

Immunization Records Request for Travel Documentation

Date: [Insert Date]

To Whom It May Concern,

I hope this message finds you well. My name is [Your Name], and I am writing to formally request a copy of my immunization records for the purpose of travel documentation. I am scheduled to travel to [Destination] on [Travel Date], and the travel requirements necessitate proof of my immunizations.

Please find my personal information below for your reference:

- Full Name: [Your Full Name]
- Date of Birth: [Your Date of Birth]
- Address: [Your Address]
- Contact Number: [Your Phone Number]

If there are any forms or fees required to process this request, please inform me at your earliest convenience. I appreciate your assistance in this matter and look forward to receiving my immunization records promptly.

Thank you for your attention to this request.

Sincerely,

[Your Signature (if sending a hard copy)]

[Your Printed Name]