Request to Forgive Debt

[Today’s Date]

[Creditor Name]
[1 Downtown Street]
[City, Province Postal Code]

**WITHOUT PREJUDICE**

ATTENTION: CREDIT DEPARTMENT
RE: ACCOUNT #123456789 SMITH, JOHN

Dear [Creditor]:

My current income from [CPP, OAS, Disability Pension, Government Assistance, etc.] is not enough for me to be able to make any payments towards my alleged debt at this time. Due to my [medical condition/disability/age], I do not foresee any changes to my financial situation or employment status that would put me in a position to make payments any time in the future.

Please find attached [doctor’s letter(s), counselor’s letter, case worker’s letter of support, description of condition and explanation how this affects your ability to work, any information you feel supports your statement of inability to pay now and in the future], as well as a copy of my [proof of income] and a monthly expense sheet.

I respectfully request that you forgive my alleged debt, as my condition precludes any employment, and my current and future income does not support any debt repayment.

Please respond to my request in writing to the address below at your earliest convenience. Thank you in advance for your understanding of my situation.

This communication is provided solely for the purposes of notifying you to communicate in writing only and does not constitute an acknowledgement of the alleged debt described above.

Sincerely,

[your name]
[complete mailing address]
[phone number]
[account number]