

# Medical Report Requisition for Travel Purposes

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Recipient's Name]

[Clinic/Hospital Name]

[Clinic/Hospital Address]

[City, State, Zip Code]

Dear [Recipient's Name],

I am writing to formally request a medical report for my upcoming travel requirements. As part of my travel preparations, I need to provide documentation of my medical history and current health status.

Please include the following information in the report:

- Summary of my medical history
- Current medications and dosages
- Any ongoing treatments
- Confirmation of my fitness to travel

My travel is scheduled for [Insert Travel Dates], and I would appreciate it if you could expedite this request. If there are any forms or fees required, please let me know, and I will ensure they are addressed promptly.

Thank you for your assistance in this matter. I look forward to your prompt response.

Sincerely,

[Your Name]