

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

Ohio Department of Taxation

Re: Tax Refund Appeal

[Department's Address]
[City, State, Zip Code]

Dear [Tax Official's Name or "To Whom It May Concern"],

I am writing to formally appeal the decision regarding my tax refund for the tax year [Year]. My refund was denied on [date of notice] due to [briefly explain the reason given in the denial notice].

I believe this decision was made in error for the following reasons:

1. [Reason 1: Briefly describe your first point]
2. [Reason 2: Briefly describe your second point]
3. [Additional reasons if necessary]

I have attached the relevant documents that support my appeal, including [list the documents, e.g., tax returns, supporting evidence, etc.].

I kindly request that you review my case and reconsider the decision regarding my tax refund. I appreciate your attention to this matter and look forward to your prompt response.

Thank you for your assistance.

Sincerely,

[Your Name]

[Your Tax Identification Number or Social Security Number] (if applicable)