[Date]

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

Subject: Notice of Termination of Employment

Dear [Employee Name],

Please be advised that your employment with [Company Name] is terminated, effective [Effective Date].

This decision has been made following an investigation into a conflict of interest. Specifically, it has been determined that [briefly describe the nature of the conflict, e.g., your undisclosed involvement with a competitor / the personal financial interest in a company vendor].

This conduct constitutes a violation of our company's Conflict of Interest Policy and the terms of your employment agreement. As a result, you are disqualified from continued employment with the organization.

Regarding your final compensation and benefits:

- Your final paycheck, including payment for hours worked up to [Effective Date] and any accrued vacation time, will be issued on [Date].
- Your health insurance coverage will continue until [Date], after which you will receive information regarding COBRA or other conversion options.
- Please return all company property, including keys, identification badges, and electronic devices, to [Department/Person] by [Date].

We remind you of your ongoing obligations regarding [confidentiality/non-disclosure/non-compete] agreements that you signed during your tenure.

If you have questions regarding your benefits or the return of company property, please contact [HR Contact Name] at [Phone Number/Email].

Sincerely,

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