

Beneficiary Fee Waiver Request

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Your Email Address]

[Your Phone Number]

To Whom It May Concern,

I hope this message finds you well. My name is [Your Name], and I am [a senior citizen/a veteran] residing at [Your Address]. I am writing to formally request a waiver of any fees associated with [specific service or program, e.g., healthcare, education, etc.].

As a [senior citizen/veteran], I face unique challenges that impact my financial situation, including [mention any specific circumstances, e.g., fixed income, medical expenses, etc.]. I believe that waiving these fees would greatly alleviate my financial burden and allow me to [mention any relevant goals or needs].

I have enclosed the necessary documentation supporting my request, including proof of my [age/military service], which I hope will assist in your review.

Thank you for considering my request for a fee waiver. I appreciate your attention to this matter and look forward to your positive response.

Sincerely,

[Your Name]

[Your Signature (if sending a hard copy)]