

[Your Name]  
[Your Address]  
[City, State, Zip Code]  
[Email Address]  
[Phone Number]  
[Date]  
[Recipient's Name]  
[Eye Clinic/Doctor's Office Name]  
[Clinic/Office Address]  
[City, State, Zip Code]

Dear [Recipient's Name],

I am writing to confirm my appointment for an eye examination scheduled for [Date] at [Time]. Please let me know if there are any forms I should complete or if there is anything specific I should bring to the appointment.

Thank you for your assistance. I look forward to my visit.

Sincerely,

[Your Name]