



Date: _____

RE: Insured: _____

Policy #: _____

IMPORTANT:

List any additional policies that you own, that you also wish to cancel. # _____, # _____, # _____

Dear Policyowner:

Please stop and think it over! We want to be sure you have carefully considered all of your options before you make the decision to surrender your policy.

Please think back to the reasons you purchased insurance. Was it to provide your family with income should they be left alone? Was it to cover the mortgage or other debts for your family? Did you purchase it with the idea in mind that you would withdraw values after retirement to supplement your income? Aren't these reasons still important to you?

If your needs have changed you may be interested in some of our other types of life insurance. Boston Mutual has many affordable plans of insurance available. There are term plans, permanent life insurance, mortgage insurance, and interest sensitive plans. Before you purchase insurance from anyone else, please call us.

Finally, please think about the financial needs of your loved ones when you are no longer there to provide an income. If you still wish to cancel the policy, please sign the statement below and return this letter to us in the enclosed envelope.

We are willing to work with you to help you keep your insurance. If you have any questions, please call our Client Services Department toll-free at (877) 624-2249.

Sincerely,

Client Service Representative
Client Services Department

Please cancel my policy(ies) listed above.

Policyowner's Signature

Date

Spouse's Signature (if Community Property State)
(AZ, CA, ID, LA, NV, NM, TX, WA, WI)