

Vendor Information Verification Request

Date: [Insert Date]

To: [Vendor Name]

Address: [Vendor Address]

City, State, Zip Code: [Vendor City, State, Zip]

Dear [Vendor Contact Name],

We are conducting a routine verification of vendor information as part of our Quality Assurance process. To ensure our records are accurate and up-to-date, we kindly request your cooperation in providing the following information:

- Company Name:
- Contact Person:
- Phone Number:
- Email Address:
- Updated Business License:
- Certifications (if any):
- Banking Information:

Please complete this request and return the information to us by [Insert Deadline Date]. Your prompt response will help us maintain a high standard of quality in our supply chain.

If you have any questions or require further information, please do not hesitate to contact me at [Your Phone Number] or [Your Email Address].

Thank you for your attention to this matter.

Sincerely,

[Your Name]

[Your Position]

[Your Company Name]

[Your Company Address]

[Your Company Phone Number]