

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
[Date]
[Department of Labour]
[UIF Office Address]
[City, State, Zip Code]
Subject: UIF Payment Claim
Dear Sir/Madam,

I hope this letter finds you well.

I am writing to formally submit a claim for my Unemployment Insurance Fund (UIF) benefits following the termination of my employment.

Details of my claim are as follows:

- Full Name: [Your Full Name]
- ID Number: [Your ID Number]
- Contact Number: [Your Contact Number]
- Previous Employer: [Employer's Name]
- Employment Period: [Start Date] to [End Date]
- Reason for Termination: [Brief Description]

I have attached the necessary supporting documents, including my ID, proof of employment, and the completed UI-19 form.

Please confirm the receipt of this claim and provide me with information regarding the next steps.

Thank you for your attention to this matter.

Sincerely,

[Your Name]

[Signature if sending a hard copy]