

[Your Company Name]
[Department Name]
[Street Address]
[City, State, Zip Code]

[Date]

[Customer Name]
[Customer Address]
[City, State, Zip Code]

Subject: Important: Missing Information for Cancellation Request Regarding [Account/Policy Number]

Dear [Customer Name],

We received your request to cancel your [Service/Subscription/Policy] dated [Date of Request]. However, we are unable to process this cancellation at this time because the following information is missing:

- [Specify Missing Detail 1, e.g., Account PIN or Security Question]
- [Specify Missing Detail 2, e.g., Signed Cancellation Form]
- [Specify Missing Detail 3, e.g., Effective Date of Cancellation]

To complete your request, please provide the information listed above by [Date] via [Method of Communication: Email/Phone/Portal].

Please note that your account will remain active and billing will continue until we receive the required information to finalize the cancellation.

If you have any questions, please contact our support team at [Phone Number] or [Email Address].

Sincerely,

[Your Name/Signature]
[Your Title]