

AARON THOMAS COMPANY, INC. CONTRACT PACKAGING

7421 Chapman Avenue • Garden Grove, CA 92841-2109 • (714) 894-4468 • FAX (714) 895-4800 5649 Distribution Drive • Memphis, TN 38141 • (901) 360-0516 • FAX (901) 360-0573 21561 W. Division St, Crest Hill IL 60403 •(815) 272-2950 • FAX (815) 272-2951

EMPLOYEE RESIGNATION FORM

If you would like to talk to someone in Human Resources before completing this form, please call: (714)894-4468 PST 8:00 am. – 5:00 p.m.

First Name:	Last Name:	Middle Initial:
Social Security Number (Last 4 digits o	only): XXX-XX	
Division Location:	Position/Title:	
Resignation Effective (mm/dd/yyyy):		
Reason for Resignation:		
I certify that this resignation is executed by me voluntarily and of my own free will.		

Employee Signature Date

Print Name

Please be aware that we will send your final W-2 tax document to the address that we have on file. Should you relocate, you will want to update your address with us to ensure timely receipt.

To email a scanned copy, submit to ebacon@packaging.com or ypineda@packaging.com To mail a copy, send to: 7421 Chapman Ave, Garden Grove CA 92841 Attention: Human Resource Department