Request for Denial Information

Note, this form is only valid for information regarding the most recent attempt to purchase and can only be accepted within 30 days of the attempted purchase.

Date _____/_____/_____

Last Name_____

First Name_____ M Initial _____

Date of Birth _____/_____/_____

Phone # _____

Date of Denial _____/_____/_____

Search Request # (if provided by store) _____

Please indicate whether you prefer contact by phone or mail.

- ☐ Phone (best contact number) _____
- ☐ Mail (address) _____

_____

_____

Signature of Purchaser_____

(If submitted via mail or email, please attach a copy of your government-issued photo identification (Driver License or ID Card)