

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Insurance Company Name]

[Insurance Company Address]

[City, State, Zip Code]

Dear [Insurance Company/Claim Adjuster's Name],

I am writing to formally request the settlement of the beneficiary claim related to policy number [insert policy number], for the late [Deceased's Name] who passed away on [Date of Death]. As the designated beneficiary, I am requesting that the claim be processed so that the benefits can be disbursed to me.

Attached to this letter, please find the necessary documents that validate my claim, including:

- Death Certificate
- Original Policy Document
- Proof of Identity
- Any additional supporting documents

Thank you for your attention to this matter. I would appreciate a prompt response regarding the status of my claim. Should you require any additional information, please do not hesitate to contact me at [Your Phone Number] or [Your Email Address].

Sincerely,

[Your Name]