

December 2, 2003

Mr. Peter Brown  
99 West Street  
Anytown, New York 12303

RE: Claim/file number: 123456789  
Policy number : H2334456  
Obligee: John Doe  
Alleged Principal: Mr. Peter Brown

Dear Mr. Doe,

This letter is to inform you that a proof of loss was filed by the XYZ Company with the ABC Insurance Company on November 10, 2003. The proof of loss names you as a Principal in the captioned matter arising out of your employment with the XYZ Company.

We wish to provide you with the opportunity to offer information or evidence in connection with the allegations outlined in the proof of loss on file. We request that you contact the undersigned at your earliest convenience so that all the pertinent details can be gathered and the investigation can be concluded promptly. In the absence of your input, the claim disposition will reflect only the information provided by the XYZ Company.

We wish to advise you that should payment be made to XYZ Company under the terms of their policy, we would be fully subrogated to their rights and full restitution would be vigorously sought from you. Please contact the undersigned during business hours at 1-234-567-9876 or at the address above. Thank you.

Very truly yours,

William White  
ABC Insurance Company