



PENSION APPRAISERS INC.[®]

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QUALIFYING COURT ORDER CHECKLIST FOR THE RAILROAD RETIREMENT SYSTEM TIER 2 VESTED DUAL AND SUPPLEMENTAL ANNUITY BENEFITS

METHOD OF PREPARING QUALIFYING COURT ORDER:

_____ Option #1: Online - Complete this checklist online at www.qdrodesk.com. Upon completing checklist download the Order immediately. Unlimited Support 1-877-770-2270 (Toll Free) Cost - \$299

_____ Option #2: In House - Mail this checklist with payment to Pension Appraisers. Our staff will prepare the Order and return it within 7 business days. Unlimited Support 1-800-447-0084. Cost - \$445

Both Options are Supported by Pension Appraisers Staff

If Option #2, answer the following:

1. REQUESTOR INFORMATION:

Name: _____

What is the Role or Status of the Requestor?

_____ Attorney who represents one of the parties of the divorce. (Answer Question A.)

_____ One of the Parties of the divorce who is represented by an attorney. (Answer Question B.)

_____ One of the Parties of the divorce who is Pro Se / Pro Per. (Answer Question C.)

A. Answer if you are an Attorney:

Firm Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Telephone #: _____ Fax #: _____

E-mail Address: _____

Would you also like your Order e-mailed to you? _____ Yes _____ No

Should the Requestor's name and/or Firm Name, Address and Telephone Number appear above the Legal Caption? _____ Yes _____ No
If Yes:

_____ Requestor's Name (ONLY)

_____ Firm's Name (ONLY)

_____ Both Requestor's and Firm's Name

Who do you Represent?

_____ Plaintiff / Petitioner _____ Defendant / Respondent

Is this a Joint Request with opposing counsel? _____ Yes _____ No

If Yes:

Should we send a copy of the Order to opposing counsel? _____ Yes _____ No

If Yes:

Opposing Counsel's Name: _____
Firm Name: _____
Mailing Address: _____
City: _____ State: _____ Zip Code: _____
Telephone #: _____ Fax #: _____
E-mail Address: _____

B. Answer if you are one of the Parties of the divorce who is represented by an attorney.

Mailing Address: _____
City: _____ State: _____ Zip Code: _____
Telephone #: _____ Fax #: _____
E-mail Address: _____

Your Attorney's:

Name: _____
Firm Name: _____
Mailing Address: _____
City: _____ State: _____ Zip Code: _____
Telephone #: _____ Fax #: _____
E-mail Address: _____

Should your Attorney's name and/or Firm Name, Address and Telephone Number appear above the Legal Caption? Yes No
If Yes:

Attorney's Name (ONLY)
 Firm's Name (ONLY)
 Both Attorney's and Firm's Name

C. Answer if you are Pro Se / Pro Per.

Mailing Address: _____
City: _____ State: _____ Zip Code: _____
Telephone #: _____ Fax #: _____
E-mail Address: _____

2. COURT INFORMATION:

Name of Court: _____

State: _____ County: _____

Division: _____ Docket Number: _____

Which party filed for divorce? Husband Wife Both

In addition to the Judge's, what signature lines should come at the end of the Order?

None
 Both Husband and Wife
 Attorneys for Husband and Wife
 Husband and Wife and Attorneys for Both
Opposing Atty. Name: _____

3. PARTICIPANT: (Railroad Employee)

Name of Participant: _____

Date of Birth: _____

Last Known Mailing Address: _____

City, State, Zip Code: _____

Social Security Number: _____

4. FORMER SPOUSE: (Non-Employee Spouse / Alternate Payee)

Name of Former Spouse: _____

Date of Birth: _____

Last Known Mailing Address: _____

City, State, Zip Code: _____

Social Security Number: _____

5. MISCELLANEOUS INFORMATION:

Should Social Security Numbers appear in the Order? ____ Yes ____ No

Marriage Date: _____

Are the Parties Divorced? ____ Yes ____ No

If Yes:

Date of Divorce: _____

Date Marriage Ended: _____

(Cut-off date used to determine marital coverture fraction i.e. separation date, complaint date, or divorce date.)

Exact Plan Name: RAILROAD RETIREMENT SYSTEM

For an additional fee of \$50.00: Should we submit the Order to the Plan Administrator for pre-approval?

No (Only Option - this plan will not pre-approve an order)

Date Participant Joined The Plan: _____

Is the Participant still employed? ____ Yes ____ No

If No:

Termination Date: _____

Is the Participant retired and receiving retirement benefits? ____ Yes ____ No

If Yes:

Retirement Date: _____

6. Should the Alternate Payee receive part of:

Tier 1 Benefits: These benefits are similar to Social Security and may not be divided by a court order. The Alternate Payee may make a separate application for a portion of this benefit through the Railroad Retirement Board if the Alternate Payee meets the following requirements:

1. Both Participant and Alternate Payee must be at least 62 years.
2. The marriage must have lasted at least 10 consecutive years.
3. The Alternate Payee must not have remarried.
4. The Participant must have begun collecting a railroad retirement or disability annuity.

Tier 2 Benefit: ____ Yes ____ No

Vested Dual Benefit: (If the Participant is entitled to this benefit) ____ Yes ____ No

Supplemental Annuity Benefit: (If the Participant is entitled to this benefit) ____ Yes ____ No

7. **Percent or Dollar Amount of Employee's benefits to be paid by the Plan to the Former Spouse?**

_____ **Option #1: A Percentage of the Total Accrued Benefit earned through the Marriage End Date. (See Cost of Living below)**

_____ **Option #2: A Percentage of the Total Accrued Benefit earned through the Date of Retirement. (See Cost of Living below)**

_____ **Option #3: A Percentage of the Total Accrued Benefit earned through a Specific Date. (See Cost of Living below)**

A Specific Date which is: _____

_____ **Option #4: A Percentage of the Marital Portion earned through the Marriage End Date: The Marital Portion shall be determined by a fraction, the numerator of which is the number of months of the Participant's credited service in the Plan earned during the marriage and the denominator of which is the total number of months of the Participant's credited service in the Plan through the Marriage End Date. (See Cost of Living below)**

_____ **Option #5: A Percentage of the Marital Portion earned through the Date of Retirement: The Marital Portion shall be determined by a fraction, the numerator of which is the number of months of the Participant's credited service in the Plan earned during the marriage and the denominator of which is the total number of months of the Participant's credited service in the Plan through the Date of Retirement. (See Cost of Living below)**

_____ **Option #6: A Percentage of the Marital Portion earned through a Specific Date: The Marital Portion shall be determined by a fraction, the numerator of which is the number of months of the Participant's credited service in the Plan earned during the marriage and the denominator of which is the total number of months of the Participant's credited service in the Plan through a Specific Date. (See Cost of Living below)**

A Specific Date which is: _____

_____ **Option #7: Dollar Amount per Month: The Alternate Payee will receive a Specific Dollar Amount per Month from participants pension benefit. (See Cost of Living below)**

A Dollar Amount per Month which is: _____

COST OF LIVING INCREASES: If you choose Options # 2 or #5 a share of any cost-of-living increase in the Employee's benefits would also normally accrue to the Former Spouse. No cost-of-living increase, however, is applicable to a Fixed Dollar Award (Option #7). Similarly, in the event that the parties award a percentage of benefits as of a certain date, such as the date of the decree, such percentage award constitutes a fixed award with no applicable cost-of-living increase. (Options #'s 1, 3, 4 and 6)

If a percent is chosen, will payments be deducted from the Employee's

Net Monthly Annuity (Only Option) (The net benefits are the Participants Tier 2 Benefit, Vested Dual Benefit and Supplemental Annuity, minus any amounts that are owed the United States, deducted for health and insurance premiums, Medicare premiums, and etc.)

8. **When will Former Spouse's benefits start?**

Monthly payments may not begin before the month in which the following three conditions are met:

- 1) the Employee has completed ten years of railroad service (or five years of railroad service after December 31, 1995;
- 2) the Former Spouse is 62;
- 3) the Employee also is 62, or if deceased, would have been 62.

The Former Spouse shall continue to receive benefits for as long as the Employee has the right to receive Railroad Retirement Benefits and shall remain payable to the Former Spouse even upon the death of the Employee. (Only Option)

9. **Should the Former Spouse be entitled to a Survivor Annuity if the Participant dies before the Alternate Payee?**

Option #1 - No (Only Option for Tier 2 Benefit, Vested Dual Benefit and Supplemental Annuity)

10. **If the Employee is receiving a Disability Annuity or starts to receive a Disability Annuity in the future, should the Former Spouse receive a portion of the Disability Annuity? (If the order prohibits the Former Spouse from receiving any portion of a Disability Annuity the Railroad Retirement Board will apply the court order when the Disability Annuity is converted to an Age and Service Annuity upon Employee's attainment of the full retirement age. Employees born before 1938 age 65. It increases to age 67 for those born after 1960.)**

_____ **Yes** _____ **No**

11. **Payment can be made by Check, Money Order or Credit Card.**

Credit Card: **MC** **Visa** **Amex** **Discover**

Credit Card #: _____

Expiration Date: ____ / ____

Name as it appears on the credit card: _____

Billing address of the credit card: _____

Checks and Money Orders should be made payable to Pension Appraisers, Inc.

PLEASE NOTE: Requests accompanied by personal checks will be held for two weeks to ensure that the check clears.

FAX THIS REQUEST FORM TO: 610-770-9342 (only if paying by credit card)

MAIL THIS REQUEST FORM TO: Pension Appraisers, 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.