[Your Name/Organization Name]
[Street Address]
[City, State, Zip Code]
[Phone Number]
[Email Address]

Date: [Current Date]

TO WHOM IT MAY CONCERN

RE: CERTIFICATION OF DOCUMENT ISSUANCE DATE

This letter serves to officially confirm the date of issuance for the following document:

- **Document Type:** [Name of Document, e.g., Certificate, Contract, License]
- **Document Reference Number:** [Reference or Serial Number]
- **Subject/Recipient:** [Name of Individual or Entity]

We hereby certify that the aforementioned document was formally issued and became effective on **[Date of Issuance]**.

This statement is issued upon request of [Name of Requestor] for [Purpose of Verification] purposes. Should you require further authentication or have any questions regarding this record, please contact our office directly.

Sincerely,

[Signature]

[Full Name]
[Job Title/Position]
[Department Name]