Audit Data Collection Request

Date: [Insert Date]
To: [Recipient's Name]
[Recipient's Title]
[Company/Organization Name]
[Address]
Dear [Recipient's Name],
As part of our ongoing risk management process and audit requirements, we are conducting a review of our risk management documentation and related data.
We kindly request your assistance in providing the following information:
 [Specify Document/Information Required 1] [Specify Document/Information Required 2] [Specify Document/Information Required 3]
Please submit the requested data by [Insert Deadline] to ensure timely completion of the audit process.
Thank you for your cooperation and support.
Sincerely,
[Your Name]
[Your Title]
[Your Company/Organization]
[Your Contact Information]