

DIVORCE AND QDRO

Thank you for allowing DivorceandQDRO.com to be of service to you. Please review and complete the QDRO Information Form and Fee Agreement attached and return, along all requested documents and payment to the following address:

DivorceandQDRO.com
23B Shelter Cove Lane, Suite 401
Hilton Head, SC 29928
Ph: (843) 686-2425 or TF: (866) 211-5958

You may also fax or email requested information to:
fax: (843) 686-2476

Please direct any questions to (843) 686-2425, (866) 211-5958
Thank you.

QDRO INFORMATION FORM

Please complete ALL items.

I. Information about the parties:

Participant (Employee spouse)

Name: _____
Social Security Number: _____
Date of Birth: _____
Street Address: _____
City, State, Zip Code: _____
Telephone: _____ E-mail: _____

Alternate Payee (Non-employee spouse)

Name: _____
Social Security Number: _____
Date of Birth: _____
Street Address: _____
City, State, Zip Code: _____
Telephone: _____ E-mail: _____

II. Information about the marriage and divorce:

Date of Marriage: _____
Date of Separation: _____
Date of Divorce: _____
If parties are not yet divorced, please check here _____

III. Information about the attorneys

We require the name of at least one attorney practicing in the state where your case was decided who will review and approve the QDRO drafted.

Participant's Attorney

Name: _____
Street Address: _____
PO Box Address: _____
City, State, Zip Code: _____
Telephone: _____ E-mail: _____

Alternate Payee's Attorney

Name: _____
Street Address: _____
PO Box Address: _____
City, State, Zip Code: _____
Telephone: _____ E-mail: _____

IV. Retirement plan information

If more than one plan is to be divided, please provide the below details for each plan separately.

Plan Name: _____
Employer Name: _____
Contact Person at Employer: _____ Contact Telephone: _____
Employer Address: _____

Plan Administrator or Plan Contact: _____ Contact Telephone: _____
Plan Contact Fax: _____
Plan Contact E-mail: _____
Plan Mailing Address: _____

Participant Hire Date: _____
Is Participant still employed by this employer? _____
If not, date Participant terminated employment with this employer: _____
Is Participant retired? _____
Is the Participant currently receiving Benefits from this plan? _____
If retired, did the Participant elect survivor benefits for the Alternate Payee at the commencement of Benefits? _____

V. Military and Civil Service Plans

If plan to be divided is a **Military Plan**, please complete following information:

Branch of Service: Army___ Navy___ Air Force___ Marines___ Coast Guard ___

Date of entry into military service: _____

Current rank: _____

Rank at retirement (if retired): _____

Date of retirement (if retired): _____

If retired, was Survivor Benefit Plan (SBP) coverage obtained at retirement? _____

Does service member participate in Thrift Savings Plan? _____

Please note, if the pension being divided is a military reserve service pension, points record must be attached.

If plan to be divided is a **Federal or State Civil Service Plan**, please complete following information:

Name of Federal or state agency where employed: _____

Date of retirement (if retired): _____

If employee has retired, was Former Spouse Survivor Annuity (FSSA) coverage elected at retirement? _____

Does service member participate in Thrift Savings Plan? _____

VI. Required Documents

___ Divorce decree (*if divorced*) or Decree of Separate Maintenance (*not yet divorced*)

___ Separation Agreement or Court Order

___ Summary Plan Description (*available from employer or plan administrator*)

___ Current account statement for the plan to be divided

___ Plan's written QDRO procedures (*available from employer or plan administrator*)

___ Any previous correspondence from the Plan or employer

If there is any additional information you feel is important to the division of this plan or the QDRO requested, please provide that information as an attachment.

QDRO FEE AGREEMENT

Polaris QDRO charges \$500 per plan being divided. Payment in full and all requested information must be received before we begin processing your request. If you have more than one plan to be divided, please include payment for each plan. The following services are included in the fee: Client consultation, preparation of QDRO draft for attorney review, client/attorney review and approval of QDRO draft, pre-approval process w/plan administrator (if allowed by plan), revisions (if necessary), delivery of QDRO to you or your attorney for filing with court, submission of the QDRO to plan administrator for acceptance. Once Polaris QDRO has received an original certified copy of the QDRO from you/your attorney, we will then forward it to the plan administrator for final processing. ***Once this has been done, our obligations pursuant to this fee agreement will be completed.*** Please note that if you have not yet negotiated an agreement, it may be beneficial to hire us as soon as possible regarding information to include in the agreement. However, once the agreement is completed, we cannot re-negotiate the terms of the agreement.

We strive to provide a draft QDRO to you and your attorney within 10 days of receipt of payment and all requested information, however delays on the part of the plan administrator during the pre-approval process (when available) may slow this process. You (or your attorney) are responsible for filing the final approved QDRO with the appropriate court at your own cost and expense, and obtaining a certified copy for presentation to the plan administrator. Once you file the QDRO with the court and obtain a certified copy, Polaris QDRO will provide the order to the plan administrator. The QDRO does not secure your retirement plan benefits until the court filed QDRO has been accepted and approved by the plan administrator. The time required to complete these final steps, certification and final approval, will vary based on the court system and plan administrator. Our promise to you is that we will proceed expeditiously, will communicate any delays, and will keep you apprised of the status every step of the way.

Polaris QDRO does not provide legal or tax advice to clients, and the use of our QDRO drafting service does not create an attorney-client or a fiduciary relationship. You should consult with your attorney for legal advice specific to your state with respect to the QDRO draft provided to you by Polaris QDRO. You should consult your tax professional for any tax advice specific to your circumstance. Further, either you or Polaris QDRO may terminate this Agreement at any time, with or without cause, by written notification. Your termination of the services will not affect your responsibility for payment for the services rendered and out of pocket costs incurred before termination; the QDRO fee is non-refundable. Polaris QDRO reserves the right to decline or discontinue the services for events such as nonpayment of fees or costs, conduct which renders it unreasonably difficult to carry out the engagement effectively, failure to provide information requested within a reasonable time, or conflict of interest.

I HAVE READ, UNDERSTAND AND AGREE TO THE ABOVE TERMS:

Signed by the Client/Attorney Requesting the QDRO

Date

Please retain a copy of this Fee Agreement for your records.