

Request for Family Health Leave Documentation

Date: [Insert Date]

To: [Insert Recipient's Name]
[Insert Recipient's Title]
[Insert Company/Organization Name]
[Insert Address]
[Insert City, State, Zip Code]

Dear [Insert Recipient's Name],

I hope this message finds you well. I am writing to formally request documentation related to my upcoming family health leave. I have submitted my application for leave on [insert application date] and would like to ensure all necessary documentation is completed in a timely manner.

Please let me know what specific documents are needed and any deadlines for submission. I appreciate your assistance in facilitating this process.

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

Sincerely,

[Your Name]
[Your Job Title]
[Your Department]
[Your Contact Information]