

NOTICE OF CANCELLATION

To: Customer Service  
Company: CompuServe  
Fax #: 1-904-357-7198  
Phone #: 1-800-848-8990

Date: \_\_\_\_\_

**Re: NOTICE OF CANCELLATION**

From: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Fax #: \_\_\_\_\_

Phone #: \_\_\_\_\_

To Whom It May Concern:

Please accept this notice as my request to cancel my account with CompuServe effective immediately.

My CompuServe user name is \_\_\_\_\_

The last 4 digits of the credit card or bank account my account is billed to are

\_\_\_\_\_.

Please send me written confirmation, via the fax number and address above, that my account has been cancelled. Please do not hesitate to contact me with any questions.

Thank you,

\_\_\_\_\_  
signed