

Domestic Relations Order Drafting Request Form

_____ Qualified Domestic Relations Order (QDRO)	\$375
_____ State Pension (e.g., Division of Property Order (DOPO))	\$375
_____ Federal Pension	\$375
_____ Military.....	\$500
_____ IRA Letters of Instruction	\$200

Payment is required in advance. \$100.00 off additional orders arising out of the same matter. No additional fee to correct a rejected order so long that it is timely returned.

CASE INFORMATION

Complete this section and the Plan and Employer Information section below.

1. Requesting Attorney Information:

Represents: _____ Participant/Member _____ Alternate Payee/Former Spouse

Name: _____

Mailing Address: _____

Phone: (_____) _____ Fax: (_____) _____ Email: _____

Send the QDRO via _____ Email; _____ Ordinary Mail; _____ Other: _____

Send a courtesy copy of the draft order to opposing counsel? ____yes ____no

2. Opposing Counsel Information (if any):

Name: _____

Mailing Address: _____

Phone: (_____) _____ Fax: (_____) _____ Email: _____

3. Participant (Employee) Information:

Name: _____

Mailing Address: _____

Social Security Number: _____ - _____ - _____ Date of Birth: _____ / _____ / _____

4. Alternate Payee (Former Spouse) Information:

Name: _____

Mailing Address: _____

Social Security Number: _____ - _____ - _____ Date of Birth: _____ / _____ / _____

5. Pre-approval:

If the Plan permits, obtain the Plan's pre-approval on the draft QDRO prior to sending to counsel? ____yes ____no

(Note: the pre-approval process adds additional time as QDRO Partners awaits the response from the Plan)

CASE INFORMATION (continued)

6. Information on Marriage and Divorce:

Date of Marriage: _____ / _____ / _____

Date of Divorce: _____ / _____ / _____

Date for Assignment (if different than Date of Divorce): _____ / _____ / _____

County and State of Divorce: _____

7. Documents:

Please provide any and all of the following documents in your possession:

___ Divorce decree/separation agreement

___ Limited Authorization form

___ Account statement/annual benefits statement

___ The plan's QDRO Procedures/Summary Plan Description

PLAN AND EMPLOYER INFORMATION

(for 401(k) and other defined contribution plans, defined benefit pension plans, and state of Ohio pension plans)

Company/Employer Name: _____

Name of HR Representative: _____

Phone: (_____) _____ Email: _____

Name of Plan(s): _____

Name of Plan Administrator: _____

Contact Person: _____

Address: _____

Phone: (_____) _____ Email: _____

Participant's employment status at above Employer: ___ Active ___ Inactive

Benefit in pay status? ___ Yes ___ No

Additional Directives/Comments?

Please include any additional information that may not be clear in the divorce decree/separation agreement.

401(k) Plans: For a 401(k) or other defined contribution plan, indicate (1) whether investment interest and gains and losses shall be included, (2) if a percentage is assigned, whether a pending loan should be excluded (therefore reducing the amount to be transferred), and (3) any other directives. _____

Pension Plans: For a defined benefit pension plan, indicate (1) whether the traditional coverture approach or frozen benefit approach should be utilized, (2) whether the Separate Interest or Shared Payment approach should be utilized (must be Shared Payment if the plan is a government pension or if a pension is in pay status), and (3) any other directives. _____

FEDERAL PENSION PLANS: EMPLOYEES RETIREMENT SYSTEM (FERS) AND CIVIL SERVICE RETIREMENT SYSTEM (CSRS)

- Presently employed with Federal Government
 Not presently employed with Federal Government
 Retired on: _____ / _____ / _____
 Participant currently receiving payments from the Plan
 Participant elected Former Spouse Survivor Annuity coverage at retirement

Amount of Assignment

- Traditional Coverture Approach (50% of Marital Portion of the Participant's Self-Only, unreduced Monthly Annuity determined as of the Participant's date of retirement); If in pay status, OPM will not calculate.
 \$_____ from Employee Annuity Upon Retirement

Refund of Employee Contributions: In the event the Employee separates from a covered position in federal service and requests a refund of Employee contributions, the Former Spouse shall receive which of the following:

- A "Prorata" Share (If this occurs, all future rights that either party may have in an employee or survivor annuity are terminated)
 Nothing (Former Spouse also then relinquishes any employee annuity and survivor annuity)
 Bar payment of refund to the Employee
 \$_____

If Former Spouse Predeceases Employee, the Office of Personnel Management (OPM) is directed to pay the Former Spouse's share as follows:

- To Former Spouse's Estate
 Back to Employee

Former Spouse Survivor Annuity

- Include Former Spouse Survivor Annuity Protection for Former Spouse as follows:
 Pro Rata Share
 Maximum Possible.
 Do not Include Former Spouse Survivor Annuity Protection. Former spouse will not receive any benefits upon Employee's death.

Indicate Whether Cost-of-living (COLA) adjustments Applied to Former Spouse's Share.

- Yes No

MILITARY RETIRED PAY

The Member's Present Status: _____ Active _____ Reservist _____ Retired

Branch of Service:

_____ Army _____ Navy _____ Air Force _____ Marines _____ Coast Guard

10/10 Rule: Was the former spouse married to the member for a period of at least ten years during which the member performed at least ten years of service creditable toward retirement eligibility?

_____ Yes _____ No

If the 10/10 Rule is not met, the Defense Finance and Accounting Service will not honor the court order.

Amount of Assignment

_____ Traditional Coverture (50% of Marital Portion)

_____ If Active, number of months of the Member's creditable military service in the Plan earned during the marriage: _____

_____ If Reservist, number of Points of the Member's creditable military service in the Plan earned during the marriage: _____ (or provide a Points Record)

*If retired, must select dollar amount or percentage below.

_____ Fixed Dollar: \$_____ from Military Retired Pay Upon Retirement

_____ Percentage: _____% of Military Retired Pay upon Retirement. This shall not exceed 50%.

Survivor Benefit Plan (SBP) Protection for Former Spouse

_____ Include Former Spouse Survivor Benefit Plan (SBP) Protection for Former Spouse as follows:

_____ Alternate Payee's Assigned Portion

_____ Maximum Possible.

_____ Do not Include Former Spouse Survivor Benefit Plan (SBP) Protection for Former Spouse. Former spouse will not receive any benefits upon Member's death.

Indicate Whether Cost-of-living (COLA) adjustments Applied to Former Spouse's Share.

_____ Yes _____ No

Note: May only utilize COLA language when Former Spouse is assigned a **percentage** of the pension benefit.

- If there are any special directives, please include in a cover letter or via email to ben@qdropartners.com.
- QDRO Partners is only providing drafting and consulting services for domestic relations orders and does not provide legal advice or services. We do not represent individual clients and the use of our QDRO-drafting service does not create a client-lawyer relationship.
- It is the responsibility of the requesting attorney to ensure the terms of the domestic relations order prepared by QDRO Partners conform with the terms of the parties' settlement agreement.
- It is also the requesting attorney's responsibility to ensure that the appropriate steps are taken after receipt of the draft order so that the order is approved by the plan administrator.