

**STATE OF HAWAII
TAXATION BOARD OF REVIEW**

TAXPAYER'S NOTICE OF APPEAL

NOTICE is hereby given that _____
(Name of Taxpayer)

whose address is _____

hereby appeals to the above entitled Board of Review from the assessment of

_____ for the period from _____
(Kind of Tax)

to _____ in the amount of \$ _____ as shown on the

Notice of Assessment attached hereto, dated _____ . The grounds of

objection to the assessment are:

Dated: _____, 20____ **Signed** _____

**(If the appeal is signed by a representative, his
address should be shown below his signature.)**