



WRITTEN CONSENT FORM
 Commercial Co-Venturer and Charitable Organization
 (Haw. Rev. Stat. § 467B-5.5)

Date:	
Name of Charitable Organization and FEIN:	
Address of Charitable Organization:	
Name of Commercial Co-Venturer:	
Address of Commercial Co-Venturer:	
Email Address of Commercial Co-Venturer:	
Commencement Date of Charitable Sales Promotion:	End Date of Charitable Sales Promotion:
Description of Goods or Services Offered to the Public:	Geographic Region/Location of Promotion:
Manner in which the name of the Charitable Organization will be used (including any representation to be made to the public as to the amount or per cent per unit of goods or services purchased or used that is to benefit the charitable organization):	
<i>(Use separate sheet if necessary)</i>	
Does the Charitable Organization have the right to a final accounting? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Is the Charitable Organization registered to solicit contributions in Hawaii with the Hawaii Attorney General's Office? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Date when final benefit will be conferred on charitable organization:	Manner in which final benefit will be conferred on charitable organization?
Signature of Officer of Charitable Organization:	Signature of Officer of Commercial Co-Venturer:
_____	_____
Print Name: _____	Print Name: _____
Title: _____	Title: _____

INSTRUCTIONS

PLEASE RETURN COMPLETED FORM VIA MAIL/FACSIMILE TO: Department of the Attorney
General/Tax Division, 425 Queen Street, Honolulu, HI 96813. Facsimile: (808) 586-8116.