

# Health Savings Account Contribution Request

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Recipient Name]

[Recipient Title]

[Company/Organization Name]

[Company Address]

[City, State, Zip Code]

## **Subject: Request for Contribution to Health Savings Account**

Dear [Recipient Name],

I hope this message finds you well. I am writing to formally request a contribution to my Health Savings Account (HSA) for the [specify year or period]. As you are aware, HSAs are a valuable resource for managing healthcare expenses, and contributing to my account would greatly assist me in achieving my health-related financial goals.

As per our previous discussions and the provisions of my health plan, I am eligible to receive contributions to my HSA. I would appreciate it if you could process a contribution of [specify amount] at your earliest convenience.

Thank you for your attention to this matter. If you require any further information or documentation, please do not hesitate to reach out to me.

Sincerely,

[Your Name]

[Your Job Title (if applicable)]