

The Lincoln National Life Insurance Company 8801 Indian Hills Drive Omaha, NE 68114

www.LincolnFinancial.com

Date

Name Street address City, state and zip code

**RE: Disclosure of Information** 

24578

## Dear Name:

Lincoln recently discovered that your personal information was subject to unauthorized access. We take our obligation to protect information seriously. Therefore, we have notified our Corporate Privacy Office and are taking steps to address this situation and prevent a similar occurrence in the future.

While we have absolutely no indication of any improper use of your information, we have arranged to provide you with a complimentary two-year membership in Experian's ProtectMyID credit monitoring service to help you detect any possible misuse of your data. Please see the attached information to assist you in enrolling in this service. Please note that your enrollment code will be valid for 60 days from the date of this letter. As always, we recommend that you remain vigilant and review your account statements and credit reports regularly.

We apologize for any inconvenience or concern that this incident may cause you. If you have any questions or would like to discuss the contents of this letter, please call number and hours.

Sincerely,

Sender's name Sender's title Group Protection

**Enclosure**