

Beneficiary Loss Notification

Date:

To:

Address:

Subject: Notification of Beneficiary Loss

Dear ,

We regret to inform you that the following beneficiary has experienced a loss:

Beneficiary Name	Date of Birth	Policy Number	Date of Loss
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Please contact us at your earliest convenience for further steps regarding this notification.

Sincerely,