

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

[Recipient's Name]
[Recipient's Address]
[City, State, Zip Code]

Subject: Buddy Letter for [Veteran's Name] - Sleep Apnea Documentation

Dear [Recipient's Name],

I am writing this letter to support [Veteran's Name] in their claim for service-connected sleep apnea. I have known [Veteran's Name] for [number] years and can attest to their struggles with this condition.

I met [Veteran's Name] during [context of your relationship, e.g., military service, a specific event, etc.], and I have observed firsthand the impact that sleep apnea has had on their life. [Share specific examples of behaviors or symptoms, such as loud snoring, gasping for air during sleep, excessive daytime fatigue, etc.].

Since [Veteran's Name] returned from service, they have expressed challenges related to [list challenges, such as difficulty concentrating, irritability, or any effects on personal or professional life]. I have witnessed [Veteran's Name] struggle with these symptoms, particularly [provide specific situations or anecdotes].

In my opinion, the issues [Veteran's Name] faces with sleep apnea are not just isolated incidents but rather a consistent pattern that affects their daily life. I believe that their condition is a direct result of [specific details linking the onset of symptoms to their military service, if applicable].

I fully support [Veteran's Name] in their claim for support related to this medical condition. If you require any further information or clarification, please do not hesitate to contact me.

Thank you for your attention to this matter.

Sincerely,

[Your Signature (if sending a hard copy)]
[Your Printed Name]
[Your Relationship to the Veteran]
[Optional: Additional Contact Information]