

**Example Letter of Intent
for Expanded Testing in Healthcare Setting 14-10352
Request for Applications**

Eligible Entity Letterhead

Date

Clark S. Marshall
Expanded HIV Testing Project Coordinator
California Department of Public Health, Office of AIDS
1616 Capitol Ave, Suite 616
Sacramento, CA 95814

RE: Letter of Intent

Title of Applicant's Proposal

Dear Mr. Marshall:

I am submitting this letter to the California Department of Public Health/Office of AIDS of our intention to apply for funding from the Expanded HIV Testing in Health Care Settings Project (PS14-10352) for calendar years 2015, 2016 and 2017. **[Name, Title]** will be our main point of contact for the purposes of the application process and can be reached at:

- Mailing address
- Phone number
- Email address

Thank you for this opportunity to participate in the application process for such as important public health effort.

Sincerely,
Signature of Applicant

Name of applicant
Title
Contact information

