## NEW YORK STATE DEPARTMENT OF LAW CHARITIES BUREAU

28 Liberty Street New York, NY 10005 http://www.charitiesnys.com

## BARBARA D. UNDERWOOD Attorney General

## **COMPLAINT/INQUIRY FORM**

The Charities Bureau has jurisdiction to investigate complaints that involve 1) wrongdoing by charitable corporations, trusts or other nonprofit organizations; 2) fraudulent or misleading solicitation and improper expenditure of money for charitable purposes; and 3) improper activities of executors, administrators, trustees and personal representatives responsible for honoring pledges or bequests to a charity. This Bureau generally does not become involved in governance disputes within nonprofit organizations. The Bureau also responds to general inquiries concerning matters within its jurisdiction.

1. Your Contact Inf			
Name:			
Address:			
Home phone numbe	er:	Business phone number:	
Fax number:		Email address:	
2. Give the following complaining or inq		, for the organization and/or i	ndividuals about whom you a
Organization Name:			
Organization Addres	ss:		
Organization phone	number	_: Organization email address: _	
Individual Name	Individual Title/Position	n Individual Address	Individual Phone No.
	-	_	

3. Details of your sheets if necessar		nclude as much specific de	etail as possible- continue on additional
4. If you have an copies of them.	y documents in your possessi	on that relate to your con	nplaint or inquiry, please attach
5. Have you subi	mitted your complaint or inqui its response?	ry to the organization? y	es □ no □
6. Have you sub	mitted your complaint or inqui	ry to any other governme	nt agency? yes □ no □
If "yes," please lis	t the name of the agency, addres	ss, telephone number and r	name of any person contacted.
Agency	Contact Person	Address	Phone No.
	_		
7 1			
	on pending? yes □ no □ ovide the name, title and index n	umber of the proceeding a	nd the name and location of the
	s, addresses and telephone nu of this complaint or inquiry.	mbers of any other indiv	iduals who may have knowledge
Name Address P	hone No.		
	_		
	ny objection to the contents of thient agency? yes □ no □	s complaint or inquiry being	g forwarded to or discussed with
<del>-</del>	any objection to your name and/o erson who is the subject of this co		to or discussed with the
•	e and Address: yes □ no □ e only: yes □ no □		
to protect the pu	neral is not your private attorn blic and charities from mislead r personal legal rights or respo	ding or unlawful practice	
Signature	Print Name	Date	