

# Request for Laboratory Test Results

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Your Email]

[Your Phone Number]

[Recipient's Name]

[Recipient's Title]

[Laboratory Name]

[Laboratory Address]

[City, State, Zip Code]

Dear [Recipient's Name],

I hope this message finds you well. I am writing to request copies of my previous laboratory test results conducted on [insert dates of tests] at your facility.

The details of my tests are as follows:

- Patient Name: [Your Name]
- Date of Birth: [Your Date of Birth]
- Test Dates: [List of Test Dates]
- Patient ID (if available): [Your Patient ID]

Please send the requested results to my email address or the physical address provided above at your earliest convenience. Should you require any further information to process this request, please do not hesitate to contact me.

Thank you for your attention to this matter.

Sincerely,

[Your Name]