

Beneficiary Authorization Notice

Date: [Insert Date]

To: [Insert Recipient's Name]

Address: [Insert Recipient's Address]

Subject: Beneficiary Authorization Notice

Dear [Insert Recipient's Name],

This is to inform you that I, [Insert Your Name], am designating you as the beneficiary for my [Insert Policy/Account Type] held with [Insert Institution/Company Name]. As of [Insert Effective Date], you are authorized to receive all benefits related to this account in the event of my passing.

Please acknowledge receipt of this notice. You may contact me at [Insert Your Phone Number] or [Insert Your Email] for any further information.

Thank you for your attention to this matter.

Sincerely,

[Insert Your Name]

[Insert Your Address]