



# Precision Payroll Termination Form

Fax (812) 401-6880

From: \_\_\_\_\_  
Company: \_\_\_\_\_

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

Employee Name: \_\_\_\_\_

Termination Date: \_\_\_\_\_

Reason for Termination (Please circle one that applies):

- For Cause
- Other
- Resignation
- Retirement
- Return to School
- Workforce Reduction

Submitted by: \_\_\_\_\_  
Company Contact