

(Must be typed on Insured's Letterhead)

Date: _____

_____ **(company name & address)**

RE: (Insured's name and policy number(s))

To Whom It May Concern:

Please recognize (Gateway/Pennsy Underwriters, Inc.) (New Horizons Insurance Agency, Inc.) as agent/broker of record on the above Mentioned polices effective _____ (date).

Sincerely,

Signature of insured