

- To minimize transcription errors, please enter data in sentence case, save file (do not print to pdf) and **upload (or email bob@qdrosource.com) digital file** to QDRO Source secure Document Folder.
- Include copy of decree / property settlement agreement and any plan information or statements.
- For prompt completion of your documents, we need all the requested identification information. To the extent this data is available in the documents provided, you need not enter it on this Application form.

| | | | | | | | | | |
|---|--|---|--|------------------------------------|--|--|--|---------------|--|
| PART I | | Requesting Counsel: (if not included in the documents submitted) | | | | | | | |
| 1. Name | | 2. Firm | | 3. Street Address | | 4. City, State ZIP | | | |
| 5. Legal Assistant | | 6. Phone | | 7. Fax | | 8. Email | | | |
| PART II | | Your Client Information: (if not included in the documents submitted) | | | | | | | |
| 1. Client Name (Current) | | 2. Name Changed to: | | 3. Street Address, City, State Zip | | | | | |
| 4. Client is: Petitioner Respondent | | 4. SSN | | 5. Date of Birth | | optional | | | |
| | | | | | | 7. Phone #: | | | |
| | | | | | | 8. Email: | | | |
| PART III | | Spouse's Counsel: (if not included in the documents submitted) | | | | | | | |
| 1. Name | | 2. Firm | | 3. Street Address | | 4. City, State Zip | | | |
| 5. Legal Assistant | | 6. Phone | | 7. Fax | | 8. Email | | | |
| PART IV | | Spouse Information: (if not included in the documents submitted) | | | | | | | |
| 1. Spouse's Name | | 2. Name Changed to: | | 3. Street Address, City, State Zip | | | | | |
| 4. SSN | | 5. Date of Birth | | If available: | | | | | |
| | | | | 6. Phone: | | 7. Email: | | | |
| Part V | | Marriage: | | 8. Date of Marriage | | 9. Date of Divorce | | | |
| PART VI | | Plan Information – List the formal plan name for which a QDRO is required One QDRO will be prepared per Plan. List any additional plans on an attachment. | | | | | | | |
| If the complete employer/plan information is not available, please provide at least the employer's correct name and telephone number. | | | | | | | | | |
| A recent copy of statement participant's plan account would be helpful but is not required. | | | | | | | | | |
| Participant (Employee) is | | Sponsoring Employer of plan (Name, Address) | | Work prior to marriage | | Plan Name (From account / benefit statement) List any additional plans on a separate sheet | | | |
| Plan Administrator / Recordkeeper (Name, Contact) (From account / benefit statement or Summary Plan Description) | | | | | | | | | |
| Client Spouse | | | | Yes No | | | | | |
| Client Spouse | | | | Yes No | | | | | |
| Client Spouse | | | | Yes No | | | | | |
| PART VII | | Multiply Box 1 by \$450.00 and Remit: | | | | 1. # QDROs Requested: | | 2. Total Due: | |
| | | If expedited, add \$150.00 | | | | | | | |
| Fee | | 1. Zelle to robert.noble@qdrosource.com , 2. Mail Firm check, money order or cashier check (no personal checks please) to above address, OR 3. Request invoice for credit/debit card payment (card service fee applies). | | | | | | | |

| | | | | | | |
|---|---------------------------|--|--------------|---|---|--------------|
| Part VIII Division information: | | | | | | |
| Date division / valuation as of: | | | | | | |
| Defined Contribution plans (401k, profit sharing, IRC 457 or 403(b)): | | | | | | |
| Attribute Gain and Loss from valuation date to segregation | | | | <div>Yes</div> <div>No</div> | | |
| Outstanding Participant Loans | | Included in account balance <u>only</u> for purpose of calculating % award, not distributed to Former Spouse. <div>Yes</div> <div>No</div> | | | | |
| Plan Administrator fee (Some plan administrators charge a fee to Participant's account to process QDRO) | | Allocated 100% to Participant account Allocated 100% to Alternate Payee Award Split (50/50) | | | | |
| Defined Benefit plans (pension): If Participant has not yet commenced, QDRO will be drafted as a "separate interest" payable over life of Alternate Payee, if available, unless otherwise instructed. | | | | Participant has commenced retirement annuity: Include Cost of Living Adjustment if provided by Plan: | | |
| PART IX | Military DRO Only: | If possible, please provide a copy of Member's Active or Reserve chronological service credit | | | | |
| Branch | Dates of Service | | Rank / grade | | Active # Reserve Points accumulated during marriage: | Date Retired |
| | Beginning | Ending | Marriage | Divorce | | |
| | | | | | | |
| Assign Armed Services Survivor Benefit Plan (Cost must be charged to Member's disposable retired pay; former spouse may periodically reimburse Member directly). | | | | | | |
| Currently Receiving Disposable Retired Pay: If divorce prior to commencement of disposable pay, provide: <ul style="list-style-type: none"> • "High three" pay • Marital service credit or Total Reserve Points for Retirement (REQUIRED). | | | | | | |

Keeping It Simple
or
HOW TO GET YOUR QDRO IN THREE DAYS (OR LESS)!
(OUR CURRENT RECORD INCLUDING PLAN APPROVAL IS 1.75 HOURS)

1. Completing the “**Application for QDRO Preparation**” form:
 - a. We must have **all** the requested party identification information (Parts II &- IV). To the extent this data is available in the documents provided, you need not enter it on the Application form. Although much of this info is often included in the Final Divorce Decree; the dates of birth and date of marriage are generally not included, please provide them with your submission.
 - b. We ask for your client's telephone number or email only to expedite simple information issues, as a rule we will not contact your client. In addition, some plan administrators request both parties' phone and email be provided.
 - c. The Division Date (Part VIII) is assumed to be the date of entry by the court, unless otherwise indicated.
 - d. If the complete employer/plan information is not available, please provide at least the employer's correct name and headquarter city (from IRS Form W-2) or telephone number. Our number one delay is determining the correct information about the plan and administrator.
 - e. Review the Application for any omitted information.
2. If possible, have the **participant spouse** provide an executed Form B, “Request & Consent to Release Retirement Plan Information.” Generally, plan personnel require such a release from the participant before providing information to third parties, such as QDRO Source. Having this in hand allows quicker access to needed information. We recommend you include the form in your Temporary Orders and require its execution.
3. When plan procedure allows, we submit the draft QDRO to the plan for review. We then address the plan administrator's reservations and comments directly and provide your office with an approved final order, ready to present to the court. The plan administrator will take the time it requires either before or after entry by the court. While this process can add from one day to two months (depending on the diligence of the reviewer) to the time before the order is entered by the court, it is much more efficient than asking the court to enter corrected orders. The time saved is that of the court and presenting counsel. If your time frame will not allow, please advise.
4. You and your client are our clients. Unless specifically instructed otherwise, drafting options are resolved in your client's interest. However, if this is a Collaborative Law case we assume full disclosure of financial issues, including drafting options, is authorized to opposing counsel.
5. Our fee includes addressing your questions; take advantage of this service. The only ignorant question is the one not asked!
6. Payment in full is required prior to our commencing work. We accept firm checks, Zelle and major credits cards from firms. If your client intends to pay directly, we accept **ONLY** Zelle, major credit cards, cashier checks or money order.
7. If you have special needs, discuss them with us, we will accommodate whenever possible.

Less Simple, More Efficient

(This is only a “Suggested Best Case” plan; if you need to modify it for your situation, please feel free to do so, or, ignore it altogether.)

A number of our clients have suggested a systemized “road map” approach would be helpful to simplify the QDRO request process. To that end, I have the following suggestions:

1. New cases using QDRO Source’s “Retirement Plan Asset Survey” :

- a. Immediate action:
 - i. Determine if division of a retirement plan is a possibility, if not, stop here.
 - ii. In your temporary orders, require the opposing party to execute the “Request and Consent to Release Retirement Plan Information” (Form B) and complete the Employment History (Form C),
 - iii. In your initial or subsequent contact with the client, have he/she complete the Application for QDRO Preparation (Form A) and the Employment History (Form C) to best of her/his knowledge,
 - iv. Advise client that the fee for determining and analyzing retirement plan interests (for each spouse, you may or may not need/desire the survey on behalf of your client) is \$400. Each QDRO [one QDRO for each plan (not employer) to be divided] needed will be \$450.
 - v. Secure payment of each \$400 fee for the Retirement Plan Asset Survey,
 - vi. When completed Forms A, B & C are in hand, upload them and the case caption to your QDRO Source document folder,
 - vii. Mail firm check for \$400.00 to QDRO Source. For quicker service, you may Zelle payment to robert.noble@qdrosource.com or call for credit/debit card pmt.
- b. QDRO Source will send to each identified employer a request for information about any deferred compensation plan in which the client’s spouse may have been a participant. This request also serves as notice to the employer / plan administrator that a plan interest may be subject to division by QDRO and requests the plan administrator to place an administrative hold (if allowed by the plan’s §414(p)(6)(B) procedures) on distribution of benefits pending completion of the divorce.
- c. When determined, advise QDRO Source of mediation, trial or other date to meet. Please understand that each file is processed as promptly as possible, this information is requested only to allow us to accommodate your time constraints.
- d. Upon receipt of QDRO Source Report of Retirement Plan Assets, review and discuss any questions with RWN before negotiation, mediation or trial.
- e. Proceed with item 2, Existing cases.

2. Existing cases:

- a. Upon determination of need to divide retirement plan interest, provide QDRO Source as soon as possible by uploading to your firm’s Document Folder (email or call to establish):
 - i. A completed Application for QDRO Preparation, Form A,
 - ii. If possible (but not required), “Request and Consent to Release Retirement Plan Information”, Form B, executed by participant spouse,
 - iii. Caption of case,
 - iv. Copy of mediation agreement or proposed division language (prefer both H&W),
 - v. Any plan information available from the parties.
- b. Advise client that the preparation fee for each QDRO is \$450.00. We prepare one QDRO for each plan (not employer) to be divided. You may prefer to address this information in your engagement conference and contract. Non-firm payments by Zelle, major credit card, cashier’s check or money order only.

3. QDRO Source will reply regarding any additional information needed and invoice the total fee required for QDRO preparation.
4. Upon receipt of all necessary information and payment, QDRO Source will prepare the draft order and submit to Plan Administrator for review, cc to your office. If your time frame does not permit, please advise.
5. Upon approval by the Plan Administrator, QDRO Source will upload (PDF format) to your firm's Document Folder the final approved version of the order, our letter of instruction to you and a transmittal letter to send a certified copy of the order to the Plan Administrator.

You should then:

6. Circulate the order for approval,
7. Submit to Court for entry and order a certified copy.
8. Mail the original certified copy to the plan administrator using the transmittal letter provided (5.a. above). QDRO Source does not submit certified orders to the plan administrator. Sending them to us only to forward to the plan administrator only provides an unnecessary opportunity for Murphy's Law to apply.
9. Advise QDRO Source of any subsequent correspondence from the Plan Administrator regarding the processing of the QDRO.

At any point in this process, if a question arises, please contact us immediately.

REQUEST & CONSENT TO RELEASE RETIREMENT PLAN INFORMATION

Form B

(For help in completing this form email help@qdrosource.com or call (866) 375-3611)

Employee / Participant: _____

SSN: - - _____

In accord with ERISA Advisory Opinion 79-82A (November 21, 1979), the above named Participant hereby requests and gives consent for any Employer, Plan Sponsor or Plan Administrator (or their representatives) to provide any and all information concerning any qualified or non-qualified retirement, profit sharing, pension, 401(k), 403(b), 457, ESOP, stock option, Section 125 or other deferred compensation plan benefits in which the Employee/Participant may have an interest to:

1. **Robert Noble, JD of QDRO Source**
2. _____, **counsel**
3. _____, **counsel**

for the preparation of any required (Qualified) Domestic Relations Order to divide the Participant's benefits in the Plan(s).

Information for each applicable plan shall include, but not be limited to:

1. Providing copies of the Plan documents and Summary Plan Description.
2. Providing copies of written procedures adopted processing for QDROs and sample forms (if available).
3. Copies of current plan valuation, summary annual report and Form 5500.
4. Completion of the Plan Information Questionnaire (attached).
5. Review and pre-approval of proposed orders, if the plan customarily provides this service.

Thank you.

Signature of Employee / Participant: X _____

[Most Plan Administrators do not require the Participant's authorization to be notarized, however, if convenient, we request it in the event this plan may.]

State of _____

County of _____

On this day, _____ appeared before me, the undersigned notary and executed this *Request & Consent To Release Retirement Plan Information*.

Date: _____

[Seal]

Notary Public

| _____'s Employment History | | Use additional sheets if necessary. Use a separate sheet for client spouse. | |
|----------------------------|------------------|--|--------|
| | | | |
| Current Employer: | EIN: | Begin: | End: |
| Address: | City, State ZIP: | Plan contact: | Phone: |
| Comment: | | | |
| | | | |
| Prior Employer: | EIN: | Begin: | End: |
| Address: | City, State ZIP: | Plan contact: | Phone: |
| Comment: | | | |
| | | | |
| Prior Employer: | EIN: | Begin: | End: |
| Address: | City, State ZIP: | Plan contact: | Phone: |
| Comment: | | | |
| | | | |
| Prior Employer: | EIN: | Begin: | End: |
| Address: | City, State ZIP: | Plan contact: | Phone: |
| Comment: | | | |
| | | | |
| Prior Employer: | EIN: | Begin: | End: |
| Address: | City, State ZIP: | Plan contact: | Phone: |
| Comment: | | | |
| | | | |
| Prior Employer: | EIN: | Begin: | End: |
| Address: | City, State ZIP: | Plan contact: | Phone: |
| Comment: | | | |
| | | | |
| Prior Employer: | EIN: | Begin: | End: |
| Address: | City, State ZIP: | Plan contact: | Phone: |
| Comment: | | | |