# Office of Small Business Advocate
# AGENCY AND DEPARTMENT COMMENT FORM

Pursuant to Tenn. Code Ann. Section 8-4-704(2) the role of the Office of Small Business Advocate includes "receive comments from small business owners regarding actions by agency or department employees conducting compliance or enforcement activities." This form should be completed in its entirety if you would like to comment about the actions of an agency or department employee.

**Contact Information**

First Name: _____ Last Name: _____

Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ E-mail: _____

**Comment**

Please provide as much detail as possible in the description of your comment. Please attach additional pages and any documentation as necessary.

Agency/Department Name: _____

Comment: _____

Signature _____ Date _____

**Important**: The Office of Small Business Advocate will not give your name unless you give permission. Can we use your name when talking with the agency about your comment? **Yes** ☐ **No** ☐

COMPTROLLER OF THE TREASURY
OFFICE OF SMALL BUSINESS ADVOCATE
James K. Polk State Office Building, 505 Deaderick Street, Suite 1700, Nashville, Tennessee 37243-1402
Phone: 615-401-7806 – Fax: 615-741-1551
E-mail: smallbusiness.advocate@tn.gov

CT-0451
Revised 6/24/11