Cancellation template for State Farm Insurance	Sender:
State Farm Insurance	
1 State Farm Plz	Insurance policy number
IL 61710 Bloomington	
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 o	date on which it takes effect. I
should be grateful if you would refrain from contacting me for the	purpose of return advertising.
Kind regards,	
Signature Place	e and date