

Date: [Date]

To: [Insurance Agent/Company Name]

From: [Your Name]

Policy Number: [Your Policy Number]

Subject: Referral for Expanding Family Insurance Coverage

Dear [Agent Name],

I am writing to formally refer [Name of Person Being Referred] for an insurance consultation regarding expanding family coverage.

As [Name of Person Being Referred] is currently [expecting a child / planning to adopt / recently married], they are looking to update their existing policy or start a new plan that includes:

- Maternity and newborn care
- Dependant health coverage
- Increased life insurance limits
- Pediatric dental and vision benefits

I have been satisfied with the service provided to my family, and I believe your expertise would be beneficial to them during this transition. Please contact them at the details provided below to schedule a review of their options.

Referral Contact Information:

Name: [Referral Name]

Phone: [Referral Phone Number]

Email: [Referral Email Address]

Thank you for your assistance in ensuring they receive the best possible coverage for their growing family.

Sincerely,

[Your Signature]

[Your Printed Name]

[Your Phone Number]