Cancellation template for Insurance2Go	Sender:
Citymain Administrators Ltd.	
3000 Lakeside, North Harbour	
Western Road	Insurance policy number
PO6 3FQ Portsmouth	
Cancellation	
Dear sir or madam,	
I hereby wish to cancel my subscription with immediate effect or a	t the earliest possible date.
Please send me a written confirmation of cancellation stating the c should be grateful if you would refrain from contacting me for the	
Kind regards,	
Signature Place	e and date