**${AffiliateName}**

**${AffiliateAddress1} ${AffiliateAddress2}**

**${AffiliateCSZ}**

**${Date-Today-Words2DigitDay}**

**${Borrower1Fullname}**

**${Borrower1HomeAddress}**

**${Borrower1CSZ}**

Re: CTIA File #: **${FileNumber}**

ADDRESS: **${PropertyAddress}, ${PropertyStateAbbr} ${PropertyZip}**

Enclosed, please find the following:

\_\_\_\_\_\_\_ Title Policy and Endorsements \_\_\_\_\_\_ Deed of Trust

\_\_\_\_\_\_\_ Assignment of Deed of Trust \_\_\_\_\_\_\_ Other

This title policy is being transmitted by **${AffiliateName}** pursuant to affiliation instructions from Capitol Title Insurance Agency, Inc. (CTIA).

If you should have any questions, you must contact your CTIA office directly at **${companyAddressStreetCSZ}** Attention: Post Closing Department, or call them at **${companyPhone}** and they will be glad to help you. You can assist them in answering your questions more efficiently by referring to your File No. **${FileNumber}** in your communications.

IMPORTANT DOCUMENT

DO NOT DESTROY

Store in your Capitol Title Settlement Folder

Enclosures