

**On the official letterhead (if available)**

To:  
Director of the Consular Department  
Ministry of Foreign Affairs  
of the Kyrgyz Republic  
**Mr. Jumakadyr uulu S.**

From: **[Full name of the organization]**  
Address: **[Specify address]**  
Phone: **[Specify phone number]**

### **Statement Letter**

**[Name of the organization]** is engaged in **[type of activity]**.

**[Name of the organization]** confirms the invitation and kindly requests you to issue an electronic visa of category "Sapar", type "J", for a period of **[specify duration]** for **[specify full name of the foreign citizen (Name, Surname)]**, a citizen of **[citizenship]**, passport No. **[passport details]**, in connection with a visit to the Kyrgyz Republic for **medical purposes**.

The citizen **[Name, Surname]** is seeking medical services at our facility, including **[specify type of services, e.g., specialist consultations, diagnostics, treatment, rehabilitation, etc.]**.

**[Name of the organization]** guarantees that the applicant's stay in the territory of the Kyrgyz Republic is strictly limited to medical purposes and is not related to any employment or entrepreneurial activity, nor aimed at generating income.

The head of **[Name of the organization]** undertakes to ensure the stay of the foreign citizen in accordance with the requirements of the Law of the Kyrgyz Republic "On External Migration".

**[Head of the organization]**  
**[First name, Last name]**

**[signature, stamp]**