

Credit Counseling Assistance

Date: [Insert Date]

[Your Name]

[Your Title]

[Nonprofit Organization Name]

[Organization Address]

[City, State, Zip Code]

[Phone Number]

[Email Address]

Dear [Recipient's Name],

We are writing to inform you about the credit counseling assistance services available through [Nonprofit Organization Name]. Our mission is to provide you with the resources and support needed to manage your financial situation effectively.

As part of our program, we offer a variety of services, including:

- Free financial counseling sessions
- Debt management plans tailored to your needs
- Budgeting assistance and financial education workshops

We understand that navigating financial challenges can be overwhelming. Our certified counselors are here to help you explore your options and develop a personalized plan for achieving financial stability.

Please feel free to reach out to us at [Phone Number] or [Email Address] to schedule an appointment or to learn more about our services.

Thank you for considering [Nonprofit Organization Name] as your partner in financial well-being. We look forward to assisting you on your path to financial recovery.

Sincerely,

[Your Name]

[Your Title]

[Nonprofit Organization Name]