# TAX AND CHARITIES CONSENT FORM: AUTHORIZED SIGNER INFORMATION & INSTRUCTIONS

#### INFORMATION REQUIRED FROM AUTHORIZED SIGNER:

Authorized Signer's First Name:

The authorized signer will receive an email from the Tax and Charities Division asking to verify information regarding the fundraiser event (i.e. date of fundraiser, type of goods and services provided, donation amount, organization FEIN#, etc.) as provided on the online consent form.

The authorized signer will verify the information on the consent form and will do so on behalf of and with consent from the organization. Also, the information required from the authorized signer needs to be legible, as it will be transcribed onto the online consent form. Please return the information below typed and not handwritten.

Sharilyn
Authorized Signer's Last Name:
Yee
Authorized Signer's Title:
Fundraising Committee
Authorized Signer's Email:
sharilynyoung@gmail.com
Authorized Signer's Phone Number (Format (###-####)
(808)-347-0895

#### **INSTRUCTIONS FOR AUTHORIZED SIGNER:**

Please check your inbox and look for an email from noreply@ehawaii.gov regarding the California Pizza Kitchen Fundraiser. It will include a link, click on it, and review the information to make sure everything is correct. Once you have verified the information, please electronically sign it at the bottom of the page. When this is completed, a confirmation email from the Tax and Charities Division approving our Commercial Co-Venture (CCV) partnership will be sent out. Once the Tax and Charities Division accepts the CCV partnership, California Pizza Kitchen will be able to provide the flyer template for distribution.

The Tax and Charities Division will only approve fundraisers that are submitted and completed, **no less** than 10 days prior to the fundraiser event, so please electronically sign the online consent form as soon as possible. CPK will be subject to a fine if we fail to comply with the 10-day timeframe. If the forms are not submitted in time or if the charitable organization does not electronically sign within the 10-day timeframe, the fundraiser event will not happen and must be pushed to a later date.

# FUNDRAISER GUIDELINE FORM

### PLEASE PRINT INFORMATION CLEARLY



California Pizza Kitchen (CPK) partners with non-profit schools and 501c organizations. We give priority to groups that focus on children, education and youth sports.

NAME OF NON-PROFIT ORGANIZATION: Hawaii Rush 2010						
	Boys					
DAY & DATE OF EVENT: Monday, June 10,	2019					
(Event shall be no sooner than four (4) weeks	after the date this form is signed).					
Valid at the participating California Pizza	Kitchen restaurant located at:					
Mililani,=Pearlridge, and Ala Moar	<del></del> aa & Kapolei					
2.4 Not got approval						

### Organization responsibilities:

- To provide and sign a W-9 before the event. The check will be made out to the name and address on the W-9.
- To use the master flyer that CPK has created to get the word out about their fundraiser.
- To print and distribute flyers to organization contacts and database at their own expense.
- Not to create any additional materials with the use of the CPK name and/or logo or release information to the press without approval from a California Pizza Kitchen Marketing Representative.
- Not to distribute flyers inside or near the restaurant.
- Not to leave flyers in public areas (i.e. on parked cars, in mall food court), but instead give to actual supporters of the organization.

<sub>Name:</sub> Sharilyn Yee	Telephone #: (808)
Signature:	347-0895 E-Mail Address: sharilynyoung@gmail.com
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(CPK Manager, please keep copy of comple	eted form for you records).



#### FUNDRAISER PROGRAM AGREEMENT

California Pizza Kitchen ("CPK") can help your non-profit organization with fundraising. Here's how it works:

When your supporters present a flyer provided by CPK on the designated date and at the designated CPK location, 20% of their net food and beverage purchases will be donated back to your designated charitable organization. Tax, gratuity, gift card and retail purchases excluded. Within 60 days, CPK will issue your organization a check with the charitable proceeds. You have a right to a final accounting and upon request, CPK will provide you with an accounting statement for your records.

CPK will provide your organization with an electronic copy of a flyer that you can use to promote the event. Your organization is responsible for promoting the fundraising program and for producing and distributing the flyers to your supporters pursuant to the terms in the agreement.

In order to participate, you must be an IRS 501c organization and either your organization must be registered with the Attorney General's Office or your organization must provide evidence that it has been granted an exemption from registration. If required, you agree to register with or obtain an exemption from the state Attorney General's Office prior to the date of the event.

To sign up, please complete the following information and the agreement at the end of this document:

Name of Organization Hawaii Rush Soccer Club
Activity of Organization (i.e. school club, band) Soccer
Name of Contact Person_Sharilyn Yee
Address of Organization 98-019 Kamehameha Highway #203A
City, State Zip Aiea, Hawaii 96701
Address to which fundraiser check will be mailed (if different from above) 91-1005 Kaipalaoa Street #104
City, State Zip Ewa Beach, Hawaii 96706
Daytime Phone (808)-347-0895

#### **AGREEMENT**

Hawaii Rush Soccer Club 2010 Boys ("Organization") and CPK agree as follows:

The fundraiser will take place on <u>06/10/2019</u>. Flyers presented before or after the listed date/s will not be accepted.

The flyers will be accepted at CPK's Mililani & Kapolei [location] only.

#### Organization agrees:

- To provide and sign a W-9 before the event. The check will be made out to the name and address on the W-9.
- To use the master flyer that CPK has created to get the word out about their fundraiser.
- To print and distribute the CPK flyer to the Organization's supporters at their own expense.
- Not to create any additional materials which use CPK's name and/or logo or release information to the press without approval from a CPK Marketing Representative.
- Not to distribute the CPK flyer inside or near the restaurant and not to leave flyers in public areas (i.e. on parked cars, in a mall food court), but instead give the CPK flyer to actual supporters of the Organization. Event proceeds will be void if flyers are distributed in or near the restaurant or left in public areas.

#### CPK agrees:

- To provide an electronic copy of the fundraising flyers to the Organization to promote the event.
- To donate to the Organization 20% of net food and beverage purchases from customers who present the flyer (physical or digital copy) at the designated location and on the agreed date (tax, gratuity, gift card and retail purchases excluded).
- To keep an accurate record of sales that will be the basis for the amount to be paid out to the Organization.
- To present the check to the Organization at the end of each 60 day period.

CPK reserves the right to feature your Organization's fundraiser (either individually or collectively with other fundraisers) as part of its promotional materials. By signing this agreement, you consent to CPK identifying your Organization by name, describing the fundraiser, including the percent or amounts donated to your Organization, and/or using photographs or other recordings of your fundraiser

	Is the Organization registered to solicit contributions in Hawaii with the Hawaii General's Office? (indicate)
	X Yes No.
	no, has your Organization been granted an exemption from registration by the attorney General's Office
_	Yes No.
fr h	your Organization is not registered and has not been granted an exemption rom registration by the Attorney General's Office, please go to http://hawaii.gov/ag/charities to register or obtain an exemption. Attached for our convenience is the official Hawaii form to obtain an exemption from

registration. If you have any questions please contact the Attorney General's

Please indicate your agreement to the above terms by signing below.

Office at (808) 586-1480 for assistance.

Name: Emi Kiyoi

Telephone #: 808-382-6717

E-Mail Address: emiaiko347@gmail.com

Signature: Gm Kiypi

Ami kriva

Name: Sharilyn Yee

Telephone #: 808-347-0895 E-Mail Address: Sharilyn Yee

# **CALIFORNIA PIZZA KITCHEN**

To be signed by the responsible manager.

Name: Dannah Gonzales
Store Location: Mililani #325

Telephone #: 808 674 7667
Signature

\*\* Please maintain a copy of the agreement and the final accounting for three years. Send a completed copy of the agreement to your marketing representative.



## **Request for Taxpayer Identification Number and Certification**

Give Form to the requester. Do not send to the IRS.

	Name (as shown on your income tax return) Hawaii Rush Soccer Club															
2.	Business name/disregarded entity name, if different from above															
								Exemptions (see instructions):								
Check appropriate box for federal tax classification:    Check appropriate box for federal tax classification:					, ,											
Check appropriate box for federal tax classification:  Individual/sole proprietor  Check appropriate box for federal tax classification:  Individual/sole proprietor  Corporation  Socretarion  Partnership  Trust/estate  Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership)  Xother (see instructions)  Youth Soccer Organization  Address (number, street, and apt. or suite no.)  98-019 Kamehameha Hwy Suite 203A  City state and ZID code			Exempt payee code (if any)  Exemption from FATCA reporting													
Print c Inst	X Other (see instructions) ► Youth Soccer Organization			С	ode	(if ar	iy) _									
cifi	Address (number, street, and apt. or suite no.)	quester's	nam	name and address (optional)												
be	98-019 Kamehameha Hwy Suite 203A															
e S	City, state, and ZIP code															
See	Aiea, HI 96701															
	List account number(s) here (optional)															
Par Enter	Taxpayer Identification Number (TIN)  your TIN in the appropriate box. The TIN provided must match the name given on the "Name" lin	e So	cial :	secur	ity n	numb	er									
	id backup withholding. For individuals, this is your social security number (SSN). However, for a															
	nt alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other															
	s, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a</i> appage 3.				l											
	· ·	Fn	nnlov	er ide	entif	icati	on ni	ımb	er							
	If the account is in more than one name, see the chart on page 4 for guidelines on whose er to enter.	<u> </u>	T.	7 C. T.	identification number											
	a to onto.	7	4	-	3	0	5	3	8	8	6					
Part	II Certification															
Under	penalties of perjury, I certify that:															
1. The	e number shown on this form is my correct taxpayer identification number (or I am waiting for a n	umber t	o be	issu	ed t	o m	e), ar	nd								
Ser	n not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I holding in the vice (IRS) that I am subject to backup withholding as a result of a failure to report all interest or colonger subject to backup withholding, and															
3. I ar	n a U.S. citizen or other U.S. person (defined below), and															
4. The	FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is	correct														
becau interes genera	cation instructions. You must cross out item 2 above if you have been notified by the IRS that yes you have failed to report all interest and dividends on your tax return. For real estate transactive paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an ally, payments other than interest and dividends, you are not required to sign the certification, but stions on page 3.	ons, iter i individ	n 2 d ual r	does etirer	not nen	app tarr	ly. Fo	or n	iortg nt (IF	age RA), :	and	ng				
Sign Here	7 / //	03/08	/2019													
Gan	NON-PROFIT PARTINER NAME: withholding tax on foreign p	artners'	share	e of ef	fecti	ively	conn	ecte	d inco	ome,	and	l				

#### aenerai mstructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. The IRS has created a page on IRS.gov for information about Form W-9, at www.irs.gov/w9. Information about any future developments affecting Form W-9 (such as legislation enacted after we release it) will be posted on that page.

#### **Purpose of Form**

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, payments made to you in settlement of payment card and third party network transactions, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- 1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
  - 2. Certify that you are not subject to backup withholding, or
- 3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the

4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct.

Note. If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

**Definition of a U.S. person.** For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States.
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.



# **MULTI-STORE FUNDRAISER PROCESS FORM**

All Multi-Store Restaurant fundraisers will require a "Fundraiser Packet" with corresponding documents a minimum of 2-weeks prior to the event date. Home Restaurant coordinates with all participating restaurants to gather settlement reports to confirm ONE check amount.

To prevent delays, the Fundraiser Packet which includes the below documents should be attached and emailed to fundraiser@cpk.com

\*\*\*\* You are no longer required to fax or approve any Fundraiser documents in IQ \*\*\*\*

1. Multi-Store Fundraiser Process Form (this form)

**RESTAURANT INFORMATION:** 

- 2. Fundraiser Agreement (Not required if lead generated by GroupRaise)
- 3. Signed W9 form (Regardless if same Charitable Partner had a previous Fundraiser)

Note: Please allow up to 2 weeks after the event date for your donation check to arrive at the organization address below.

# Date Submitted: \_\_\_\_\_\_Event Date (s): 06/10/2019 Home Rest # / Amp Reg #: 325 GM / Amp Name: Kellie Harris Participating Restaurants Mililani & Kapolei . See attached \_\_\_\_\_\_. Please check the appropriate POS Key used: **Fundraiser 1** (Default) $\sqrt{\phantom{a}}$ , **Fundraiser 2** (Secondary) Donation Amount: (Not Required). Settlement reports are emailed the day after the event. CPK Manager has 48 hours to dispute the donation amount. If there is an exception, amount variance, additional receipts to add, or general inquiry - send an email to fundraiser@cpk.com. If no response, the settlement amount will be used to issue payment. FUNDRAISING ORGANIZATION INFORMATION: Name of Organization: Hawaii Rush Soccer Club Check Payable To: Hawaii Rush Soccer Club Check Memo Line (Optional): Rush 2010 Boys Contact Name: Sharilyn Yee Contact Phone: (808)-347-0895 Contact Email: sharilynyoung@gmail.com Address Donation Check Should Be Sent To: Street: 91-1005 Kaipalaoa Street #104 City: Ewa Beach \_\_\_\_\_<sub>State:</sub> Hawaii Zip: 96706 Updated April 2019