

Notification of Discontinuation of Group Life Insurance

Date: [Insert Date]

Dear [Employee's Name],

We are writing to inform you that, effective [Insert Effective Date], the group life insurance policy provided by [Company Name] will be discontinued. This decision has been made after careful consideration and aligns with our current business strategy.

We understand that this may come as a surprise, and we want to assure you that we are committed to providing support during this transition. Please take the time to review your options for individual life insurance policies.

For any questions or further assistance, do not hesitate to reach out to the HR department at [HR Contact Information].

Thank you for your understanding.

Sincerely,

[Your Name]

[Your Position]

[Company Name]

[Company Contact Information]