Financial Assistance Eligibility Acceptance

Date: [Insert Date]

Recipient Name Recipient Address City, State, Zip Code

Dear [Recipient Name],

We are pleased to inform you that your application for financial assistance has been reviewed and accepted. You are eligible to receive our support based on the information provided.

Details of your financial assistance are as follows:

• Amount Granted: [Insert Amount]

• Assistance Type: [Insert Type]

• Effective Date: [Insert Date]

• Duration of Support: [Insert Duration]

We encourage you to make use of this assistance for your intended purpose. Should you have any questions or require further information, please do not hesitate to contact us at [Insert Contact Information].

Thank you for your continued trust in our services.

Sincerely,

[Your Name] [Your Title] [Organization Name] [Organization Address] [City, State, Zip Code]