

Your Name
Your Address
City, State, Zip Code
Email Address
Phone Number
Date: [Insert Date]

Insurance Company Name
Insurance Company Address
City, State, Zip Code

Dear [Insurance Company Name or Customer Service],

I am writing to request a detailed bill for my insurance policy, Account Number: [Your Account Number]. I would appreciate it if you could provide a breakdown of the charges for the last billing cycle and any other relevant information regarding my policy.

Please send the detailed insurance bill to my address listed above or via email at [Your Email Address]. If you have any questions or need further information, please feel free to contact me at [Your Phone Number].

Thank you for your assistance.

Sincerely,
[Your Name]