

Financial Assistance Offer for Debt Management

Date: [Insert Date]

[Recipient's Name]
[Recipient's Address]
[City, State, Zip Code]

Dear [Recipient's Name],

We are pleased to inform you that your application for financial assistance has been reviewed and approved. We understand that managing debt can be challenging, and we are dedicated to providing you with the support you need.

As part of this financial assistance offer, we are granting you a total amount of [Insert Amount] to help manage your current debts. This assistance will be provided under the following terms:

- Assistance Amount: [Insert Amount]
- Repayment Period: [Insert Duration]
- Interest Rate: [Insert Rate] (if applicable)
- Payment Schedule: [Insert Schedule]

Please review the terms carefully, and if you agree, sign the enclosed acceptance form and return it by [Insert Deadline Date].

If you have any questions or require further information, feel free to contact us at [Insert Contact Information].

Thank you for your attention to this matter. We look forward to assisting you in achieving financial stability.

Sincerely,

[Your Name]
[Your Title]
[Your Organization]
[Contact Information]

Enclosure: Acceptance Form