

[Your Name]  
[Your Address]  
[City, State, ZIP Code]  
[Email Address]  
[Phone Number]  
[Date]  
[Recipient Name]  
[Recipient Title/Department]  
[Organization/Clinic Name]  
[Organization Address]  
[City, State, ZIP Code]

Dear [Recipient Name],

I am writing to request financial assistance for my in vitro fertilization (IVF) treatment. Due to [briefly explain your financial situation, e.g., job loss, medical expenses, etc.], I am currently facing challenges in covering the costs associated with this essential medical procedure.

My partner and I have been trying to conceive for [mention duration], and after exploring various options, we believe that IVF is our best chance of expanding our family. Unfortunately, the financial burden of the treatment is beyond our current means.

We have researched potential resources and discovered your organization's commitment to supporting individuals and couples in our situation. Any assistance or guidance you could provide would be invaluable and deeply appreciated.

Thank you for considering my request. I look forward to the possibility of discussing this matter further.

Sincerely,  
[Your Name]