



P.O. Box 4396 Allentown, PA 18105-4396 1-800-447-0084 - Fax: 610-770-9342

www.pensionappraisers.com www.qdrodesk.com

## DOMESTIC RELATIONS ORDER CHECKLIST FOR ALABAMA STATE RETIREMENT SYSTEM PLANS

Option #1: Online - Answer questions at www.qdrodesk.com. Upon completion download the Order immediately. Unlimited Support 1-877-770-2270 (Toll Free) Cost - \$299. Pre-approval with the Plan Administrator may be available for an additional \$100 fee after an analyst in the office completes the free 9-point review process.

Option #2: In House - Complete this checklist and mail it with payment to Pension Appraisers. Our staff will prepare the Order and return it within 7-10 business days. Unlimited Support 1-800-447-0084 (Toll Free). Cost - \$495. You may opt in to our Pre-approval process on the last page for an additional \$75 fee.

**Both Options are Supported by Pension Appraisers Staff** 

Name:			
Firm Name:			
Attorney ID (if applicable):			
Mailing Address:			
City:			
Telephone #:	Fax #:		
E-mail Address:			
If you are one of the Parties of the (If you are an attorney and have alro	e divorce who is rep	resented by an atte	orney please provide your a
Name:	•	•	-
Attorney ID (if applicable):			
Firm Name:			
Mailing Address:			
City:	State:	Zip Code:	
City: Telephone #:			
Telephone #:	Fax #:		
Telephone #: E-mail Address:	Fax #:		
Telephone #: E-mail Address: Should the attorney's name and/o	Fax #:or firm name, addres		
Telephone #: E-mail Address: Should the attorney's name and/o Legal Caption? Yes	Fax #:or firm name, addres		
Telephone #: E-mail Address: Should the attorney's name and/o Legal Caption? Yes If Yes:	Fax #: or firm name, addres	ss and telephone n	
Telephone #: E-mail Address: Should the attorney's name and/o Legal Caption? Yes If Yes: Attorney's Name	Fax #: or firm name, addres No Firm's N	ss and telephone n	
Telephone #: E-mail Address: Should the attorney's name and/o Legal Caption? Yes  If Yes: Attorney's Name Are you the (or, if attorney)	Fax #: or firm name, addres No Firm's No y, who do you repre	ss and telephone n lame sent?):	
Telephone #: E-mail Address: Should the attorney's name and/o Legal Caption? Yes  If Yes: Attorney's Name Are you the (or, if attorney) Plaintiff / Petitione	Fax #: or firm name, addres No Firm's N y, who do you repre r Defend	ss and telephone n lame sent?): ant / Respondent	umber appear above the
Telephone #: E-mail Address: Should the attorney's name and/o Legal Caption? Yes  If Yes: Attorney's Name Are you the (or, if attorney)	Fax #: or firm name, addres No Firm's N y, who do you repre r Defend	ss and telephone n lame sent?): ant / Respondent	umber appear above the

Mailing Address:			
City:	State:	Zip Code: _	
Telephone #:	Fax #:		
E-mail Address:			<del></del>
COURT INFORMATION:			
Name of Court:			
State:	County:		
Division:	Docket Nun	nber:	
Which party is considered the plaintiff	/petitioner?		
PARTNER 1 - The Participant: (I	Employee Spouse)		
PARTNER 2 - The Alternate Pay	ree: (Non-Employee Sp	ouse)	
In addition to the Judge's, what signate	ure lines should come	at the end of the	Order?
None	Attorney	s for Both Partne	ers
Both Partners Opposir	ng Atty. Name:		_
PARTNER 1 - The Participant: (Employ	/ee Spouse)		
Name of Participant:			
Date of Birth:			
Last Known Mailing Address:			
City, State, Zip Code:			
Phone:			
Social Security Number:	Gender:	Male	Female
PARTNER 2 - The Alternate Payee: (No			_
Name of Alternate Payee:			
Date of Birth:			
Last Known Mailing Address:			
City, State, Zip Code:			
Phone:			
Social Security Number:	Gender:	Male	Female
MISCELLANEOUS INFORMATION:		· · · -	
Should Social Security Numbers appear	ar in the Order?	Yes No	
Marriage Date:		- <del></del>	
Are the Parties Divorced? Yes _		Date of Divorce:	
Cut-off date for marital property rights (Cut-off date used to determine marital co			
	· ·		
Plan Name to which this Order applies	):		
Plan Name to which this Order applies  Alabama State Employee Retire			
••	ement System (ERS)		
Alabama State Employee Retire	ement System (ERS) ment System		
Alabama State Employee Retire	ement System (ERS) ment System		

	Is the Particip	ant receiving retirement benefits? Yes No <u>If Yes:</u> Retirement Date:
6A.	ANSWER THE OTHERWISE	ESE QUESTIONS ONLY IF THE PARTICIPANT IS RETIRED AND RECEIVING BENEFITS, SKIP TO 6B:
	I.	Percent or Dollar Amount of Employee's monthly retirement benefit to be paid by the Plan to the Alternate Payee?
		Dollar Amount: \$
		Percent: %
		Option #1: Percent of Total as of the Date of Retirement: The Alternate payee will receive a percentage of the total accrued benefit as of the Date of Retirement. (This option includes any pre-marital and post-marital credited service).
		Option #2: Percent of the Marital Portion as of the Date of Retirement: The Marital Property Component shall be determined by a fraction, the numerator of which is the number of months of credited service the Employee earned during the marriage and the denominator of which is the total number of months of credited service earned through the Date of Retirement.
	II.	Should the Alternate Payee receive a pro-rata share of any Post-retirement Cost of Living Adjustments if offered by the Plan?
		Yes No
	III.	Should the Alternate Payee receive a pro-rata share of any Early Retirement Subsidies?
		Yes (Most defined benefit pension plans have early retirement provisions that allow an employee to retire early with full unreduced benefits if they complete a specific number of years of service. By doing this the company is subsidizing a large portion of the employee's pension by eliminating the actuarial adjustment (the difference in the amount of monthly benefit are employee would receive at normal retirement age verses an early retirement age if there is no subsidy - Example: An employee could receive \$1,000 per month at age 65, but if he/she elects to retire at age 55 he/she would receive \$500 per month for life if they had not completed the required number of years of service to receive the unreduced benefit of \$1,000 per month).
	IV.	Should the Alternate Payee receive a pro-rata share of any early retirement supplements, interim supplements or temporary benefits that become payable to the Participant which are not considered by the Plan Administrator to be a part of the Participant's accrued benefit.?
<b></b>	4 NOWED TU	Yes  (Most defined benefit pension plans have early retirement incentives that allow certain eligible employee's to retire early with additional supplemental, interim or temporary benefits. Example: If an employee retires at age 55, the plan could pay a supplemental benefit to age 62, at which time the employee would be able to collect Social Security.)
6B.	ANSWER THE EMPLOYMEN	ESE QUESTIONS ONLY IF THE PARTICIPANT IS STILL EMPLOYED OR HAS TERMINATED T BUT IS NOT RECEIVING RETIREMENT BENEFITS, OTHERWISE ANSWER 6A:
	I.	Percent or Dollar Amount of Employee's monthly retirement benefit to be paid by the Plan to the Alternate Payee?
		Dollar Amount: \$
		Percent: %
		Option #1: Percent of Total as of a Specific Date which is The Alternate Payee will receive a percentage of the total accrued benefit as of a Specific Date.
		Option #2: Percent of the Marital Portion as of the Date of Retirement: The Marital Property Component shall be determined by a fraction, the numerator of which is the number of months of credited service the Employee earned during the marriage and the denominator of which is the total number of months of credited service earned through the Date of Retirement.
		Option #3: Percent of the Marital Portion as of the Marriage End Date: The Marital Property Component shall be determined by a fraction, the numerator of which is the number of months of credited service the Employee earned during the marriage and the denominator of which is the total number of months of credited service earned through the Marriage End Date.
		Option #4: Percent of the Marital Portion as of a  Specific Date which is Component shall be determined by a fraction, the numerator of which is the number of months of credited service the earned from the Date of Marriage to a Specific Date and the denominator is the total number of months of credited service earned through the Specific Date.
		Option #5: Percent of Total as of Marriage End Date: The Alternate Payee will receive a percentage of the total accrued benefit as of the Date Marriage Ended. (This option includes any pre-marital credited service)
	II.	Should the Alternate Payee receive a pro-rata share of any Post-retirement Cost of Living Adjustments if offered by the Plan?
		Yes No

III.	Should the	Alternate Pa	yee receive a p	ro-rata share of	any Early Retiremer	nt Subsidies?
	(Most defined unreduced berortion of the cemployee wou employee coumonth for life i per month).	benefit pension place if they compension place if they compension place if they compension if they had not compension place if they	ans have early retire lete a specific numb on by eliminating the nal retirement age ve per month at age 65 npleted the required	ement provisions that er of years of service actuarial adjustment grses an early retirem , but if he/she elects number of years of se	allow an employee to retire By doing this the compan (the difference in the amou ent age if there is no subsic to retire at age 55 he/she v ervice to receive the unredu	e early with full y is subsidizing a large nt of monthly benefit at dy - Example: An vould receive \$500 per uced benefit of \$1,000
IV.	Should the interim sur not consid (This ques	e Alternate Par oplements or ered by the P tion is N/A if t	yee receive a p temporary ben lan Administra the Participant	ro-rata share of efits that becom tor to be a part o has terminated o	any early retirement e payable to the Par if the Participant's a employment)	t supplements, ticipant which are ccrued benefit?
	Yes (Most defined additional sup supplemental	No benefit pension pl plemental, interim benefit to age 62,	ans have early retire or temporary benef at which time the er	ement incentives that ts. Example: If an er nployee would be able	allow certain eligible emplo nployee retires at age 55, t e to collect Social Security.	yee's to retire early with he plan could pay a )
V.	Should the event the F	Alternate Par Participant die	yee designated es prior to reac	as a beneficiary	for any death bene	fits payable in the
	Yes	If Yes: _	The Alte	rnate Payee sha all death benefi	II be designated as t	the beneficiary fo an.
	No	OR: _	The Alte death b compor	rnate Payee sha enefits payable t lent.	II be designated as to the extent of the n	the beneficiary fo narital property
	If the Alter Alternate F	nate Payee pr Payee's portio	redeceases the	Participant prio pant's benefit sh	r to commencement nall:	of benefits, the
					o the Alternate Paye s do not allow this under th	
VI.	Should the Alternate F Payee for I	Payee as the b his/her lifetime	eneficiary in o e?	lect a specific re rder to ensure p Option:	etirement option and ayment of benefits t	designate the o the Alternate
		_		•		
	No					
For an addit	ional fee of \$7	'5.00: Should	we submit the	Order to the Pla	n Administrator for <sub>l</sub>	ore-approval?
Yes _	No <u>lf Y</u>	<u>'es:</u> In order f	for us to obtain	pre-approval yo	ou <u>MUST</u> provide the	e following:
Adm	inistrator's Na	ame:				_
Addr	ess:					
					Code:	_
Tele	phone #:		Fax	#:		
Payment car	n be made by	Check, Money	y Order or Cred	lit Card.		
Cred	it Card:	MC _	Visa	Amex _	Discover	
Cred	it Card #:					
		Expiratio	n Date:	/	CVV:	
Name as it ap	opears on the o	credit card: _				_
Billing addres	s of the credit	card: _				_
-						_
Checks and N	Money Orders	should be mad	le payable to Pe	nsion Appraisers	, Inc.	
FAX THIS RE	QUEST FOR	with personal o M TO: 610-770	criecks will be he )-9342 (only if pa	eid for two weeks aying by credit ca	, Inc. to ensure that the chord) rd) 5 Allentown PA 1810	eck ciears.

MAIL THIS REQUEST FORM TO: Pension Appràisers, Inc., P.O. Box 4396, Allentown, PA 18105 Any questions regarding this Request Form or fees, please call us toll free at 1-800-447-0084.