

Inquiry for Beneficiary Contact Verification

Date: [Insert Date]

[Your Name]

[Your Position]

[Your Organization]

[Your Address]

[City, State, Zip Code]

[Recipient's Name]

[Recipient's Position]

[Recipient's Organization]

[Recipient's Address]

[City, State, Zip Code]

Dear [Recipient's Name],

I hope this message finds you well. As part of our ongoing efforts to ensure accurate records and effective service delivery, we are conducting a verification of contact information for our beneficiaries.

We kindly request your assistance in verifying the contact details for the following beneficiary:

- Name: [Beneficiary's Name]
- ID Number: [Beneficiary's ID Number]
- Current Address: [Beneficiary's Address]
- Contact Number: [Beneficiary's Contact Number]

Please confirm if the above information is accurate or provide the correct details at your earliest convenience. Your timely response will support our mission to maintain up-to-date and accurate records.

Thank you for your cooperation.

Sincerely,

[Your Name]

[Your Position]

[Your Organization]

[Your Contact Information]