Confirmation of Retroactive Benefit Application

Date: [Insert Date]
[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
To Whom It May Concern,
I am writing to confirm the submission of my application for retroactive benefits dated [Insert Application Date]. I appreciate your attention to this matter and look forward to your prompt response.
For your reference, the details of my application are as follows:
 Applicant Name: [Your Name] Application Reference Number: [Reference Number] Type of Benefit Sought: [Specify Benefit] Period of Retroactive Benefit: [Specify Dates]
Please do not hesitate to contact me at [Your Phone Number] or [Your Email Address] should you require any further information.
Thank you for your attention to this matter.
Sincerely,
[Your Name]