

Notification for Return of Health Care Equipment

Date: [Insert Date]

[Recipient's Name]

[Recipient's Address]

[City, State, Zip Code]

Dear [Recipient's Name],

We hope this message finds you well. This letter serves as a formal notification regarding the return of health care equipment that was previously issued to you.

As part of our ongoing efforts to ensure that all equipment is in good working condition and available for other patients in need, we request that you return the following items:

- [Item Description 1]
- [Item Description 2]
- [Item Description 3]

Please return the equipment by [Insert Return Deadline] to the following address:

[Return Address]

If you have any questions or need assistance, please do not hesitate to contact us at [Phone Number] or [Email Address].

Thank you for your cooperation.

Sincerely,

[Your Name]

[Your Title]

[Your Organization]