

QUALIFIED DOMESTIC RELATIONS ORDER QUESTIONNAIRE
PETITIONER-RESPONDENT

Name _____
Address _____
City _____ State _____ Zip _____ County _____
Telephone _____ Date of Birth _____ S.S.# _____

1. Name and Address of the Court where the divorce is on file:

2. Case Number _____ Date of Marriage _____ Date of Separation _____
3. Date of Judgment (if any) _____
4. What is the name and address of the Company, Plan or Union that QDRO will be on?

5. What is the correct name of the Benefit Plan or Plans which this QDRO seeks to split?

6. Is this Plan a Defined Benefit, Defined Contribution, ESOP, Hybrid? (Circle all that apply)
7. Who is the Participant in the Plan? _____
8. In this QDRO, who will be the Alternate Payee (person to receive benefits)? _____
9. What is that person's relationship to the Participant? _____
10. Is this QDRO being used to split the retirement as a property settlement, child support or spousal support? _____
11. What are Participant's dates of Service to the Plan? _____
12. Does the Plan require a Joinder? _____
13. If a Joinder is required, has one been served? _____
14. What does the Judgment say about the benefits to be split? Attach a copy of the portion of the Judgment/MSA dealing with the QDRO.

15. If the Plan allows it, how does Alternate Payee want his/her share?

16. If the Plan allows Alternate Payee to name a Beneficiary to his/her share, who would Alternate Payee name?
Name: _____
Address: _____
Date of Birth: _____ SS# _____
Relationship to Alternate Payee: _____
17. Name, address and telephone number of at least one person at the Plan, or Company, our office can contact regarding the QDRO who would be knowledgeable:

18. Attach a copy of a sample QDRO and rules of the Plan that you obtained from the Plan for the purpose of crafting a proper QDRO.

ACKNOWLEDGMENT AND AUTHORIZATION

I understand that the Legal Document Assistant (LDA) preparing my documents is NOT an attorney, cannot select forms and DOES NOT give legal advice. I hereby direct the Legal Document Assistant to type and perform certain services as outlined in the Contract for Services which we each executed regarding this matter. I further declare that the foregoing information which I have provided is, to the best of my knowledge, true and correct

Date: _____

Signature