

Request for Personal Tax Exemption for Medical Deductions

Your Name
Your Address
City, State, Zip Code
Email Address
Phone Number
Date

Tax Department
[Tax Office Address]
City, State, Zip Code

Dear [Tax Official's Name or "Sir/Madam"],

I am writing to formally request a personal tax exemption for medical deductions for the tax year [insert year]. Due to [briefly describe medical condition], I have incurred significant medical expenses that exceed the allowable deduction limit.

Enclosed are the necessary documents, including:

- Itemized medical expenses
- Receipts for all medical payments
- Doctor's letters outlining the medical necessity

I hope to resolve this matter promptly and appreciate your consideration of my request. Please feel free to reach me at [Your Phone Number] or [Your Email Address] if you require any additional information.

Thank you for your attention to this matter.

Sincerely,
[Your Name]