

# Auto Insurance Cancellation Confirmation

Dear [Policyholder's Name],

We are writing to confirm the cancellation of your auto insurance policy with the policy number [Policy Number]. Your request for cancellation has been processed and is effective as of [Cancellation Effective Date].

If you have any questions or need further assistance, please feel free to contact us at [Customer Service Phone Number] or [Customer Service Email].

Thank you for choosing [Insurance Company Name]. We appreciate your business and hope to serve you again in the future.

Sincerely,

[Your Name]

[Your Title]

[Insurance Company Name]

[Company Address]

[Company Phone Number]