

# Healthcare License Renewal Alert

Dear [Name],

This is a reminder that your healthcare license is due for renewal on [Renewal Date]. Please ensure that you complete the renewal process before this date to continue practicing without interruption.

To renew your license, please visit [Renewal Link] and follow the instructions provided. If you have any questions, feel free to contact our office at [Contact Information].

Thank you for your attention to this matter.

Sincerely,

[Your Organization's Name]

[Your Organization's Contact Information]