

[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 to provide information regarding [Veteran's Name] and their condition of sleep apnea, which I have witnessed firsthand.

In our time together, I have observed the following symptoms and challenges associated with [Veteran's Name]'s sleep apnea:

- [Describe specific symptoms, such as loud snoring, gasping for air during sleep, excessive daytime sleepiness, etc.]
- [Provide details about how these symptoms affect daily life, work, relationships, etc.]

Additionally, [Veteran's Name] has shared their struggles with [mention any treatment attempts, such as CPAP usage, lifestyle changes, etc.], which highlight the severity of their condition.

I hope this letter provides additional insight into [Veteran's Name]'s experiences and the impact sleep apnea has on their life.

Sincerely,

[Your Name]
[Your Relationship to the Veteran]