Phase-Out Product Confirmation

Date: [Insert Date]

[Service Provider Name]

[Service Provider Address]

[City, State, Zip Code]

Dear [Service Provider Name],

We are writing to inform you of the upcoming phase-out of the following product:

Product Name: [Product Name]
SKU: [SKU Number]
Effective Date of Phase-Out: [Effective Date]

As part of our commitment to continuous improvement, we have decided to discontinue this product. This decision is based on [a brief reason for the phase-out, e.g., market demand, product lifecycle].

We appreciate your support and understanding during this transition. Please ensure that all tracing and orders for this product are concluded by the effective phase-out date. If you have any questions or require further assistance, feel free to contact us at [Your Contact Information].

Thank you for your cooperation.

Sincerely, [Your Name] [Your Title] [Your Company Name] [Your Contact Information]