

Request for Fee Payment Extension

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Recipient Name]

[Institution/Organization Name]

[Address]

[City, State, Zip Code]

Dear [Recipient Name],

I am writing to formally request an extension for the payment of my fees due to unforeseen financial hardship I am currently experiencing. [Briefly explain your situation, e.g., loss of employment, medical emergencies, etc.]

Given these circumstances, I would greatly appreciate your understanding and consideration in granting me an extension of [specific period of time you are requesting]. I am committed to fulfilling my obligations and hope to resolve my financial situation soon.

Thank you for considering my request. I look forward to your positive response.

Sincerely,

[Your Name]