

Refund Request Due to Health Issues

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Recipient's Name]

[Company's Name]

[Company's Address]

[City, State, Zip Code]

Dear [Recipient's Name],

I am writing to formally request a refund for [Product/Service] purchased on [Purchase Date]. Due to unexpected health issues, I am unable to utilize the [Product/Service] as intended.

[Provide a brief explanation of your health issues and how they prevent you from using the product/service. You may also include any relevant documentation, such as a doctor's note.]

In light of these circumstances, I kindly request a full refund of [Amount] as per your refund policy. I appreciate your understanding and support during this challenging time.

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

Sincerely,

[Your Name]