

XYZ Insurance Company

One Wilmington Plaza
Wilmington, Delaware 19801
Telephone/Fax (302) 577-1211

Date

Name of Bank

Attention:

Address

Address

Address

Re: Verification of Account Balances

Dear Bank Account Manager:

The Delaware Department of Insurance (“DE DOI”) is engaged in an organizational review of our insurance company. In connection therewith, please complete the enclosed Account Balance Verification form provided by the DE DOI Bureau of Captive and Financial Insurance Products.

Your prompt response is requested. You may fax and/or mail the completed form to DE DOI. Thank you in advance for your cooperation and immediate attention to this matter.

Very truly yours,

John Doe
President

Enclosure