

<Insert Today's Date>

<Insert Parent/Guardian's Name and Address>

Re: **<Insert Child's Name>**

To Whom It May Concern:

According to our records **<Child's Name>** was a patient of **<Name of Your Practice>**
The Tax Year From The Notice>.

Our records reflect that the child lived at
<Street Address,
City, State,
Zip Code (if the child moved during the year show all addresses)>

from

<Time Period Child Was A Patient>, and that the child received service on
<Insert the Dates You Provided Services During the Tax Year on the Notice>.

Our records also reflect that the child's parent or guardian during this time was
<Parent's or Guardian's Name(s)>.

The child's parent's or guardian's address of record during this time was listed as
<Parent's or Guardian's Address(es)>.

Sincerely,

<Signature of Employee>

<Insert Name>

<Insert Title>

<Insert Phone Number of Employee>