

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

Dear [Recipient Name],

Subject: Letter of Intent for EHR Verification

I am writing to express our intent to pursue the electronic health record (EHR) verification process offered by [Recipient Organization]. As [Your Organization] strives to enhance our healthcare services, ensuring the integrity and compliance of our EHR system is of utmost importance.

We believe that this verification will not only improve our operational efficiencies but also reinforce our commitment to patient safety and quality care.

We aim to commence the verification process on [proposed start date] and anticipate completing it by [proposed completion date].

Please let us know the next steps required to initiate this process. We appreciate your assistance and look forward to collaborating with your team.

Thank you for considering our request.

Sincerely,

[Your Name]
[Your Title]
[Your Organization]