



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 COLORADO 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

1

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

-			
City:	State:	Zip Code:	
Telephone #:	Fax #:		
E-mail Address:			
COURT INFORMATION:			
Name of Court:			
State:			
Division:			
Which party is considered the plaintiff/petitioner?			
PARTNER 1 - The Participant: (Employee Spouse)			
PARTNER 2 - The Alternate	Payee: (Non-Employee Sp	ouse)	
In addition to the Judge's, what sig	gnature lines should come	at the end of the Order?	
None	Attorney	s for Both Partners	
Both Partners Opp	oosing Atty. Name:		
PARTNER 1 - The Participant: (Employee 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:	: (Non-Employee Spouse)		
Name of Alternate Payee:	` ' ' ' '		
Date of Birth:			
Last Known Mailing Address:			
City, State, Zip Code:			
Phone:			

	Colora	ado Police and Fire
	Denve	r Employees Retirement Plan
	Other	- Exact Plan Name:
	(The number	one reason Orders are rejected is because the plan name is wrong. Please provide a statement document showing the complete, correct legal name of the plan.)
	_	ant Joined The Plan:
		pant still employed? Yes No <u>If No:</u> Termination Date:
	Is the Particip	pant receiving retirement benefits? Yes No <u>If Yes:</u> Retirement Date:
6 A .	ANSWER TH	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 an 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.?
		YesNo
		(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	ESE QUESTIONS ONLY IF THE PARTICIPANT IS STILL EMPLOYED OR HAS TERMINATED IT BUT IS NOT RECEIVING RETIREMENT BENEFITS, OTHERWISE ANSWER 6A:
	l.	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

	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.	е
	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 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 a 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).	e มูก r
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 ar not considered by the Plan Administrator to be a part of the Participant's accrued benefit? (This question is N/A if the Participant has terminated employment)	·e
	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.)	th
V.	Should the Alternate Payee designated as a beneficiary for any death benefits payable in the event the Participant dies prior to reaching retirement?	ıe
	Yes If Yes: The Alternate Payee shall be designated as the beneficiary for any and all death benefits payable by the plan.	or
	OR: The Alternate Payee shall be designated as the beneficiary for death benefits payable to the extent of the marital property	or
	component.	
	If the Alternate Payee predeceases the Participant prior to commencement of benefits, the Alternate Payee's portion of the Participant's benefit shall:	
	Revert to the Participant. OR Be paid to the Alternate Payee's estate. (Some Plans do not allow this under their guideline)	
VI.	Should the Participant be required to elect a specific retirement option and designate the Alternate Payee as the beneficiary in order to ensure payment of benefits to the Alternate Payee for his/her lifetime?	
	Yes If yes: Name of Benefit Option:	
	Description:	
	No	
r an additid	onal fee of \$75.00: Should we submit the Order to the Plan Administrator for pre-approval?	
	No If Yes: In order for us to obtain pre-approval you MUST provide the following:	
	nistrator's Name:	
	ess:	
	State: Zip Code:	
	ohone #: Fax #:	

7.

	MC Visa A	
Credit Card #:	·	
	Expiration Date: /	CVV:
Name as it appears on	the credit card:	
Billing address of the c	redit card:	
Checks and Money Or	ders should be made payable to Pension A ests with personal checks will be held for tw	ppraisers Inc
DI EAGE NOTE D	acts with personal chacks will be held for tw	wo weeks to ensure that the check clears credit card) Box 4396, Allentown, PA 18105