NEW (Q)DRO REQUEST

Note: The use of this form may result in processing delays. The most efficient method of submitting a new (Q)DRO request is through the completion of the online form.

BEFORE YOU BEGIN:

- Have the names, addresses (email and mailing), phone numbers, and dates of birth for the both the Alternate Payee and Participant. This information is required.
- The last four numbers of the Participant's Social Security number is appreciated. This information is often requested by the Plan when we are gathering information.
- For this request to be processed efficiently, provide all supporting documents to along with this packet to our Intake Manager at intake@qdroco.com. Supporting documents include: divorce decree, settlement agreement, and statement(s)*.

Once you have submitted the Intake Form, the following will happen:

- Our Intake Manager will review the form and supporting documents and establish the appropriate matter(s) in our system. You will be contacted regarding outstanding information or division clarification.
- Both parties (Alternate Payee and Participant) will receive an email indicating that an New (Q)DRO Request has been submitted on their behalf, and will be provided with the balance owed and payment instructions.
- Both parties will receive an email to our Retention Agreement for review and electronic signature.

Drafting begins only after all of the following conditions are met:

- We have received a copy of the parties' divorce decree.
- We have received the settlement/mediation agreement addressing the retirement plan division (needed only if the division is not specifically addressed in the divorce decree).
- We have received a statement for each account/benefit being divided.*
- Our Retention Agreement has been signed.
- We have received payment in full.

^{*}Unless an equalization calculation is needed, an account/benefit statement is not mandatory. If you need an equalization calculation, statements for the division date are required before any work will commence.

QDRO REQUEST FORM

A standard Order includes: (1) plan document review; (2) retirement plan verification; (3) a draft Order; and (4) pre-approval if the Plan will review a draft.

□ I would like pre-approval (if allowed by the Plan).

Note: A review of the draft QDRO typically takes 30-60 days.

PART A: CASE INFORMATION

PLAINTIFF / PARTY A:	DEFENDANT / PARTY B:
Name:	Name:
Street Address:	Street Address:
City, State Zip:	City, State Zip:
Phone Number:	Phone Number:
Email Address:	Email Address:
Social Security Number:	Social Security Number:
Date of Birth:	Date of Birth:
The Social Security Number is necessary for the Partici	
Plaintiff / Party A is the: ☐ PLAN PARTICIPANT ☐ ALTER	NATE PAYEE
Are either parties intending to move to a different address wit	hin the next 60 days? □Yes □ No
If yes, which party? \square Plaintiff / Party A \square Defendant / I	Party B
Name of the person completing this form:	

QDROCO generally requires that <i>at least one party</i> be represented by an	attorney. Provide the name(s) of the applicable attorney(s) below.
Plaintiff □ does □ does not have an attorney	Defendant □ does □ does not have an attorney
PLAINTIFF/PARTY A ATTORNEY:	DEFENDANT/PARTY B ATTORNEY:
Attorney Name:	Attorney Name:
Firm Name:	Firm Name:
Street Address:	Street Address:
City, State Zip:	City, State Zip:
Phone Number:	Phone Number:
Email Address:	Email Address:
COURT INFORMATION:	DURATION OF MARRIAGE:
Case No.:	Date of Marriage:
Judge:	Date of Divorce:
County:	Date of Division:
PART B: PAYMENT INFORMATION (Q)DRO Drafting: \$500 Order Dividing Military Retirement Pay: Call for Equalization Calculation: \$100	or Quote
How are the fees to be paid?	
Who is your preferred consultant?	

PART C: PLAN INFORMATION

QDRO #1 — INFORMATION FOR RETIREMENT PLAN BEING DIVIDED

Employee (Participant) Na	me:		Gender:	
Employer/Company Nam	e:			
Company Phone:		Contact Person: _		
Plan Name:				
Hire Date:				
Employment Status:	□ Hourly □ Employed		□ Retired	(Date of Retirement)
	e details are not includ _% of Total Account Bal	led in the Judgment. If b	ooth are silent we	will use our defaults.
	as of//			
□Other:				
• Include gains/losses (d	choose one): □Yes <i>(de</i>	<i>fault </i> □No		
• Loan Treatment (choos	e one): □Include in toto	al account balance □Exc	clude from total ac	ccount balance (default)
Assignment Instructions Complete this section if the • Amount: %		in the Judgment. If both	*	use our defaults.
%+ %+ \$	rozen as of the divorce otal benefit at retiremen	date t		
Whose life expectancyInclude a qualified preInclude a qualified posInclude early retiremen	? * □ Alternate Payee -retirement survivor annu	e (separate interest) <i>(defa</i> uity (QPSA)?	<i>fault</i>) □ No	

^{*} If the Participant is in payout status, a shared payment approach is the only option and the form of benefit elected at the Participant's retirement cannot be altered.

PART C: PLAN INFORMATION

<u>QDKO #2</u> — INFUKMAI Employee (Participant) Nar				
Employer/Company Name	e:			
Company Phone:		Contact Person: _		
Plan Name:				
Hire Date:				
Employment Status:	☐ Hourly	☐ Salaried		
	☐ Employed	☐ Terminated	☐ Retired	(Date of Retirement)
Assignment Instructions (e.g., 401(k), 403(b), for Complete this section if the	Profit Sharing, Thrift I	Plans, Deferred Comp)		e will use our defaults.
□\$	as of / /	ce as of//;		
• Include gains/losses (c				
Loan Treatment (choose	e one): 🗆 Include in tot	al account balance □E×	clude from total c	account balance (default)
% fr	details are not included narital portion coverture ozen as of the divorce	in the Judgment. If both date	*	use our defaults.
\$ r	otal benefit at retiremen oer month	t		
Whose life expectancy?Include a qualified pre-	? * □ Alternate Payee retirement survivor annu- retirement joint and sur- subsidies and suppleme		fault) 🗆 No	

* If the Participant is in payout status, a shared payment approach is the only option and the form of benefit elected at the Participant's retirement cannot be altered.

IF YOU NEED ADDITIONAL QDROS, PLEASE SUBMIT AN EXTRA SHEET.

Additional Comments and Further Directives:				
Use the space below for any information we should know that was not previously indicated.				

THE RETENTION AGREEMENT & PAYMENT INFORMATION WILL BE EMAILED TO THE PARTIES If the parties do not use email, we will forward this information to you to share with your client.