## **Claim Withdrawal Intention**

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

[Recipient's Name]
[Recipient's Title]
[Company/Organization Name]
[Company Address]
[City, State, Zip Code]

Dear [Recipient's Name],

I am writing to formally notify you of my intention to withdraw my claim regarding [brief description of the claim] filed on [date of claim].

After careful consideration, I have decided to withdraw this claim for [mention reason if appropriate, e.g., personal reasons, resolution outside of claim]. I appreciate your understanding and support throughout this process.

Please acknowledge receipt of this withdrawal notice, and do not hesitate to contact me if you need any further information.

Thank you for your attention to this matter.

Sincerely,
[Your Name]