

Proof of Travel Insurance

Date: [Insert Date]

To Whom It May Concern,

This letter serves to confirm that [Insured's Name], with passport number [Passport Number], is covered by a travel insurance policy with [Insurance Company Name], effective from [Start Date] to [End Date].

The policy number is [Policy Number] and it provides coverage for medical emergencies, trip cancellations, and lost baggage, among other benefits.

For any inquiries regarding this insurance coverage, please feel free to contact [Insurance Company Contact Information].

Thank you for your attention to this matter.

Sincerely,

[Your Name]

[Your Title]

[Insurance Company Name]

[Insurance Company Address]

[Phone Number]

[Email Address]