Sample Request Email to Request Participation in the NQDW Quitline Services Survey

Good morning,

**I am writing to request submission of your state’s Quarter 1, YEAR (MONTH 1 – MONTH 31, YEAR) NQDW Quitline Services Survey data via the attached Word document.**  The form is in the same format as the 201X Q4 survey.  Questions 1 – 7 are blank while Questions 8 – 15 are pre-populated based on your last completed Services Survey. You will find specific instructions and explanations of response options on the cover page of the survey.

As a reminder, this survey assesses the services your quitline is offering in your state. The purpose of this survey is to provide data to support ongoing quitline evaluation and the evaluation of CDC’s Prevention and Public Health Fund (PPHF) expenditure on quitlines.

**CDC is asking that this survey be completed by \_\_\_\_\_\_\_\_\_\_.** If, for any reason your state is not able to submit this information in a timely manner or if you have any questions, please let me know.

Thank you,

[Name]

Office on Smoking and Health

Centers for Disease Control and Prevention