

Confirmation of Beneficiary Representative Change

Date: [Insert Date]

To: [Recipient's Name]

Address: [Recipient's Address]

Dear [Recipient's Name],

We are writing to confirm the change of your beneficiary representative as per your recent request. Effective immediately, [New Representative's Name] will serve as your designated representative regarding all matters related to your benefits.

Please find the details of the new representative below:

- **Name:** [New Representative's Name]
- **Relationship to Beneficiary:** [Relationship]
- **Contact Information:** [New Representative's Contact Information]

We appreciate your prompt communication regarding this update. Should you have any further questions or require additional assistance, please do not hesitate to contact us.

Thank you for your attention to this important matter.

Sincerely,

[Your Name]

[Your Title]

[Your Organization]

[Contact Information]