## **Financial Hardship Letter Due to Disability**

Date: [Insert Date]

To: [Recipient's Name]

[Recipient's Title]

[Company/Organization Name]

[Address]

[City, State, Zip Code]

Dear [Recipient's Name],

I am writing to inform you of my current financial hardship resulting from my disability. Due to [briefly explain the nature of your disability], I have been unable to maintain regular employment, which has significantly impacted my financial situation.

As a result, I am struggling to manage my monthly expenses, including [list key expenses such as rent, utilities, medical bills, etc.]. Despite my best efforts to seek alternative sources of income, my disability has limited my opportunities and rendered me unable to sustain a stable livelihood.

During this time, I have applied for assistance and explored available resources, but I am still facing challenges in meeting my basic needs. I am reaching out to request [specific type of assistance, reduction in payments, etc.] that could help alleviate my financial strain.

Thank you for taking the time to consider my situation. I appreciate any assistance or guidance you may be able to provide during this difficult time.

Sincerely,

[Your Name]

[Your Address]

[Your City, State, Zip Code]

[Your Phone Number]

[Your Email Address]