

[Your Name]
[Your Address]
[City, State, ZIP Code]
[Email Address]
[Phone Number]
[Date]

[Recipient Name]
[Position]

Queensland Health
[Address]

[City, State, ZIP Code]

Dear [Recipient Name],

Subject: Appointment Confirmation

I am writing to confirm my appointment scheduled for [Date] at [Time]
with [Doctor's Name/Department] at [Location].

Please let me know if there are any forms or additional information
needed prior to the appointment.

Thank you for your assistance.

Sincerely,

[Your Name]