

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

[Recipient's Name]
[Company's Name]
[Company's Address]
[City, State, Zip Code]

Dear [Recipient's Name],

Subject: Termination of IWCC Membership

I am writing to formally notify you of my decision to terminate my membership with the IWCC (International Workers' Compensation Committee), effective [termination date].

This decision has been made after careful consideration, and I believe it is in my best interest at this time. Please confirm the receipt of this termination request and provide any necessary information regarding the completion of this process.

I appreciate the opportunities I have had during my time with IWCC, and I wish the organization continued success in the future.

Thank you for your attention to this matter.

Sincerely,

[Your Name]
[Your Title/Position, if applicable]
[Membership ID, if applicable]