Job Injury Compensation Claim Letter Template

[Your Name]

[Your Address]

[City, State, ZIP Code]

[Email Address]

[Phone Number]

[Date]

[Employer's Name]

[Company Name]

[Company Address]

[City, State, ZIP Code]

Subject: Workers' Compensation Claim for [Injury Date]

Dear [Employer's Name],

I am writing to report a workplace injury that occurred on [Injury Date] while I was performing my duties at [Company Name]. The injury involved [Briefly describe the nature of the injury].

I have attached copies of the medical reports, bills, and other relevant documents related to my treatment and recovery. I request your assistance in initiating a workers' compensation claim to cover my medical expenses and any potential lost wages as a result of this injury.

If there are any additional forms or documentation required, please let me know. You can reach me at [Phone Number] or [Email Address].

Thank you for your attention to this matter.

Sincerely,

[Your Name]