

**CHAR017**

**Charitable Solicitation  
For the Relief of an Individual**

**STATE OF NEW YORK  
DEPARTMENT OF LAW  
CHARITIES BUREAU - REGISTRATION SECTION  
28 LIBERTY STREET  
NEW YORK, NY 10005  
www.charitiesnys.com**

This form may be filed with the Charities Bureau, PRIOR to solicitation, by the principal person requesting contributions for the relief of an individual, to specify one or more secondary beneficiaries who shall be entitled to the contributions in the event circumstances change, rendering it impossible or impractical to use any or all of the money collected for the primary beneficiary.

The designation of secondary beneficiaries shall be ineffective unless this form has been filed and unless at the time of solicitation, each person being solicited is informed of such filing by the person(s) requesting contributions (see disclosure requirement: paragraph (c), subdivision 2 of section 172-A of the Executive Law). If no secondary beneficiary is designated, filing this form is allowed, but such disclosure is not required.

This form may only be used if all money collected for the relief of any individual, without any deductions whatsoever, is paid to or for the benefit of the primary beneficiary within 60 days of its receipt.

For further information concerning solicitation for the relief of an individual, consult Executive Law Section 172-A, subdivision 2.

**Principal Person Requesting Contributions:**

NAME: \_\_\_\_\_  
*Last First M.I. Phone No.*

ADDRESS: \_\_\_\_\_  
*Number & Street City State Zip*

**Purpose of the Solicitation:**

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

**Primary Beneficiary:**

NAME: \_\_\_\_\_  
*Last First M.I. Suffix*

ADDRESS: \_\_\_\_\_  
*Number & Street City State Zip*

**Secondary Beneficiary, if any (no more than three may be designated):**

	<i>Name</i>	<i>Address</i>
1.	_____	_____
2.	_____	_____
3.	_____	_____

**Signature of principal person requesting contributions:**

X \_\_\_\_\_ Date \_\_\_\_\_