

GOLDEN HANDSHAKE AGREEMENT

Payroll Disbursement Sheet

EMPLOYEE INFORMATION

Employee Name		Employee ID	
Job Title		Department	
Separation Date		Agreement Date	

DISBURSEMENT & COMPENSATION BREAKDOWN

Description	Amount (\$)
Severance Pay (Base Lump Sum)	
Notice Period Compensation	
Accrued & Unused Annual Leave / PTO	
Pro-rata Performance Bonus / Commission	
Executive Retainer / Special Consideration	
Outplacement Services Cash Equivalent	
Gross Disbursement Amount	

DEDUCTIONS & TAX WITHHOLDINGS

Deduction Description	Amount (\$)
Federal Income Tax Withholding	
State / Local Income Tax Withholding	
FICA (Social Security / Medicare)	
Other Deductions (Company Property / Outstanding Loans)	
Total Deductions	

NET SEVERANCE DISBURSEMENT AMOUNT

PAYMENT EXECUTION METHOD

Payment Method	
Bank Name	
Account Number (Last 4 Digits)	
Routing Number	
Scheduled Transfer Date	

AUTHORIZATION & ACKNOWLEDGEMENT

By signing below, the parties agree that this disbursement sheet accurately reflects the financial terms of the Golden Handshake Agreement. The employee acknowledges receipt of the terms, and the payroll department is authorized to execute the payments listed above.

Employee Signature

Date: _____

Authorized HR Representative Signature

Date: _____

Chief Financial Officer / Finance Director

Date: _____

Payroll Administrator Signature

Date: _____

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