Insurance Deduction Details for Tax Purposes

Date: [Insert Date]

To Whom It May Concern,

This letter is to provide you with the details of the insurance deductions for the year [Insert Year] for tax purposes.

Insurance Deduction Summary

Insurance Type	Provider	Policy Number	Premium Amount	Deduction Amount
Health Insurance	[Provider Name]	[Policy Number]	[Premium Amount]	[Deduction Amount]
Life Insurance	[Provider Name]	[Policy Number]	[Premium Amount]	[Deduction Amount]

Total Deduction Amount: [Total Deduction]

If you require any further information or documentation, please do not hesitate to contact me at [Your Contact Information].

Sincerely,

[Your Name]
[Your Address]
[City, State ZIP Code]
[Your Email Address]
[Your Phone Number]