[Your Name] [Your Address] [City, State, Zip Code] [Email Address] [Phone Number] [Date] [Recipient's Name] [Recipient's Address] [City, State, Zip Code] Dear [Recipient's Name], I am writing this letter to provide my perspective on [Veteran's Name]'s condition and to support their claim regarding sleep apnea. I have known [Veteran's Name] for [duration of your relationship] as [describe your relationship, e.g., friend, coworker, family member]. Throughout our time together, I have noticed several significant issues that [Veteran's Name] experiences related to their sleep apnea, including: 1. \*\*Symptoms\*\*: [Describe symptoms you've observed, such as loud snoring, gasping for air during sleep, excessive daytime sleepiness, etc.] 2. \*\*Impact on Daily Life\*\*: [Describe how sleep apnea affects their daily activities, work performance, relationships, etc.] 3. \*\*Seeking Treatment\*\*: [Mention any instances where they sought medical help or used CPAP machines, if applicable.] I believe that [Veteran's Name]'s sleep apnea has had a profound effect on their life, and I fully support their claim. I am happy to provide any further information if needed. Thank you for considering my perspective. Sincerely, [Your Name] [Your Signature (if sending a hard copy)]