## [Date]

[Contact]
[Title]
[Address 1]
[Address 2]
[City, State, Zip Code]

Dear [Partner Contact]:

Thank you for your interest in joining [name of city]'s Syphilis Elimination Effort (SEE). By joining this coalition you will be involved in a unique opportunity to eliminate syphilis - one of our nation's greatest racial disparities in health - from our community.

The [first/next] meeting of the [NAME OF CITY] SEE Community Coalition will be held [DATE, TIME, LOCATION], [(directions to the venue are enclosed)]. This meeting will provide information about the coalition's goals, mission, and activities. At the meeting, we will also set next steps for moving activities forward. It is our sincere hope that you and your organization will share your strengths to support SEE.

As you may know, in 2003, [name of] County was listed as one of 19 sites in the United States that accounted for half of all newly diagnosed cases of syphilis. This represents a burden for our local health system and we now have the opportunity to eliminate syphilis in our area.

Enclosed is a brochure(s) that discusses further how syphilis affects our community and how we can work together to eliminate it. Please contact me at [(xxx) xxx-xxxx] or via e-mail at [xxx@xxxx.xxx] with any questions and to confirm your attendance.

In Health,

[Signature]

[Name] [Title]

[NAME OF CITY] SEE Community Coalition

Enclosure