

[Your Company Letterhead]

[Date]

[Financial Institution Name]

[Address Line 1]

[Address Line 2]

[City, State, Zip Code]

Subject: Audit Confirmation of Investment Income

Dear [Contact Name or Department],

In connection with an audit of our financial statements, please provide our auditors, [Auditor Name], with the following information regarding the accounts listed below for the period from [Start Date] to [End Date]:

- Total dividend income earned and paid.
- Total interest income earned and paid.
- Any accrued interest or dividends receivable as of [End Date].
- A list of securities or accounts held during this period.

Account Details:

Account Name: [Company Name]

Account Number(s): [List Account Numbers]

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

[Auditing Firm Name]

[Auditor Address]

[Auditor Email Address]

Your prompt attention to this request is appreciated.

Sincerely,

[Authorized Signature]

[Name and Title]

[Company Name]