

Agency Waste Form

Fact Sheet & Request for Assistance

Please Be as Specific As Possible

Dept. /Agency Name: _____

Division #: _____

Contact Person to Help Us Investigate Waste: _____

Phone #: _____

Type of Waste:

(1) Contracting Out/Privatization

(2) Fraud

(3) Misuse of Funds

(4) Needless Purchases

(5) Other _____

Name of Contractor _____

Brief Description of Waste (e.g. excessive cost, poor quality of work): _____

How was waste discovered: _____

Estimate of Dollars Wasted: _____

Number of PEF members and titles affected: _____

If you need the assistance of the Privatization Unit indicate the type of assistance you need: _____

Please complete and mail to:
PEF Research Department
1168-70 Troy-Schenectady Road P.O. Box 1214
Albany, New York 1212-2414