

Beneficiary Fee Waiver Request

Date: [Insert Date]

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

[Recipient Name] [Recipient Title] [Organization/Company Name] [Address] [City, State, Zip Code]

Dear [Recipient Name],

I hope this message finds you well. I am writing to formally request a fee waiver on behalf of my family due to a recent emergency that has placed significant financial strain on us.

Due to [briefly describe the family emergency, e.g., medical expenses, loss of income, etc.], we are currently facing unforeseen financial difficulties. The fees associated with [mention the fees in question] are beyond our current means, and we are seeking your assistance during this challenging time.

I have attached any relevant documentation to support my request, including [list any documents, such as medical bills, termination notices, etc.]. I am hopeful that you will consider our situation and grant us a waiver for these fees.

Thank you for your understanding and consideration. I look forward to your positive response.

Sincerely,

[Your Name]

[Your Relationship to the Beneficiary]