

[Date]

[Client Name]

[Client Address]

[City, State, Zip Code]

Subject: Exclusive Critical Illness Coverage Offer for [Client Name]

Dear [Client Name],

As a valued client of [Company Name], we appreciate the trust you place in us to protect your financial future. Because of your loyalty, we are pleased to present you with an exclusive opportunity to enhance your current protection plan.

While standard health insurance covers medical bills, it often does not account for the indirect costs of a serious illness, such as lost income, travel for treatment, or home modifications. Our Critical Illness Insurance provides a lump-sum cash payment directly to you upon diagnosis of a covered condition, including:

- Cancer
- Heart Attack
- Stroke
- Organ Failure

**Your Exclusive Loyalty Benefits:**

- Reduced monthly premiums available only to existing policyholders.
- Simplified application process with minimal medical questions.
- Immediate coverage options with no waiting period for certain benefits.

This offer is available until [Expiration Date]. We would like to help you ensure that a health crisis does not become a financial crisis.

To view your personalized quote or to activate this offer, please contact your advisor [Advisor Name] at [Phone Number] or visit our secure portal at [Website URL].

Thank you for choosing [Company Name].

Sincerely,

[Sender Name]

[Title]

[Company Name]