

Beneficiary Information Amendment Letter

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

[Recipient Name]
[Company/Organization Name]
[Address]
[City, State, Zip Code]

Dear [Recipient Name],

I am writing to request an amendment to the beneficiary information associated with my account [Account Number or Policy Number]. Please find the details of the amendment below:

Current Beneficiary Information:

- Name: [Current Beneficiary Name]
- Relationship: [Current Relationship]
- Date of Birth: [Current Beneficiary DOB]
- Address: [Current Beneficiary Address]

New Beneficiary Information:

- Name: [New Beneficiary Name]
- Relationship: [New Relationship]
- Date of Birth: [New Beneficiary DOB]
- Address: [New Beneficiary Address]

Please process this amendment at your earliest convenience. Should you require any additional information or documentation to complete this request, please do not hesitate to contact me.

Thank you for your attention to this matter.

Sincerely,

[Your Signature (if sending a hard copy)]
[Your Printed Name]