

# Debt Consolidation Assistance Application

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Your Email]

[Your Phone Number]

To Whom It May Concern,

I am writing to formally request assistance with debt consolidation. Due to various personal and financial challenges, I find myself overwhelmed with multiple debts, which has made it difficult for me to manage my financial obligations effectively.

After researching potential solutions, I believe that debt consolidation would be a beneficial option for my current situation. I am seeking assistance and guidance on how to proceed with consolidating my debts into a single monthly payment that I can manage more easily.

Please find attached my financial documents, including my income statement, a list of my current debts, and any other relevant information that may assist you in evaluating my request.

I would greatly appreciate the opportunity to discuss this matter further and explore possible options for consolidation. Thank you for considering my application. I look forward to your prompt response.

Sincerely,

[Your Name]