

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
[Date]
[Recipient's Name]
[Recipient's Title]
[Company/Organization Name]
[Address]
[City, State, Zip Code]

Dear [Recipient's Name],

I am writing to request a contribution to my Health Savings Account (HSA) for the [specific time period, e.g., "2023 fiscal year"].

As part of my benefits package, I would like to ensure that my HSA is funded appropriately to help manage medical expenses. I understand that contributions can be made through payroll deductions and I would like to confirm my election to contribute [specific amount] on a [weekly/bi-weekly/monthly] basis.

Please let me know if any additional information is required to process this request. I appreciate your attention to this matter and look forward to your prompt response.

Thank you for your assistance.

Sincerely,

[Your Name]
[Your Job Title/Department, if applicable]