

Request for Second Copy of Insurance Card

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number] [Date]

[Insurance Company's Name]

[Insurance Company's Address]

[City, State, Zip Code]

Dear [Insurance Company's Customer Service/Specific Name],

I hope this letter finds you well. I am writing to request a second copy of my insurance card. My details are as follows:

Policy Holder's Name: [Your Name]

Policy Number: [Your Policy Number]

Unfortunately, I have misplaced my original card and would greatly appreciate it if you could send me a replacement at your earliest convenience. Thank you for your attention to this matter.

Sincerely,

[Your Name]