

Hardship Debt Offset Appeal

Your Name
Your Address
City, State, ZIP Code
Email Address
Phone Number
Date

Recipient's Name
Collection Agency/Organization Name
Address
City, State, ZIP Code

Dear [Recipient's Name],

I am writing to formally appeal the debt offset decision regarding my account, [Your Account Number]. Due to recent hardships, I am unable to meet the financial obligations as originally agreed.

Over the past [duration of hardship], I have faced [briefly explain the circumstances, e.g., job loss, medical issues]. This situation has severely impacted my financial stability, making it difficult for me to manage my debts.

Given these circumstances, I kindly request a reconsideration of my case. I believe it is in both our interests to work out a manageable plan or explore options for relief that could alleviate my current financial strain.

Thank you for considering my appeal. I am hopeful for your understanding and assistance in this matter. Please feel free to contact me at your earliest convenience to discuss this further.

Sincerely,
[Your Name]