Receipt Acknowledgment

Date: [Insert Date]

Claim Number: [Insert Claim Number]

[Your Name]
[Your Address]
[City, State, Zip Code]

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

Dear [Insurance Company Representative's Name],

I am writing to acknowledge the receipt of your communication regarding my insurance claim application submitted on [Insert Submission Date]. I understand that my claim is currently under review, and I appreciate your prompt attention to this matter.

Please feel free to reach me at [Your Phone Number] or [Your Email Address] should you need any further information or documentation to facilitate the processing of my claim.

Thank you for your assistance.

Sincerely,

[Your Name]
[Your Policy Number]