

Request for Supplemental Claim Documentation

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Your Email]

[Your Phone Number]

[Recipient's Name]

[Recipient's Title]

[Company/Organization Name]

[Company Address]

[City, State, Zip Code]

Dear [Recipient's Name],

I am writing to formally request supplemental documentation for my claim, originally filed on [Insert Date of Original Claim]. In order to proceed further with the assessment of my claim, I need the following information:

- [Specify Document 1]
- [Specify Document 2]
- [Specify Document 3]

Thank you for your attention to this matter. Please let me know if you need any additional information from my side. I look forward to your prompt response.

Sincerely,

[Your Name]