

Tax Shelter Investment Eligibility Verification

Date: [Insert Date]

To: [Recipient's Name]

[Recipient's Address]

[City, State, ZIP Code]

Dear [Recipient's Name],

We are writing to confirm your eligibility for participation in the tax shelter investment program for the year [Insert Year]. As per our records, we require the following details to verify your eligibility:

- Full Name: [Insert Full Name]
- Tax Identification Number: [Insert Tax ID Number]
- Investment Amount: [Insert Amount]
- Investment Date: [Insert Date]

Please ensure that the information provided is accurate and complete. Failure to provide the required information may affect your eligibility for the tax benefits associated with this investment.

If you have any questions or need further assistance, please do not hesitate to contact us at [Insert Contact Information].

Thank you for your attention to this matter.

Sincerely,

[Your Name]

[Your Title]

[Your Company]

[Your Company Address]

[City, State, ZIP Code]