

Letter of Termination of Pharmacy Contract

[Your Name]

[Your Title]

[Your Pharmacy Name]

[Your Pharmacy Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Date]

[Recipient Name]

[Recipient Title]

[Recipient Pharmacy Name]

[Recipient Address]

[City, State, Zip Code]

Dear [Recipient Name],

We are writing to formally notify you of the termination of the contract between [Your Pharmacy Name] and [Recipient Pharmacy Name], effective immediately, due to a breach of contract as outlined in our agreement dated [Contract Date].

Despite previous communications regarding the violations, specifically [describe the breach], we have not seen corrective action taken. Therefore, we find it necessary to terminate our contractual relationship.

As per the terms of our agreement, we request that you cease all operations related to this contract and return any materials or confidential information belonging to [Your Pharmacy Name] within [specified time frame].

We hope that future partnerships can be more successful and mutually beneficial.

Thank you for your immediate attention to this matter.

Sincerely,

[Your Name]

[Your Title]

[Your Pharmacy Name]