

# Beneficiary Information Accuracy Check

Date: [Insert Date]

To: [Beneficiary Name]

[Beneficiary Address]

[City, State, ZIP Code]

Dear [Beneficiary Name],

We are conducting a routine check to ensure that we have your correct and up-to-date beneficiary information on file. Please review the information below and confirm its accuracy:

- Name: [Insert Beneficiary Name]
- Date of Birth: [Insert DOB]
- Relationship: [Insert Relationship]
- Contact Number: [Insert Contact Number]

If any information is incorrect or needs updating, please provide the revised information at your earliest convenience. You can contact us by replying to this letter or calling us at [Insert Phone Number].

Thank you for your prompt attention to this matter.

Sincerely,

[Your Name]

[Your Title]

[Your Organization]

[Contact Information]