

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))