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[DATE]

[YOUR NAME]

[YOUR ADDRESS]

[EMPLOYER’S NAME]

[EMPLOYER’S ADDRESS]

**Sent by [POST/EMAIL]**

Dear [EMPLOYER’S NAME]

**RE: MEDICAL CERTIFICATE UNAVAILABLE – [INSERT YOUR NAME]**

You have asked me to get a medical certificate because I was away from work due to sickness or injury.

The days I was away from work were:

[INSERT DATES YOU WERE OFF SICK FOR]

I am unable to supply a medical certificate for these dates because:

[INSERT REASON WHY THE MEDICAL CERTIFICATE IS UNAVAILABLE]

I am happy to answer any questions you have.

Yours faithfully,

[YOUR NAME]

[YOUR PHONE NUMBER]