

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
[Date]
[FDIC Claims Department]
[FDIC Address]
[City, State, Zip Code]

Subject: Claim for FDIC Insurance

Dear [Claims Department/Specific Contact Name],

1. ****Introduction****

I am writing to formally submit a claim for FDIC insurance related to my deposits held at [Bank Name], which was [closed/failed] on [date of bank closure].

2. ****Account Details****

- Account Holder: [Your Name]
- Account Number: [Your Account Number]
- Type of Account: [Checking/Savings/Other]
- Amount of Deposit: [\$ Amount]

3. ****Request for Insurance Claim****

Due to the closure of [Bank Name], I am requesting the release of my FDIC insurance benefits as I believe my deposits are fully covered under the standard insurance limits.

4. ****Attachments****

I have included the following documents to support my claim:

- Copy of Account Statement
- Copy of any related correspondence from [Bank Name]
- [Any Other Relevant Documents]

5. ****Conclusion****

I appreciate your prompt attention to this matter, and I look forward to your swift response. Please feel free to contact me should you need any additional information.

Thank you for your assistance.

Sincerely,

[Your Signature (if sending a hard copy)]
[Your Printed Name]