

**Template of Signed vendor Letter:**

*(EHR Vendor Letterhead)*

**EHR Vendor Letter for EHR Incentive Program**

As of date of this letter, *(Vendor name)* verifies: that the provider: (1) was or is a customer of *(Vendor name)*, and (2) received the Certified electronic health record technology as product from *(Vendor name)*.

<b>Date:</b>	
<b>EHR Provider Name:</b>	
<b>EHR Vendor Name:</b>	
<b>CMS Certified Product Name:</b>	
<b>CMS Certified Product Version Number:</b>	
<b>CMS EHR Certification ID Number</b>	
<b>ONC-ATCB Certification ID Number (if available):</b>	
<b>EHR Vendor Signature</b>	