="checkbox"/> 740 Railway Labor Act <input type="checkbox"/> 751 Family and Medical Leave Act <input type="checkbox"/> 790 Other Labor Litigation <input type="checkbox"/> 791 Employee Retirement Income Security Act	<input type="checkbox"/> 820 Copyrights <input type="checkbox"/> 830 Patent <input type="checkbox"/> 835 Patent - Abbreviated New Drug Application <input type="checkbox"/> 840 Trademark	<input type="checkbox"/> 861 HIA (1395ff) <input type="checkbox"/> 862 Black Lung (923) <input type="checkbox"/> 863 DIWC/DIWW (405(g)) <input type="checkbox"/> 864 SSID Title XVI <input type="checkbox"/> 865 RSI (405(g))	<input type="checkbox"/> 870 Taxes (U.S. Plaintiff or Defendant) <input type="checkbox"/> 871 IRS—Third Party 26 USC 7609

**V. ORIGIN (Place an "X" in One Box Only)**

1 Original Proceeding   
 2 Removed from State Court   
 3 Remanded from Appellate Court   
 4 Reinstated or Reopened   
 5 Transferred from Another District (specify)   
 6 Multidistrict Litigation - Transfer   
 8 Multidistrict Litigation - Direct File

**VI. CAUSE OF ACTION**

Cite the U.S. Civil Statute under which you are filing (Do not cite jurisdictional statutes unless diversity):  
 15 U.S.C. § 1692 et seq.

Brief description of cause:  
 Fair Debt Collection Practices Act

**VII. REQUESTED IN COMPLAINT:**

CHECK IF THIS IS A CLASS ACTION UNDER RULE 23, F.R.Cv.P.    DEMAND \$ 10,000

CHECK YES only if demanded in complaint:  
 JURY DEMAND:  Yes     No

**VIII. RELATED CASE(S) IF ANY** (See instructions):

JUDGE: \_\_\_\_\_ DOCKET NUMBER: \_\_\_\_\_

DATE: 01/14/2024    SIGNATURE OF ATTORNEY OF RECORD: Guy C. Giancarlo    1/16/24

FOR OFFICE USE ONLY    RECEIPT #    AMOUNT    APPLYING FEE    JUDGE    MAG. JUDGE