

[Your Name]
[Your Address]
[Your Phone Number]
[Your Email Address]

[Date]

[Court Clerk Name, if known]
Clerk of the Court
[Name of Court]
[Court Address]

RE: [Case Name] | Case Number: [Case Number]

Dear Clerk of the Court,

Enclosed for filing in the above-referenced matter, please find the following documents containing sensitive health information:

- [Name of Document 1, e.g., Medical Evaluation Report]
- [Name of Document 2, e.g., Exhibit A - Hospital Records]

Pursuant to [Cite Specific Court Rule or Statute, e.g., State Rule of Civil Procedure 1.0], I am requesting that these documents be filed **under seal**.

The reason for this request is that these records contain confidential medical information protected by [State/Federal] privacy laws. Public disclosure of these documents would constitute an unwarranted invasion of personal privacy regarding protected health status.

I have also enclosed:

- A redacted version of the documents for the public record (if required).
- A formal Motion to Seal (if required by local rules).
- A self-addressed stamped envelope for the return of conformed copies.

Please process these documents accordingly to ensure they are not accessible to the general public. If there are any issues regarding this filing, please contact me immediately.

Sincerely,

[Your Signature]

[Your Printed Name]