



CITY OF DECATUR, TEXAS

Employee: _____

Term Date: _____

CITY OF DECATUR TERMINATION CHECKLIST

SECTION 1 (to be completed by the Department Head/Supervisor)

RECEIVED THE FOLLOWING

- _____ PHONE AND WIRELESS CARD
- _____ CREDIT CARD(S)/PURCHASE CARD
- _____ EQUIPMENT/VEHICLE
- _____ UNIFORMS
- _____ KEYS
- _____ BADGE
- _____ REIMBURSEMENTS DUE TYPE _____ AMOUNT _____

I acknowledge that all City of Decatur property issued to this employee has been collected and returned to the appropriate department.

Department Head/Supervisor Signature _____	Date _____
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SECTION 2 (to be performed by Human Resources)

- _____ EXIT INTERVIEW
 - _____ INFORMATION REGARDING TMRS
 - _____ INFORMATION REGARDING LAST PAYCHECK
 - _____ BENEFIT TIME PAYOUT
 - _____ SEVERANCE
- PERFORM THE FOLLOWING:
 - _____ NOTIFY IT SERVICES TO TERMINATE SYSTEM ACCESS
 - _____ TERMINATE ACCESS IN HR CONNECTION
 - _____ NOTIFY THE FINANCE DIRECTOR TO TERMINATE THE EMPLOYEE'S PURCHASE CARD
 - _____ TERMINATE ACCESS IN WORK ORDER SYSTEM (PUBLIC WORKS ADMIN)
- _____ CANCEL COVERAGE:
 - _____ MEDICAL
 - _____ DENTAL
 - _____ VISION
 - _____ ANCILLARIES
 - _____ GROUP LIFE
 - _____ FSA
 - _____ LTD
 - _____ FRESHBENIES
- _____ OVERRIDE INSURANCE DEDUCTIONS
- _____ DISTRIBUTE COBRA NOTIFICATION