OLD REPUBLIC INSURED AUTOMOTIVE SERVICES, INC.

VEHICLE SERVICE CONTRACT - Cancellation Request

<u>All</u> information	must be provided in order for us t	o process your cancellation request.
CONTRACT #:		TODAY'S DATE:
CUSTOMER:		
CURRENT ADDRESS:		
CITY / STATE / ZIP:		
VEHICLE YEAR:	MAKE:	MODEL:
CANCELLATION DATE:	CANCELLATION MILEAGE:	
Attach notarized odo	meter statement indicating mile	age of the vehicle at time of cancellation.
REASON FOR CANCELLATION:		VEHICLE SALE OR TRADE-IN
	LENDER REQUEST (vehi insurance report or repo	cle total loss or repossession. Attach copy of letter.)
I understand that all refunds for canc due will be paid by the seller of the se		e provisions in the service contract issued to me. Refunds
Customer Signature:		Date:
Authorized Signature of Sales Rep	resentative:	
Contract Purchased From: E-mail, fax, or mail to: Old Repu	ublic Insured Automotive Servic	es, Inc., cancelreq@orias.com, Fax: (918) 250-4877
V00 0D (02/45)	P.O. Box 35008, Tulsa, Oł	(/4153-0008