

[Your Name]
[Your Address]
[City, State, Zip Code]
[Phone Number]
[Email Address]

[Date]

[Company Name]
[Billing Department Address]
[City, State, Zip Code]

Subject: Cancellation of Recurring Payment for Account [Your Account Number]

Dear Customer Service Team,

I am writing to formally request the cancellation of my recurring payment/automatic debit authorized for my account [Account Number or Subscription ID].

Please stop all future charges against my [Credit Card Type/Bank Account] ending in [Last 4 Digits] effective immediately. I would like this cancellation to be processed before the next scheduled billing date on [Date of Next Scheduled Payment].

Please provide a written confirmation via email or mail that this request has been processed and that no further funds will be withdrawn from my account.

Thank you for your prompt attention to this matter.

Sincerely,

[Your Signature]

[Your Printed Name]