[Company Name]
[Company Address]
[City, State, Zip Code]

[Date]

[Employee Name]
[Current Employee Address]
[City, State, Zip Code]

Dear [Employee Name],

This letter serves as official notification and confirmation of your geographic transfer within [Company Name]. Effective [Effective Date], your primary work location will change from [Current Office/City] to [New Office/City].

Position and Reporting Structure:
In your new location, you will continue in your role as [Job Title]. You will now report directly to [Supervisor Name], who can be reached at [Supervisor Email/Phone].

Compensation and Benefits:
Your base salary will [remain the same / be adjusted to Amount] per year. All other benefits, including health insurance and retirement plans, will remain in effect according to company policy.

Relocation Assistance:
To support your transition, the company is providing the following relocation package:
- [Relocation Stipend Amount or Description]
- [Moving Services/Company Details]
- [Temporary Housing Details, if applicable]
- [Travel Reimbursement Details]

All relocation expenses must be submitted and documented by [Deadline Date] in accordance with the [Company Relocation Policy Name].

Reporting Date:
We expect you to begin your duties at the [New Office Name] on [Start Date at New Location].

Please sign and return a copy of this letter by [Deadline for Acceptance] to confirm your acceptance of this transfer.

We are excited about your move and look forward to your continued contributions to the team in [New City].

Sincerely,

[Sender Name]
[Sender Title]
[Company Name]

Employee Acceptance:

I accept the geographic transfer and the terms outlined in this letter.

_____
[Employee Signature]

_____
[Date]