Date:  
  
Name of Authorized Person/Cancellation Department  
Name of Company/Service Provider  
Mailing Address/PO Box no.  
City, State, Zip Code  
  
Re: Cancellation of Membership/Subscription No: #\_(specify number)\_  
  
Dear Sir/Madam,  
I am sending this written notice to request the cancellation of my Subscription/membership with effective date \_(mm/dd/yy)\_. I would appreciate if you send me a written confirmation of the same within 30 days. I am enclosing a bank draft worth US$ \_(specify amount)\_ towards full and final payment of my outstanding membership/subscription fees. Please ensure that no further payments are applied to my account henceforth.  
  
Thank you for your prompt attention to this matter.  
  
Sincerely,  
-s/d  
Sender's Name  
Sender's Mailing address  
Sender's Contact number