

Formal Request for Drug Sample Return

Date: [Insert Date]

[Your Name]

[Your Position]

[Your Company/Organization Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Recipient Name]

[Recipient Position]

[Recipient Company/Organization Name]

[Recipient Address]

[City, State, Zip Code]

Dear [Recipient Name],

I hope this message finds you well. I am writing to formally request the return of drug samples that were previously provided to your organization for [mention purpose, e.g., clinical trials, evaluations]. As per our agreement dated [insert agreement date], these samples were to be returned upon completion of the [mention specific study/activity].

We would appreciate your assistance in arranging for the return of the following samples:

- [Sample 1: Description]
- [Sample 2: Description]
- [Sample 3: Description]

Please let us know a convenient time for you to arrange the return, or if there are any forms or procedures that we need to complete on our end to facilitate this process. Should you have any questions, feel free to contact me directly at [Your Phone Number] or [Your Email Address].

Thank you for your prompt attention to this matter. We look forward to your reply.

Sincerely,

[Your Name]

[Your Position]

[Your Company/Organization Name]