

# Refund Request Letter

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Recipient Name]

[Company's Name]

[Company's Address]

[City, State, Zip Code]

Dear [Recipient Name],

I am writing to formally request a refund due to unforeseen health problems that have made it impossible for me to proceed with [details of the service or product, e.g., a trip, event, membership, etc.].

On [insert relevant date], I purchased [item/service] for [insert amount]. Unfortunately, due to [describe health issue briefly], I am unable to utilize the [item/service]. I have attached relevant medical documentation for your review.

Given these circumstances, I kindly request a refund of [insert amount] in accordance with your refund policy. I would appreciate your understanding and prompt attention to this matter.

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

Sincerely,

[Your Name]