

Recognition of Insurance Claim

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Insurance Company Name]

[Insurance Company Address]

[City, State, Zip Code]

Dear [Insurance Adjuster's Name],

I am writing to formally acknowledge the initiation of my insurance claim referenced by claim number [Insert Claim Number], submitted on [Insert Submission Date].

Thank you for your assistance in processing this claim, and I look forward to your prompt response and support in resolving this matter.

Sincerely,

[Your Name]