Request for Short-Term Financial Assistance Extension

Date: [Insert Date]

[Recipient Name]
[Recipient Title/Position]
[Organization/Company Name]
[Address Line 1]
[Address Line 2]

Dear [Recipient Name],

I hope this message finds you well. I am writing to formally request an extension for my short-term financial assistance originally set to expire on [original expiration date]. Due to [brief explanation of circumstances], I am unable to meet the previously established timeline.

I kindly ask for an extension of [duration of extension needed] to allow me to [reason for needing additional time]. This assistance is crucial for my [mention how it aids your situation].

I appreciate your consideration of my request and look forward to your positive response. Please let me know if you need any further information to assist in this matter.

Thank you for your understanding and support.

Sincerely,
[Your Name]
[Your Contact Information]
[Your Address]