

January 12, 2010

(Current Carrier)
(Carrier Address)
(Carrier Address)
(Postal Code)

Dear Sir/Madam:

Subject: ABC Company – Group Insurance Policy XXXXXXXXX

Please be advised that effective (insert effective date), (insert policyowner/client name) will be discontinuing our Group Insurance Plan with your company and will be transferring to a new group insurance plan with (insert new carrier name).

We will be informing our employees to submit all current claims to (insert current carrier name) prior to the termination date of our coverage with your firm. Please ensure that no claims are honored that are incurred after our termination date with your company.

Canadian Shield Insurance & Financial Services Ltd. and/or (insert new carrier name) may require information from you over the next several weeks. We trust you will provide them with any information they may require in regards to our plan.

We thank you for your past service and look forward to your continued assistance while this change is taking place.

If you have any questions or concerns, please do not hesitate to contact us.

Best regards,

Per: (Insert policyowner/client name)

CC Donald W. Anderson, B.Sc. (Admin), CFP, RHU
Canadian Shield Insurance & Financial Services Ltd.
437 Main Street North
Moose Jaw, Saskatchewan
S6H 0W5