

Validation of Membership Status

Date: [Insert Date]

[Recipient's Name]

[Recipient's Address]

[City, State, ZIP Code]

Dear [Recipient's Name],

We are writing to formally validate the loss of your membership status with [Organization Name]. According to our records, your membership has been inactive since [Insert Date of Inactivity].

If you believe this information is incorrect, please contact us at [Insert Contact Information] for further assistance.

Thank you for your previous participation with us. We appreciate your understanding.

Sincerely,

[Your Name]

[Your Position]

[Organization Name]

[Contact Information]