

[Date]

[Employee Name]

[Employee ID]

[Department]

**Subject: Notification of New Compensation Details**

Dear [Employee Name],

We are pleased to inform you of a change to your compensation. Effective [Effective Date], your annual base salary will be adjusted to reflect your current role and contributions to [Company Name].

Your new compensation details are as follows:

- **Position Title:** [Job Title]
- **Exemption Status:** Exempt (Salaried)
- **New Annual Base Salary:** \$[Amount]
- **Pay Period Salary:** \$[Amount] (paid [Monthly/Bi-weekly])

As an exempt employee, you are paid a fixed salary for all hours worked and are not eligible for overtime pay under the Fair Labor Standards Act (FLSA). All other terms and conditions of your employment remains unchanged.

We appreciate your hard work and continued dedication to the team. If you have any questions regarding these changes, please contact the Human Resources department.

Sincerely,

[Sender Name]

[Sender Title]

[Company Name]

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**Acknowledgment:**

I acknowledge that I have received and understand the details of my new compensation as outlined above.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_