

**NEW YORK STATE DEPARTMENT OF LAW  
CHARITIES BUREAU**

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

**LETITIA JAMES**  
**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.

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- INSTRUCTIONS:**
1. Please TYPE or PRINT clearly.
  2. Please complete the entire form.
  3. Please enclose copies of any documents relating to this complaint or inquiry.
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**1. Your Contact Information:**

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

Address: \_\_\_\_\_

Home phone number: \_\_\_\_\_ Business phone number: \_\_\_\_\_

Fax number: \_\_\_\_\_ Email address: \_\_\_\_\_

**2. Give the following information, if available, for the organization and/or individuals about whom you are complaining or inquiring:**

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

Organization Address: \_\_\_\_\_

Organization phone number \_\_\_\_\_: Organization email address: \_\_\_\_\_

<u>Individual Name</u>	<u>Individual Title/Position</u>	<u>Individual Address</u>	<u>Individual Phone No.</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**3. Details of your complaint or inquiry** (Please include as much specific detail as possible- continue on additional sheets if necessary).

**4. If you have any documents in your possession that relate to your complaint or inquiry, please attach copies of them.**

**5. Have you submitted your complaint or inquiry to the organization?** yes  no

If "yes," what was its response?

**6. Have you submitted your complaint or inquiry to any other government agency?** yes  no

If "yes," please list the name of the agency, address, telephone number and name of any person contacted.

Agency	Contact Person	Address	Phone No.
_____	_____	_____	_____
_____	_____	_____	_____

**7. Is a court action pending?** yes  no

If "yes," please provide the name, title and index number of the proceeding and the name and location of the court, if available.

**8. List the names, addresses and telephone numbers of any other individuals who may have knowledge of the contents of this complaint or inquiry.**

Name	Address	Phone No.
_____	_____	_____
_____	_____	_____

**9. Do you have any objection to the contents of this complaint or inquiry being forwarded to or discussed with another government agency?** yes  no

**10. Do you have any objection to your name and/or address being forwarded to or discussed with the organization or person who is the subject of this complaint or inquiry?**

Objection to Name and Address: yes  no

Objection to Name only: yes  no

**The Attorney General is not your private attorney but represents the public by enforcing laws designed to protect the public and charities from misleading or unlawful practices. If you have any questions concerning your personal legal rights or responsibilities, you should contact a private attorney.**

_____ Signature	_____ Print Name	_____ Date
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