

Petition for Short-Term Reduction in Payments

[Your Name]

[Your Address]

[City, State, ZIP Code]

[Email Address]

[Phone Number]

[Date]

[Recipient's Name]

[Recipient's Title]

[Company Name]

[Company Address]

[City, State, ZIP Code]

Subject: Request for Short-Term Reduction in Payments

Dear [Recipient's Name],

I hope this message finds you well. I am writing to formally request a short-term reduction in my payment obligations due to unforeseen medical emergencies that have placed a significant financial burden on me and my family.

On [date of medical emergency], I was faced with a medical situation requiring immediate attention, which has resulted in unexpected medical expenses. These costs have severely impacted my financial stability, making it challenging to meet my current payment schedule.

I kindly ask for your understanding and support during this difficult time. I propose a temporary reduction in my payments for the next [specific time period] as I work to recover both physically and financially. I believe that this adjustment will allow me to regain my stability while ensuring that I can continue to fulfill my obligations moving forward.

Thank you for considering my request. I am happy to discuss this matter further and provide any necessary documentation to support my case. I look forward to your positive response.

Sincerely,

[Your Name]