

Date: [Insert Date]

To: [Employee Name]

Employee ID: [Insert ID]

Department: [Insert Department]

Subject: Notification of Final Leave Balance Exhaustion

Dear [Employee Name],

This letter is to formally notify you that according to our records, your paid leave balances have been fully exhausted as of [Date].

Our records indicate the following status for your leave categories:

- Annual/Vacation Leave: 0 hours/days remaining
- Sick Leave: 0 hours/days remaining
- Personal Leave: 0 hours/days remaining

Please be advised that any further absence from work will be categorized as Leave Without Pay (LWOP), unless otherwise protected by specific labor laws or prior written approval from management. Future absences may result in a pro-rated deduction from your upcoming salary payment.

If you believe there is an error in these calculations, please contact the Human Resources department by [Insert Deadline Date] to provide supporting documentation.

Thank you for your attention to this matter.

Sincerely,

[Your Name]

[Your Title]

[Company Name]