

Instruction: This is a model letter. Adapt to fit your facts and circumstances.

Return address:
Name
Address Line 1
Address Line 2
City, State Zip Code

Date

Name
Company
Address Line
City, State Zip Code

Re: Personnel Emergency Record Form

Dear :

Please fill out the enclosed emergency record form. You may fax, mail, or have the form delivered to our office.

Sincerely,

N A M E

Enclosure