



FRAUD, WASTE OR ABUSE REPORTING FORM

To submit this complaint electronically, download the form, enter the information requested below and click the "Submit to NYSTRS" button.

Submit to NYSTRS

To file a complaint anonymously, print this form and mail it to:
Investigations Unit, P.O. Box 11535, Albany, NY 12211-0535

Date:	
Type of Activity:	
Please describe the alleged fraudulent, corrupt, mismanaged, abusive or wasteful activity in as much detail as possible:	
Have you reported this activity to any other entity? If yes, please indicate the entity(ies). <input type="checkbox"/> Yes <input type="checkbox"/> No	
If known, please provide the following information:	
Date(s) of occurrence	Is the activity still going on? <input type="checkbox"/> Yes <input type="checkbox"/> No
Who is allegedly responsible for perpetrating the activity: Name(s)	
Address(es)	
Phone Number(s)	
Place(s) of Work	
What records or files contain documentation to substantiate this allegation?	

Contact Information (optional):

Name	
Address	
Home Phone	Cell Phone
E-mail	