NEW YORK STATE Office of the Attorney General
BUREAU OF INVESTOR PROTECTION & SECURITIES
120 BROADWAY - 23RD FLOOR _____
NEW YORK, NEW YORK 10271 REQUEST NUMBER

FREEDOM OF INFORMATION REQUEST

I HEREBY APPLY TO INSPECT THE FOLLOWING RECORD:

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_____

_____

_____

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_____

_____	_____
NAME	REPRESENTING
_____	_____
MAILING ADDRESS	TELEPHONE NUMBER
_____	_____
SIGNATURE	DATE

_____

_____

FOR AGENCY USE ONLY

APPROVED _____

DENIED (for reason(s) checked below)
_____ Confidential disclosure
_____ Unwarranted invasion of personal privacy

_____ Record of which this agency is legal custodian cannot be found
_____ Record is not maintained by this agency
_____ Exempted by statute other than the Freedom of Information Act
_____ Request has been referred to department which has custody or control of original record
_____ Part of investigatory files
_____ Other (specify) _____

_____ _____ _____
Signature Title Date

_____
___
_____
___
NOTICE: YOU HAVE A RIGHT TO APPEAL A DENIAL OF THIS APPLICATION TO HEAD OF THIS AGENCY.

_____ _____

NAME BUSINESS ADDRESS

WHO MUST FULLY EXPLAIN HIS REASONS FOR WHICH DENIAL IN WRITING WITHIN SEVEN
WORKING DAYS OF RECEIPT OF AN APPEAL.

I HEREBY APPEAL:

_____ _____

SIGNATURE DATE

V.N.