

**Date:** [Insert Date]

**Recipient Name:** [Insert Client Name]

**Address:** [Insert Client Address]

**Account Number:** [Insert Account Number]

**Subject: Confirmation of Annuity Integration and Lifetime Income Guarantee**

Dear [Insert Client Name],

This letter serves as formal confirmation regarding the integration of your annuity contract into your overall financial portfolio and the activation of your guaranteed income provisions.

### **1. Integration Overview**

Your annuity, issued by [Insert Insurance Company Name], has been successfully synchronized with your retirement strategy. This integration ensures that your tax-deferred growth is aligned with your long-term liquidity needs and estate planning objectives.

### **2. Income Guarantee Details**

Based on the terms of your contract and the selected [Insert Name of Rider/Provision, e.g., Guaranteed Minimum Withdrawal Benefit], you are entitled to the following:

- **Guaranteed Annual Income:** \$[Insert Amount]
- **Frequency of Payments:** [Insert Frequency, e.g., Monthly/Quarterly]
- **Benefit Start Date:** [Insert Date]
- **Guarantee Duration:** [Insert Duration, e.g., For Life / 20 Years Certain]

### **3. Terms and Conditions**

This income guarantee is subject to the claims-paying ability of the issuing insurance company. Please note that excess withdrawals beyond the guaranteed amount may reduce your future benefit base and the value of any remaining death benefits.

### **4. Next Steps**

No further action is required at this time. Your first disbursement is scheduled to be issued on [Insert Date] via [Insert Payment Method].

If you have any questions regarding your distribution schedule or the tax treatment of these payments, please contact your financial advisor at [Insert Phone Number].

Sincerely,

[Insert Signature]

[Insert Name]

[Insert Title]

[Insert Institution Name]