

Subject: Appeal for Issuance of Vaccination Certificate Copy

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Date]

[Recipient's Name]

[Recipient's Title]

[Recipient's Organization]

[Organization Address]

[City, State, Zip Code]

Dear [Recipient's Name],

I hope this letter finds you well. I am writing to formally request a copy of my vaccination certificate for [specific vaccine name] which was administered on [date of vaccination] at [location of vaccination].

Unfortunately, I have misplaced my original certificate and require a replacement for [reason, e.g., travel, employment purposes, etc.]. I would greatly appreciate your assistance in this matter.

Enclosed are copies of my identification and any relevant documentation for your reference. If there are any forms or additional information needed, please let me know.

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

Sincerely,

[Your Name]