[Date]

[Client Name]
[Client Address]
[City, State, Zip Code]

Re: Delivery of Whole Life Insurance Policy #[Policy Number]

Dear [Client Name],

Thank you for choosing [Insurance Company Name] for your financial protection needs. It is my pleasure to deliver your formal Whole Life Insurance policy documents.

This policy provides you with permanent life insurance protection, a guaranteed death benefit, and the accumulation of cash value over time. Please review the enclosed documents carefully, paying close attention to the Policy Schedule, which outlines your coverage amounts, premium payment schedule, and beneficiary designations.

**Next Steps:**

- **Policy Review:** Please verify that all personal information and beneficiary details are correct.
- **Free Look Period:** You have a [Number]-day "Free Look" period from the date of receipt to review the policy. If you are not satisfied for any reason, you may return it for a full refund of premiums paid.
- **Safe Keeping:** Keep this document in a secure location and inform your beneficiaries of its whereabouts.

Should you have any questions regarding your coverage, dividend options, or how to access your policy's cash value in the future, please do not hesitate to contact me directly at [Phone Number] or [Email Address].

We appreciate your trust and look forward to serving your insurance needs for years to come.

Sincerely,

[Agent Name]
[Title]
[Agency/Company Name]

---

**Acknowledgement of Receipt**

I hereby acknowledge that I have received Policy #[Policy Number] on this date.

Signature: _____ Date: _____