



IDFPR

Illinois Department of Financial and Professional Regulation

Division of Professional Regulation

idfpr.illinois.gov

JB PRITZKER
Governor

MARIO TRETO, JR.
Secretary

CAMILE LINDSAY
Acting Director

Consent for Disclosure Between DFPR and the Cook County Cannabis Development Grant Program

Licensee Name: _____

License Number: _____

BLS Region: _____

This consent form must be completed by a current Principal Officer of the licensee, or a proposed Principal Officer if a conditional licensee.

Name of Principal Officer: _____

Badge Number of Principal Officer (if applicable): _____

I authorize the Illinois Department of Financial and Professional Regulation ("IDFPR") to verify information submitted in or related to the above licensee's application for a conditional adult use dispensing organization license or an adult use dispensing organization license with the Cook County Cannabis Development Grant Program.

I understand that Section 55-30 of the Cannabis Regulation and Tax Act ("CRTA") provides that certain information, including the above licensee's application and its contents, are confidential, but that through this form, I consent to IDFPR verifying the information provided in the licensee's application and its contents with the Cook County Cannabis Development Grant Program.

I understand that a copy of this consent form will be kept on file by both DFPR and the Cook County Cannabis Development Grant Program.

Signature: _____

Date: _____