Date: [Date]

To: [Employee Name]

Position: [Job Title]

Subject: Notice of Position Elimination and Vendor Transition

Dear [Employee Name],

Please be advised that [Company Name] has made the strategic decision to transition the functions of the [Department Name] department to an external vendor. As a result of this transition, your position as [Job Title] will be eliminated, and your employment will terminate effective [Last Working Day Date].

This decision is based on organizational restructuring and is not a reflection of your individual performance. Below are the details regarding your transition:

- **Final Pay:** You will receive your final paycheck on [Date], which will include all hours worked up to your final day and any accrued, unused vacation time.
- **Severance:** [Detail severance package if applicable, e.g., "You are eligible for X weeks of severance pay, contingent upon signing a separation agreement."]
- **Benefits:** Your health insurance and other benefits will continue through [Date]. You will receive a separate packet regarding COBRA enrollment.
- **Company Property:** Please return all company equipment (laptop, keys, ID badge) by [Date/Time] to [Department/Location].

We appreciate the contributions you have made during your time with [Company Name]. We will provide you with a letter of recommendation and career transition support through [Outplacement Service Name, if applicable].

If you have any questions regarding your final pay or benefits, please contact [HR Contact Name] at [Phone Number/Email].

Sincerely,

[Your Name]
[Your Title]
[Company Name]