URGENT: TIME SENSITIVE NOTICE OF REVOCATION

Date: [Current Date]

To: [Name of Contact Person/HR Representative]
Company Name: [Company Name]
Address: [Company Street Address]
City, State, Zip: [City, State, Zip Code]

Re: Revocation of Separation and Release Agreement

Dear [Name of Contact Person],

I am writing this letter to formally notify [Company Name] that I am exercising my right to revoke the Separation and Release Agreement that I signed on [Date you signed the agreement].

Pursuant to the terms of the agreement and applicable law, specifically the Age Discrimination in Employment Act (ADEA) and/or the Older Workers Benefit Protection Act (OWBPA), I am exercising my right to rescind my signature within the [Number, e.g., 7-day] revocation period.

By this notice, the agreement is now null and void. I understand that by revoking this agreement, I am no longer eligible to receive the severance payments or benefits described therein. If any payments have already been issued to me, please provide instructions on how they should be returned.

Please acknowledge receipt of this revocation in writing immediately.

Sincerely,

[Your Signature]

[Your Printed Name]
[Your Employee ID Number, if applicable]
[Your Phone Number]
[Your Email Address]

Method of Delivery: [e.g., Certified Mail / Hand Delivery / Email]