

Sales Tax Refund Appeal

Date: [Insert Date]

[Recipient Name]

[Recipient Title]

[Recipient Address]

[City, State, Zip Code]

Dear [Recipient Name],

I am writing to formally appeal the denial of my sales tax refund claim submitted on [Insert Claim Submission Date] for the period of [Insert Period]. The refund claim was denied for the following reason: [Insert Reason for Denial].

Upon reviewing the details surrounding my claim, I believe that the decision may have been based on [Insert Explanation or Clarification]. I have attached additional documentation that supports my case, including [List of Attached Documents].

I kindly request that you reconsider my application for a sales tax refund based on the information provided. I appreciate your attention to this matter and look forward to your prompt response.

Thank you for your assistance.

Sincerely,

[Your Name]

[Your Title/Position]

[Your Company Name]

[Your Company Address]

[City, State, Zip Code]

[Your Phone Number]

[Your Email Address]