[Date]

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

Subject: Delivery of Your Guaranteed Whole Life Insurance Policy - Policy #[Policy Number]

Dear [Policyholder Name],

Thank you for choosing [Insurance Company Name]. We are pleased to deliver your Guaranteed Whole Life Insurance policy documents.

As a guaranteed issue policy, your coverage includes the following features:

- **Guaranteed Acceptance:** No medical exams or health questions were required.
- **Fixed Premiums:** Your monthly premium of $[Amount] is locked in and will never increase.
- **Cash Value:** This policy will build cash value over time.
- **Permanent Protection:** Your coverage will not expire as long as premiums are paid.

Please review the "Graded Death Benefit" section of your policy, which explains the limited benefit period during the first two years of coverage.

Next Steps:
1. Review your policy documents carefully.
2. Store these documents in a safe place.
3. Notify your beneficiaries about this coverage.

You have a [Number]-day "Free Look" period. If you are not satisfied with the policy for any reason, you may return it within this timeframe for a full refund of any premiums paid.

If you have any questions, please contact me directly at [Phone Number] or [Email Address].

Sincerely,

[Agent Name]
[License Number]
[Insurance Company Name]