

# Refund Request Due to Illness

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Date]

[Company Name]

[Company Address]

[City, State, Zip Code]

Dear [Recipient's Name],

I am writing to formally request a refund for [specific product/service] due to unforeseen circumstances associated with my health.

On [date of illness or event], I was unable to [mention the services or product use] due to my illness. I have attached relevant medical documentation to support my request.

As per your refund policy, I believe I am entitled to a full refund because [brief reason related to the policy].

I kindly ask that you process my request at your earliest convenience. Should you need any further information, please do not hesitate to contact me.

Thank you for your understanding.

Sincerely,

[Your Name]

[Your Signature (if sending a hard copy)]