



908 South 8th Street, Suite 500
Louisville, Ky. 40203

Test User Agreement Refund Form

All refunds are issued within 4-6 weeks of receipt.

All requests must submit this form and the required documentation below to"

Safenetix

908 South 8th Street, Suite 500

Louisville, Ky 40203

or

Fax 502.964.1337 or e-mail certifications@safenetix.com

First Name: _____ M.I. _____ Last Name: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Email Address: _____ Home Phone: _____

Work Phone: _____ Cell/Other Phone: _____

Signature of Requested _____ Date: _____