

Your Name  
Your Address  
City, State, Zip Code  
Email Address  
Phone Number  
Date

Insurance Company Name  
Company Address  
City, State, Zip Code

Dear [Insurance Company Name],

I am writing to formally request the cancellation of my life insurance policy with the policy number [Your Policy Number]. I have reviewed my financial needs and have decided to discontinue this policy effective immediately.

Please confirm the cancellation of my policy in writing and let me know if there are any final steps that I need to complete.

Thank you for your prompt attention to this matter.

Sincerely,  
[Your Name]