



**concert  
ticket  
source**

## Refund Request Form

### Customer Information

**Full Name:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Mailing Address:**

Street: \_\_\_\_\_

City: \_\_\_\_\_

State / Province: \_\_\_\_\_

ZIP / Postal Code: \_\_\_\_\_

Country: \_\_\_\_\_

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### Order & Event Details

**Order / Confirmation Number:** \_\_\_\_\_

**Event Name:** \_\_\_\_\_

**Event Date:** \_\_\_\_\_

**Venue:** \_\_\_\_\_

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### Claim Details

**Type of Claim (check one):**

- Non-Delivery of Tickets
- Late Delivery (received too close to event start)
- Invalid / Unusable Tickets
- Event Canceled (Not Rescheduled)

**Detailed Explanation of Your Claim:**

*(Please include as much detail as possible — what happened, when, and how you were affected.)*

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**Supporting Documents**

Please attach copies of any of the following that apply:

- Proof of Purchase / Order Confirmation
- Screenshot or image of delivery attempts
- Written verification from venue of denied entry
- Official event cancellation notice (if applicable)

I have attached supporting documentation

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**Declaration**

I certify that the information provided in this claim is true and accurate to the best of my knowledge. I understand that submission of this form does not guarantee a refund, and that additional documentation may be requested to verify this claim.

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

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**How to Submit**

Please email your completed form and attachments to:

 [info@concertticketsource.com](mailto:info@concertticketsource.com)

—or—

Mail to:

Concert Ticket Source

Attn: Claims Department

1501 Yamato Rd Suite 200

Boca Raton, FL 33431