

# Confirmation of Vendor Qualification Status

Date: [Insert Date]

To: [Vendor Name]

Address: [Vendor Address]

Dear [Vendor Contact Name],

We are pleased to inform you that your company has successfully met our qualification criteria and is now recognized as an approved vendor for [Your Company Name].

Your qualification is effective as of [Effective Date] and will remain in effect until [Expiration Date], provided that all qualification requirements are continuously met.

We appreciate your commitment to maintaining the quality standards expected by our organization. Please feel free to reach out if you have any questions or need further assistance.

Thank you for your cooperation and partnership.

Sincerely,

[Your Name]

[Your Position]

[Your Company Name]

[Contact Information]