



**Ohio Department of Public Safety**  
**Division of Homeland Security**  
<http://www.homelandsecurity.ohio.gov>

**REQUEST FOR A REVIEW OF THE DENIAL OF LICENSURE DUE TO THE PROVISION OF MATERIAL ASSISTANCE TO A TERRORIST ORGANIZATION**

In accordance with section 2909.32 of the Ohio Revised Code

This form serves as an official request for a review of the denial of licensure due to the provision of material assistance to an organization on the U.S. Department of State Terrorist Exclusion List.

The Ohio Department of Public Safety, upon the request of any person who has been denied licensure due to the provision of material assistance to an organization on the U.S. Department of State Terrorist Exclusion List, shall review the request within thirty days to determine if the denial of licensure should be voided.

This form must be sent via certified mail to the Ohio Department of Public Safety's Division of Homeland Security.

Ohio Department of Public Safety  
 Division of Homeland Security  
 1970 West Broad Street Rm.422  
 Columbus, Ohio  
 43218-2081

LAST NAME		FIRST NAME		MIDDLE INITIAL
HOME ADDRESS				
CITY		STATE	ZIP	COUNTY
HOME PHONE (    )	WORK PHONE (    )		LICENSE APPLIED FOR	

**COMPLETE THIS SECTION ONLY IF YOU ARE A COMPANY, BUSINESS OR ORGANIZATION**

BUSINESS/ORGANIZATION NAME				
BUSINESS ADDRESS				
CITY		STATE	ZIP	COUNTY
PHONE NUMBER (    )				

**COMPLETE ALL APPLICABLE SECTIONS BELOW**

1. On what date (day, month and year) was material assistance provided?
2. To which organization on the Terrorist Exclusion List was material assistance provided?
3. Describe the material assistance that was provided.

STATE ISSUED LICENSE – CONTINUED

4. For what reason was material assistance provided?

5. Did you know of the organization's terrorism-related activities at the time material assistance was provided?

6. Why do you feel the denial of licensure due to the provision of material assistance is inappropriate or unjust?

X

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date