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RE: Insurance Policy: _____
Insured: _____
Policy Owner: _____

Dear Sir or Madam:

I am writing to instruct you to make the following change(s) to the above policy. I would like to change a primary beneficiary.

The new primary beneficiary is _____.
Please remove _____as the primary beneficiary.

Please contact me at the address given above if you have any questions or need additional information. I can also be contacted by phone at _____.

Please send me a confirmation letter and, if necessary, a form to make this change.

Thank you for your assistance.

Sincerely,

Your Name

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