

Nasburg Huggins Insurance

Coos Bay, Oregon

Insurance Policy Cancellation

Insurance Company: _____

Today's Date: _____

Name of Insured: _____

Policy Number(s): _____

Cancellation date: _____ at 12:01 a.m.

To Nasburg Huggins Insurance:

Please cancel the insurance policy or policies as indicated above on the date specified.

I understand that you may contact me for verification of my cancellation request.

Sincerely,

Signature: _____

Print name: _____

Please mail, fax, or email this form to:

Nasburg Huggins Insurance
375 South Fourth Street
Coos Bay, OR 97420

Fax: 541-267-5296

Email: nasburg-huggins-info@leavitt.com