

[Your Name]
[Your Address]
[City, State, ZIP Code]
[Email Address]
[Phone Number]
[Date]

Kentucky Department of Revenue
Office of Appeals
P.O. Box 181
Frankfort, KY 40602

Re: Appeal of Tax Refund Denial

Tax Year: [Year]

Social Security Number: [xxx-xx-xxxx]

Refund Claim Number: [Claim Number]

Dear Appeals Officer,

I am writing to formally appeal the denial of my tax refund for the tax year [Year]. I received your notification dated [Date of Denial Letter], which stated that my refund claim was denied due to [reason for denial]. [Explain your situation briefly, including any relevant facts and evidence that support your claim.]

According to my records, I believe that I am entitled to this refund because [explain why you feel the decision was incorrect, referencing any documentation or tax laws that support your position]. Please find enclosed [list any supporting documents you are including with the letter].

I request a review of my case and reconsideration of my refund claim. I appreciate your attention to this matter and look forward to your prompt response.

Thank you for your time and assistance.

Sincerely,

[Your Name]

[Your Signature if sending a hard copy]

[Enclosures: Any supporting documents]