

Claim Withdrawal Acknowledgment

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Your Email]

[Your Phone Number]

[Recipient's Name]

[Recipient's Title]

[Company/Organization Name]

[Company Address]

[City, State, Zip Code]

Dear [Recipient's Name],

Subject: Acknowledgment of Claim Withdrawal

We hereby acknowledge the receipt of your letter dated [Insert Date of Withdrawal Letter], in which you formally withdraw your claim regarding [Brief Description of Claim].

Your request for withdrawal has been processed, and we confirm that no further action will be taken concerning this claim.

If you have any questions or need further assistance, please do not hesitate to contact us.

Thank you for your attention to this matter.

Sincerely,

[Your Name]

[Your Title]

[Company/Organization Name]