[Company Letterhead]

[Date]

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

Re: Extension of Severance Benefits

Dear [Executive Name],

Reference is made to your Employment Agreement dated [Original Date] and the Separation Agreement dated [Separation Date].

This letter serves as formal notification that [Company Name] (the "Company") has elected to extend the duration of your severance benefit period. Specifically, the Company will extend the following benefits:

- **Salary Continuation:** Extended from [Original End Date] to [New End Date].
- **Health Benefits (COBRA):** Extended from [Original End Date] to [New End Date].
- **Outplacement Services:** Extended through [New End Date].

The total additional gross compensation for this extension period is $[Amount], to be paid in accordance with the Company's standard payroll schedule. All other terms and conditions set forth in your original Separation Agreement, including your ongoing obligations regarding confidentiality and non-disparagement, remain in full force and effect.

Please acknowledge your receipt and acceptance of this extension by signing below and returning a copy to the Human Resources Department by [Deadline Date].

Sincerely,

[Signature]
[Name of Authorized Officer]
[Title]

Acknowledgment and Acceptance:

Signature: _____ Date: _____