

To:

Subject: Workersâ€™ Compensation Insurance Appeal Letter

Dear

I am writing to formally appeal the decision regarding my workersâ€™ compensation claim, claim number . On , I was injured while performing my job duties as a at . I filed a claim for workersâ€™ compensation benefits, which was denied on .

I believe this decision was made in error. The reasons given for the denial were:

In support of my appeal, I have attached the following documentation:

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I respectfully request that you review my case in light of this information. Please let me know if you require any additional information.

Thank you for your attention to this matter.

Sincerely,