

Personal Injury Information Gathering

Date: [Insert Date]

To: [Recipient's Name]

[Recipient's Address]

[City, State, Zip Code]

Dear [Recipient's Name],

I hope this message finds you well. I am reaching out to gather information regarding the personal injury incident that occurred on [Insert Date of Incident]. Your cooperation is vital for the necessary documentation and proceedings.

Details Needed:

- Personal Information:
 - Name:
 - Address:
 - Phone Number:
 - Email:
- Incident Details:
 - Date and time of the incident:
 - Location of the incident:
 - Description of how the injury occurred:
 - Witness Information (if any):
- Medical Information:
 - Type of injury:
 - Treatment received:
 - Medical provider's name and contact:

Please provide the requested information by [Insert Deadline] to ensure a timely response. Feel free to reach out if you have any questions or need assistance in gathering this information.

Thank you for your attention to this matter.

Sincerely,

[Your Name]

[Your Title/Position]

[Your Company/Organization Name]

[Your Contact Information]