

- Name, Address, Phone, E-mail, Fax, of the **Plan Administrator**:

Administrator: _____

Address: _____

Phone: _____ Fax: _____

E-Mail: _____

- Name, Address, Phone, E-Mail, Fax of the **Employer**:

Employer: _____

Address: _____

Phone: _____ Fax: _____

E-Mail: _____

- Time Period Applicable: Total time married
 Date during marriage employment began

- How are benefits to be split (detail): _____

Use a formula?

- Woodward Formula - percentage of marital portion of accrued benefit (pension only)
 Subtraction Method - percentage of total account balance earned during marriage (defined contribution plan, e.g., 401(k), only)
 Other (describe) _____

Should the Alternate Payee have survivorship rights to the benefits (for a Pension Plan)?

- Yes No

Should the Alternate Payee's benefit provide for inflationary protection (for a Pension Plan)?

Yes No

Should pro-rata cost-of-living adjustments be included for the Alternate Payee (for a Pension Plan)?

Yes No

Should the duration of benefits (for a Pension Plan) be based on the Alternate Payee's life expectancy or on the Participant's life expectancy?

Alternate Payee Participant

Is the Alternate Payee entitled to interest and earnings? From what date?

Yes (Date _____) No

Should the Alternate Payee's share be calculated without regard to any previous loans or withdrawals made by the participant?

Yes No

- Attach copy of decree of divorce signed by court**
- Attach QDRO packet or form from Plan Administrator, if any**
- Include fee**

Send checklist and attachments to:

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