

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
[Date]

PhilHealth Customer Service
Philippine Health Insurance Corporation
[Office Address]
[City, State, Zip Code]

Dear PhilHealth Customer Service,

Subject: Inquiry on PhilHealth Contribution

I hope this letter finds you well. I am writing to inquire about my PhilHealth contributions for the year [Year].

My details are as follows:

- Full Name: [Your Full Name]
- PhilHealth Number: [Your PhilHealth Number]
- Date of Birth: [Your Date of Birth]
- Contact Information: [Your Phone Number and/or Email Address]

I would like to request information regarding my contributions, including:

1. The total amount I have contributed for the specified year.
2. Any discrepancies or issues related to my contributions.
3. The steps I need to take to resolve any potential issues.

Your assistance in this matter is greatly appreciated, and I look forward to your prompt response.

Thank you for your attention to this inquiry.

Sincerely,

[Your Name]