Marital Status Declaration

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Your Phone Number]

[Your Email Address]

To Whom It May Concern,

I, [Your Full Name], hereby declare my marital status for the purpose of updating my insurance records. As of [Insert Date], my marital status is [Single/Married/Divorced/Widowed].

If you require any further information or documentation, please feel free to contact me at the above phone number or email address.

Thank you for your attention to this matter.

Sincerely,

[Your Signature (if sending a hard copy)]

[Your Printed Name]