

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

[Date]

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

Subject: Notice of Termination of Employment

Dear [Employee Name],

Please accept this letter as formal notification that your employment with [Company Name] is terminated, effective [Effective Date].

This decision has been made due to [Reason for Termination: e.g., restructuring, performance issues, or misconduct].

Your final paycheck, which includes payment for work completed up to your final day and any accrued vacation time, will be issued on [Date] via [Payment Method].

Regarding your company benefits:

- Your health insurance coverage will continue until [End Date].
- Information regarding your [401k/Pension] and COBRA rights will be sent to you by mail.

Please return all company property, including [Keycards, Laptop, Documents, etc.], by [Date/Time] to [Specific Department/Person].

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

Sincerely,

[Signature]

[Name of Manager/HR Representative]
[Job Title]