Sample Individual Policy Cancellation Letter – required for BCBS Individual clients who have an existing BCBS policy and are not renewing their policy through [www.bcbsil.com/keepmeblue](http://www.bcbsil.com/keepmeblue)

Please cancel policy for Member Name , Policy # , effective \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Client Signature:

Signature Date: