**Attachment 5.e Reminder E-mail**

Dear <Title V Director>,

On <Day, Month, Year>, you received a survey e-mailed to you on behalf of the Maternal and Child Health Bureau (MCHB) called the Title V Maternal and Child Health State Formula Block Grant Services Survey. The survey and a Frequently Asked Questions document are attached to this e-mail.

Completing this survey is voluntary, and your responses will not impact your participation in the Title V Maternal and Child Health Services Block Grant Program.

We hope that you will complete the survey, and if you do, please return the survey to me via e‑mail by <Day, Month, Year>.

If you have any questions about the survey, please contact me via phone, 919-541-6894, or e‑mail, [mromaire@rti.org](mailto:mromaire@rti.org).

Thank you.

Sincerely,

Melissa Romaire

Melissa Romaire, PhD, MPH

Health Coverage for Low-Income and Uninsured Populations

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