[Date]

[Recipient Name]
[Address Line 1]
[Address Line 2]
[City, State, Zip Code]

Subject: Action Required: Please Update Your Beneficiary Contact Information

Dear [Recipient Name],

We are currently conducting a periodic review of our records to ensure that your beneficiary information is accurate and up to date. Having current contact details for your designated beneficiaries is essential for the timely and efficient processing of benefits in the future.

Please review your current beneficiary designations for your [Account Type/Policy Name] and provide any necessary updates to the following information:

- Full Name of Beneficiary
- Relationship to Account Holder
- Current Mailing Address
- Phone Number
- Email Address
- Social Security Number (if applicable/requested)

How to update your information:

1. Online: Log in to your account at [Website URL] and navigate to the [Profile/Beneficiary] section.
2. By Mail: Complete the enclosed form and return it in the provided prepaid envelope.
3. By Phone: Contact our customer service team at [Phone Number] between [Hours of Operation].

Please submit these updates by [Deadline Date] to ensure your records remain current. If your information is already correct, no further action is required.

If you have any questions regarding this request, please contact us at [Phone Number] or [Email Address].

Thank you for your prompt attention to this matter.

Sincerely,

[Your Name/Department]
[Company Name]