

STATEMENT OF NET SALES REVENUE - ACTIVITY DESKS
(TO BE COMPLETED ONLY IF FILING BOND OR LETTER OF CREDIT)

Access this form via website at: hawaii.gov/dcca/pvl

Name of Activity Desk: _____

Trade Name, if any: _____

"Net Sales" means gross sales minus the commission paid to the activity desk.

Period covered _____ to _____
Month/Year Month/Year

Gross sales _____

Less Commission _____

Total _____ divided by _____
(months covered) (monthly net sales revenue)

I hereby certify that the above is true and correct.

Signature

Title

Date

Subscribed and sworn to before me this
_____ day of _____ A.D. 20 _____.
Notary Public, State of: _____
My commission expires: _____
Print Name: _____

Doc. Date: _____ No. of Pages: _____
Notary name: _____ Circuit Court: _____
Doc. Description _____
Notary Signature: _____
Date: _____

This material can be made available for individuals with special needs. Please call the Licensing Branch Manager at (808) 586-3000 to submit your request.