Beneficiary Assignment Acknowledgment

Date:
To:
Address:
Dear [Recipient's Name],
This letter serves as formal acknowledgment of the assignment of benefits to you as the beneficiary for the policy referenced below:
Policy Number:
Insured Party:
Assignee Name:
Effective Date of Assignment:
We acknowledge that you have been designated as the beneficiary for the stated policy and will receive any benefits as assigned in accordance with the terms of the policy.
Please feel free to reach out if you have any questions regarding this assignment.
Sincerely,
[Your Name]
[Your Title]
[Your Organization]
[Contact Information]