

**NEW YORK STATE ATTORNEY GENERAL
CHARITIES BUREAU**

**REQUEST FOR EXPEDITED REVIEW OF TRANSACTIONS AND
OTHER MATTERS FOR FINANCIALLY TROUBLED ORGANIZATIONS**

**(This form must be included when papers are
submitted to the Attorney General for review)**

DATE:

PETITIONER CORPORATION:

NAME OF ATTORNEY:

ATTORNEY'S TELEPHONE NUMBER:

TYPE OF TRANSACTION:

DEADLINE:

REASON EXPEDITED REVIEW IS NECESSARY: