

Debt Forgiveness Inquiry

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Your Email Address]

[Your Phone Number]

[Credit Card Company Name]

[Company Address]

[City, State, Zip Code]

Dear [Credit Card Company Name],

I am writing to inquire about the possibility of debt forgiveness for my credit card account with [Account Number]. Due to [explain your financial situation briefly, e.g., unexpected medical expenses, job loss], I have found it challenging to meet my minimum payment obligations.

I am committed to resolving this matter and appreciate any assistance you can provide regarding debt forgiveness options or a modification of my payment terms.

Thank you for considering my request. I look forward to your prompt reply.

Sincerely,

[Your Name]