

Request for Bill Extension

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Your Email Address]

[Your Phone Number]

[Recipient's Name]

[Recipient's Title]

[Company/Organization Name]

[Company Address]

[City, State, Zip Code]

Dear [Recipient's Name],

I hope this message finds you well. I am writing to formally request an extension on my upcoming bill due for [Specific Service or Account Number]. Due to [brief explanation of your situation], I am unable to make the payment by the original due date of [Original Due Date].

Given these circumstances, I kindly ask for an extension of [number of days/weeks] to allow me the necessary time to manage my payment effectively.

I greatly appreciate your understanding and consideration regarding this matter. Please let me know if you require any further information or documentation to support my request.

Thank you for your attention to this matter. I look forward to your prompt response.

Sincerely,

[Your Name]