## **Beneficiary Review Notice**

[Organization Contact Information]

Date: [Insert Date] To: [Beneficiary Name] [Beneficiary Address] Dear [Beneficiary Name], We are writing to inform you of our tentative decision regarding your recent application for benefits. Below are the details of our review: **Tentative Decision Summary** Application ID: [Insert Application ID] Decision: [Approved/Denied] Reason for Tentative Decision: [Provide Reason] **Next Steps** If you wish to contest this decision, please provide any additional information or documentation by [Insert Deadline]. You may submit your comments via mail or electronically at [Insert Contact Information]. Thank you for your attention to this matter. Should you have any questions, feel free to contact us at [Insert Contact Information]. Sincerely, [Your Name] [Your Title] [Organization Name]