

[Date]

To:

[Recipient Name/Counterparty Name]

[Recipient Address]

[City, State, Zip Code]

Subject: Liquidity Coverage Ratio (LCR) Compliance Comfort Letter

Dear [Name/Department],

This letter is provided by [Your Institution Name] ("the Institution") in connection with our ongoing business relationship and your request for information regarding our regulatory liquidity position.

We hereby confirm that [Your Institution Name] is subject to the liquidity standards and oversight of [Name of Regulatory Authority]. We maintain a comprehensive liquidity risk management framework designed to ensure that the Institution holds adequate High-Quality Liquid Assets (HQLA) to meet its obligations under stressed conditions.

As of the reporting period ending [Date], [Your Institution Name] confirms the following:

- The Institution is in compliance with the minimum Liquidity Coverage Ratio (LCR) requirements as mandated by [Specific Regulation, e.g., Basel III / CRR II].
- Our current LCR stands at [Percentage]%, which is above the regulatory minimum requirement of [Required Percentage]%.
- We monitor our liquidity position on a daily basis and perform regular stress testing to ensure continued compliance.

This letter is for informational purposes only and does not constitute a legal guarantee of future performance or a commitment to maintain specific ratios beyond the requirements set by our primary regulator. This information is provided based on the data available as of the date of this letter.

Should you require further information regarding our liquidity management practices, please contact [Department/Contact Person].

Sincerely,

[Signature]

[Name of Authorized Signatory]

[Title/Position]

[Your Institution Name]