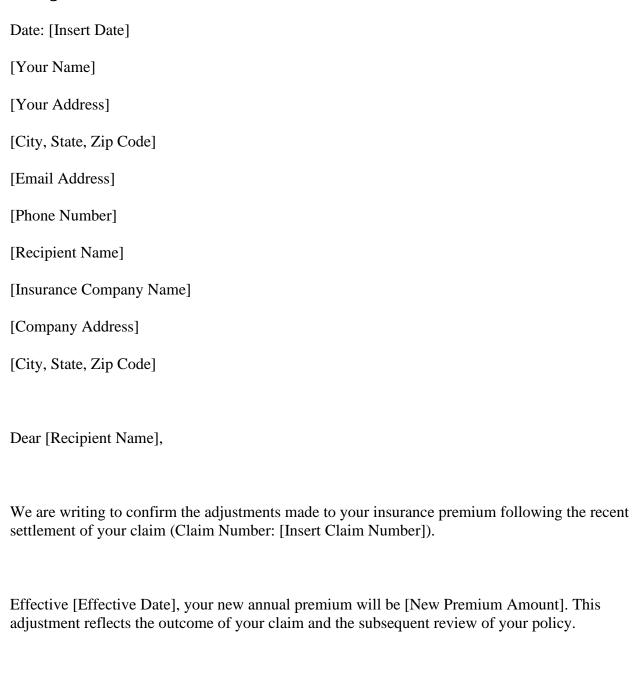
Confirmation of Insurance Premium Adjustment



If you have any questions or need further clarification regarding your premium adjustment,

please do not hesitate to contact us at [Your Contact Information].

Thank you for your continued trust in [Insurance Company Name].
Sincerely,
[Your Name]
[Your Position]
[Insurance Company Name]