

Request for Verification of Claim Documents

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Your Email]

[Your Phone Number]

[Recipient's Name]

[Recipient's Position]

[Company/Organization Name]

[Company Address]

[City, State, Zip Code]

Dear [Recipient's Name],

I am writing to request verification of the claim documents submitted for claim number [Insert Claim Number]. The documents were provided on [Insert Submission Date] and include [briefly list the documents submitted].

As part of the claims process, I would like to ensure that all submitted documents are complete and accurate. I kindly ask that you verify the status of my claim and confirm if any additional information or documentation is needed for processing.

Thank you for your attention to this matter. I appreciate your prompt response.

Sincerely,

[Your Signature (if sending a hard copy)]

[Your Printed Name]