

[Company Name]
[Company Address]
[City, State, Zip Code]
[Date]

[Investor Name or Venture Capital Firm]
[Investor Address]
[City, State, Zip Code]

RE: Confirmation of Key Person Insurance Coverage

Dear [Investor Contact Name],

In accordance with the terms of the Seed Funding Series Investment Agreement dated [Date], this letter serves as formal confirmation that [Company Name] has successfully secured and placed Key Person Life Insurance policies for the following essential team members:

- **[Key Person Name 1]**, [Title/Role] - Policy Amount: \$[Amount]
- **[Key Person Name 2]**, [Title/Role] - Policy Amount: \$[Amount]

The policies are held with [Insurance Provider Name] and name [Company Name] as the sole beneficiary. These policies are currently in full force and effect to mitigate operational risks associated with the loss of key leadership during this growth stage.

Copies of the policy declarations and proof of premium payment are attached for your records. We will provide immediate notification should there be any material changes to the status of these policies.

Sincerely,

[Signature]

[Name of Founder/CEO]
[Title]
[Company Name]