

Approval Letter

This letter is to confirm that Joinder Agreement application for the above named Beneficiary to join Senior Care Life Pooled trust has been approved and a sub-account has been established. The account is effective upon receipt of surplus deposit.

Should you have any further inquiries please do not hesitate to contact our office at 718-500-3235

Sincerely
Senior Care Life
Enrollment Department

Tel: 718.500.3235 Address: 5014-16th Ave, Suite 489 Brooklyn, NY 11204 Email: info@slctrusts.org

www.seniorlifecaretrusts.org