

[Your address here]

Freedom of Information Officer
[Address of Health Service]

Dear FOI Officer / Coordinator,

RE: Freedom of Information Request –:

SURNAME, First Name

Date of Birth

Would you please provide me with copies of all documentation regarding the treatment and care which I received atHospital in [e.g. 2010; can be more specific]?

Should you have any queries regarding this request, please contact me on.... Thank you.

Yours sincerely

Name

Date