

Beneficiary Release Agreement

Date: [Insert Date]

From: [Your Name]
[Your Address]
[City, State, Zip Code]

To: [Beneficiary's Name]
[Beneficiary's Address]
[City, State, Zip Code]

Dear [Beneficiary's Name],

This letter serves as a formal agreement for the release of your rights as a beneficiary as outlined in [insert details of the relevant will or trust]. This release will take effect on [insert effective date].

By signing this agreement, you acknowledge that you waive your right to claim any benefits under the aforementioned will/trust, and you agree to release [Your Name/Trustee's Name] from any obligations that may arise from this matter.

Please indicate your acceptance of this agreement by signing below:

Beneficiary: _____

Date: _____

Witness: _____

Date: _____

Thank you for your understanding.

Sincerely,
[Your Name]