

[Your Name]
[Your Address]
[City, State, ZIP Code]
[Email Address]
[Phone Number]
[Date]
[Recipient's Name]
[Recipient's Title]
[Department of Veterans Affairs/DLA Office]
[Office Address]
[City, State, ZIP Code]

Dear [Recipient's Name],

I hope this letter finds you well. I am writing to request assistance in completing my Disability Living Allowance (DLA) form. As I am keen to ensure that I provide all necessary information accurately, your guidance would be greatly appreciated.

[Briefly explain your situation and any difficulties you are facing with the form. Mention any specific sections where you need help.]

Thank you for your attention to this matter. I look forward to your prompt response.

Sincerely,

[Your Name]

[Your Signature (if sending a hard copy)]