

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

[Date]

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

Re: Separation of Employment and Severance Benefits

Dear [Employee Name],

This letter outlines the severance benefits and continuation of coverage being offered to you in connection with your separation from [Company Name], effective [Separation Date].

1. Severance Pay

The Company will provide you with a severance payment in the gross amount of \$[Amount]. This amount is subject to applicable taxes and withholdings. This payment will be made in [a lump sum / installments] starting on [Date], provided the signed Release of Claims is returned and the revocation period has expired.

2. Health Insurance Continuation (COBRA)

Your current health insurance coverage will end on [Date]. You will receive a separate package regarding your rights to continue coverage under COBRA. As part of this severance agreement, the Company agrees to pay your COBRA premiums for a period of [Number] months, provided you elect such coverage.

3. Accrued Paid Time Off (PTO)

You will be paid for all earned but unused vacation/PTO time through your final day of employment. This will be paid on [Date/Final Paycheck].

4. Outplacement Services

The Company will provide you with [Number] months of outplacement assistance through [Service Provider Name] to assist you in your career transition.

5. Retirement and Other Benefits

Information regarding your [401k/Pension] account and any other vested benefits will be sent to you under separate cover by the plan administrator.

6. Company Property

Please return all company property, including keys, laptops, and identification badges, by [Date].

To receive the severance benefits described above, you must sign and return the enclosed Separation Agreement and Release of Claims by [Deadline Date].

We thank you for your contributions to [Company Name] and wish you success in your future endeavors.

Sincerely,

[Name]

[Title]

[Company Name]

Acknowledgment:

I accept the terms and conditions outlined in this letter.

Signature: _____ Date: _____