

[Date]

[Financial Institution Name]

[Address Line 1]

[Address Line 2]

[City, State, Zip Code]

## **Re: Financial Surety Audit Confirmation**

To whom it may concern,

For the purpose of our annual audit, please provide our auditors, [Auditor Name/Firm], with the details regarding the following surety instrument(s) held in the name of [Company Name] as of [Audit Cut-off Date]:

- **Type of Instrument:** [e.g., Letter of Credit, Surety Bond, Performance Bond]
- **Instrument Number:** [Number]
- **Face Value:** [Amount]
- **Beneficiary:** [Name of Beneficiary]
- **Expiration Date:** [Date]

Specifically, please confirm:

1. The total outstanding balance or liability amount as of the date mentioned above.
2. Any collateral or cash deposits held to secure the instrument.
3. Any defaults, draws, or claims made against this instrument during the period.
4. The interest rate or commission fees associated with the facility.

Please send the requested information directly to our auditors at the following address:

[Auditor Address]

[Auditor Email Address]

Thank you for your prompt attention to this matter.

Sincerely,

[Authorized Signature]

[Printed Name]

[Title]

[Company Name]