

Inquiry About Missing Immunization Records

Date: [Insert Date]

[Recipient's Name]

[Recipient's Title]

[Recipient's Organization]

[Recipient's Address]

[City, State, Zip Code]

Dear [Recipient's Name],

I hope this message finds you well. I am writing to inquire about the immunization records for [Child's Name], who was a patient at [Name of Health Facility/School/Organization]. We are currently in the process of compiling necessary documents for [reason for needing the records, e.g., school enrollment, transition to a new healthcare provider] and have not been able to locate the immunization records.

If you could assist us in retrieving these records or advise us on how to obtain them, it would be greatly appreciated. We are particularly interested in the dates and types of vaccinations received.

Thank you for your attention to this matter. Please feel free to contact me at [Your Phone Number] or [Your Email Address] should you need any further information.

Sincerely,

[Your Name]

[Your Address]

[City, State, Zip Code]