

Letter of Appeal for Annuity Benefits Adjustment

[Your Name]

[Your Address]

[City, State, ZIP Code]

[Email Address]

[Phone Number]

[Date]

[Recipient Name]

[Company/Organization Name]

[Company Address]

[City, State, ZIP Code]

Dear [Recipient Name],

I am writing to formally appeal the recent decision regarding my annuity benefits. My name is [Your Name], and my policy number is [Policy Number]. I received your notification dated [Date of Notification], indicating that my annuity benefits have been adjusted/reduced. I believe this decision may have been made in error based on the following information:

[Insert a detailed explanation of why you believe the adjustment is incorrect. Include any relevant facts, figures, or documentation that supports your case.]

I kindly request that you review my appeal and reconsider the adjustment made to my annuity benefits. I believe that a thorough reassessment of my circumstances will validate my request.

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

Sincerely,

[Your Name]