

Drug Sample Request Clarification

Date: [Insert Date]

[Recipient Name]

[Recipient Title]

[Company/Organization Name]

[Address Line 1]

[Address Line 2]

[City, State, Zip Code]

Dear [Recipient Name],

We are writing to request clarification regarding our recent drug sample request submitted on [Insert Submission Date]. To ensure compliance with regulatory standards, we need further information on the following aspects:

- Details of the samples provided, including batch numbers and expiration dates.
- Confirmation of compliance with [specific regulations or guidelines].
- Additional documentation that supports the legitimacy of the samples.

We appreciate your prompt attention to this matter as it directly impacts our compliance verification process. Please provide the requested information by [Insert Deadline]. If you require any further details from our side, do not hesitate to reach out.

Thank you for your cooperation.

Sincerely,

[Your Name]

[Your Title]

[Your Company/Organization]

[Your Phone Number]

[Your Email Address]