Confirmation of Cooperative Audit Participation

Date: [Insert Date]
To: [Participant's Name]
[Participant's Address]
Dear [Participant's Name],
We are pleased to confirm your participation in the upcoming cooperative audit scheduled for [Insert Audit Date]. Your expertise and insights are invaluable in ensuring a successful audit process.
Please find below the details of the audit:
 Date: [Insert Audit Date] Time: [Insert Start Time] to [Insert End Time] Location: [Insert Location]
We kindly request you to confirm your attendance by [Insert Confirmation Deadline]. Should you have any questions or require further information, please do not hesitate to contact us.
Thank you for your participation and commitment to this important process.
Sincerely,
[Your Name]
[Your Position]
[Your Organization]

[Your Contact Information]