

Policy Beneficiary Information Update

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Insurance Company Name]

[Claims Department/Policy Services]

[Company Address]

[City, State, Zip Code]

Subject: Update of Beneficiary Information for Policy #[Policy Number]

Dear [Insurance Company Representative's Name],

I am writing to formally request an update to the beneficiary information for my insurance policy #[Policy Number]. Below are the details of the current beneficiaries and the proposed updates:

Current Beneficiary Information:

- Name: [Current Beneficiary Name]
- Relationship: [Current Relationship]
- Percentage: [Current Percentage]

Updated Beneficiary Information:

- Name: [New Beneficiary Name]
- Relationship: [New Relationship]
- Percentage: [New Percentage]

Please let me know if you require any further information or documentation to process this request. I appreciate your prompt attention to this matter.

Thank you.

Sincerely,

[Your Signature (if sending a hard copy)]

[Your Printed Name]