Your Name
Your Address
Your City, State Zip Code
Your Phone Number
Your Email

Date

Name
Title
Company Name
Address
City, State Zip Code

Dear Mr./Ms. Last Name:

Please accept this letter as notification that I am leaving my position with ABCD on September 15.

If I can be of assistance during this transition, please let me know.

Sincerely,

Your Signature (hard copy letter)

*﻿*Your Typed Name