

[Your Name]
[Your Title/Position]
[Your Organization]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
[Date]

[Recipient Name]
[Recipient Title/Position]
[Recipient Organization]
[Recipient Address]
[City, State, Zip Code]

Dear [Recipient Name],

I hope this letter finds you well.

I am writing to request your assistance with the verification of Electronic Health Records (EHR) for [specific purpose, e.g., audit, compliance, patient referral]. Our organization values accuracy and compliance in all aspects of patient care, and your expertise in this area would be invaluable.

We require verification for the following records:

- [Record 1: Patient Name, Date of Service, etc.]
- [Record 2: Patient Name, Date of Service, etc.]
- [Additional records if needed]

If you could provide the necessary verification or guidance on the best approach to obtain it by [specific date], I would greatly appreciate it. Please let me know if you need any further information or documentation from our end to facilitate this process.

Thank you for your attention to this matter. I look forward to your prompt response.

Best regards,

[Your Name]
[Your Title/Position]
[Your Organization]