

NOTE: THIS IS A SAMPLE DOCUMENT ONLY. PLEASE BE SURE TO HAVE THE NOTARY PUBLIC INCLUDE A COMPLETE ACKNOWLEDGMENT OF THE SIGNATURES ON THE PETITION, INCLUDING AN ACKNOWLEDGMENT STATEMENT SUCH AS THAT ON PAGE 2 AND HIS/HER STAMP AND SIGNATURE. IF THE SIGNATURES ARE ACKNOWLEDGED SEPARATELY, EACH ACKNOWLEDGMENT MUST INCLUDE THE STATEMENT, STAMP AND SIGNATURE.

S A M P L E

PETITION FOR DISSOLUTION

TO THE REGENTS OF THE UNIVERSITY OF THE STATE OF NEW YORK:

We, the undersigned, being (*EITHER the president and secretary [or any two officers], OR three-fourths of the trustees*) of _____ hereby petition the Board of Regents for an order for the voluntary dissolution of the corporation pursuant to the provisions of Education Law §219 and do hereby make, sign and acknowledge the following statements:

1. The name of the corporation is _____.
2. (*A provisional OR an absolute*) charter was granted to this corporation on ____, which provisional charter was (*list history of charter, amendments, extensions, absolute charter; if none, please indicate*).
3. The purposes of the corporation are: (*list the purposes as stated in the charter and any subsequent amendments*)
4. The voluntary dissolution of the corporation is being sought because (*provide an explanation of why dissolution is being sought*).

5. Approval of the filing of the library's (successor corporation [provide name of successor corporation] and/or name of the library system) is hereby requested.

6. The corporation is a non-stock corporation and therefore has no shares of stock to be surrendered for cancellation (*OR, The corporation is a stock corporation, and all shares of its stock have been surrendered for cancellation...*).

7. The corporation has the following assets remaining for distribution (*give a summary of the remaining assets and the approximate value of those assets*) OR The corporation has no assets remaining for distribution.

8. (*If the corporation has assets remaining for distribution, include the following*) The trustees hereby request Regents approval of the distribution of the corporation's assets to (*name(s) of receiving charitable corporation(s) with educational purposes*).

9. The names and post office addresses of the entire board of trustees of the corporation are as follows: (*give names in full, using given first name and middle initial in all cases, including married women; if necessary, attach a separate sheet*)

IN WITNESS WHEREOF we have made, signed and acknowledged this application on the day of _____ 20 __.

Signature _____
Typed name/title/address of officer

Signature _____
Typed name/title/address of officer

OR

Signatures of three-fourths of all the trustees listed above. NOTE: in this case, no President and Secretary's certificate of the board resolution is necessary.

STATE OF NEW YORK

COUNTY OF

On this ____ day of ____ 20__ before me personally came [name] and [name] OR the _____(insert the number of trustees who have signed above) trustees listed above, to me known to be the persons described in and who executed the foregoing application, and they severally duly acknowledged to me that they executed the same.

(Typed name and/or stamp and signature of notary public)