[Date]

To: [Producer Name]
From: [Compliance Department/Agency Name]
Subject: MANDATORY Anti-Money Laundering (AML) Compliance Training

Dear [Producer Name],

In accordance with federal regulations and our company's internal compliance policy, all insurance producers are required to complete annual Anti-Money Laundering (AML) training. This training ensures that you are equipped to identify and report suspicious activities related to money laundering and terrorist financing.

Training Details:

- **Course Name:** [Training Module Name]
- **Access Link:** [URL Link]
- **Completion Deadline:** [Date]

Instructions:

1. Log in to the portal using your credentials.
2. Complete all sections of the AML module.
3. Pass the final assessment with a minimum score of [Percentage]%.
4. Download and submit your Certificate of Completion to [Email Address].

Failure to complete this training by the specified deadline may result in the suspension of your ability to solicit or place new business until requirements are met.

If you have already completed this training through a third-party provider (such as LIMRA) within the last 12 months, please forward a copy of your certification for our records.

If you have any questions, please contact the Compliance Office at [Phone Number] or [Email Address].

Sincerely,

[Name]
[Title]
[Company Name]