**SAMPLE TERMINATION LETTER OF EMPLOYEE BENEFITS**

From,
**(Company Name)
(Street Address)
(City, State Pin Code)**

To,
**(Employee details)
(Date)**

According to our records, you have been inactive in conducting research-based activities with the organization for the given financial year **(add date)**. Therefore, you will not be eligible to receive research allowance or grants from the company. Further, any additional benefits associated with the aforementioned allowance will get discounted from **(add** **date).** Other privileges and benefits that will continue are outlined in the attached document summary.

Last Date of benefits eligible status \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Date of cancellation of eligible benefits \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Sincerely,

**(Name)
(Title)
(Signature)**