

[Date]

[Beneficiary Name]

[Address Line 1]

[Address Line 2]

[City, State, Zip Code]

Subject: Acknowledgment of Life Insurance Claim - Policy #[Policy Number]

Dear [Beneficiary Name],

We have received your claim for the life insurance benefits regarding the late [Deceased Person's Name]. Please accept our sincere condolences for your loss.

This letter confirms that we are currently reviewing your submission. Your claim has been assigned the following reference number: [Claim Reference Number].

To complete the processing of this claim, we require the following additional documents (if not already provided):

- Certified copy of the Death Certificate
- Original Policy Document (or Lost Policy Affidavit)
- Completed and signed Beneficiary Statement
- Copy of a valid government-issued photo ID

Our standard review process typically takes [Number] business days from the date we receive all required documentation. We will notify you in writing once the review is complete or if further information is needed.

If you have any questions, please contact our Claims Department at [Phone Number] or via email at [Email Address] between [Hours of Operation].

Sincerely,

[Sender Name]

[Title]

[Insurance Company Name]