PENSION VALUATION	~		Hawaii
DATE:CLIENT'S NAM			
REQUESTOR'S NAME:			
MAILING ADDRESS:CITY:	CTATE: Howeii	71D.	
TELEPHONE: ()	FAX: ()	Z.IF: E-M/	AII.:
Methods of Valuation	For Court Ordered Report: Docket # Copy to Judge:		
If not checked, we will default to the GATT Method			
GATT (GAM Mortality Tables & 30 Year Treasury Bond Rates)	Address:	Ct. 1	7'
PBGC (GAM Mortality Tables & PBGC Annuity Rates)	Phone:	State: Fax:	Zip:
VALUATION DATE:	HI-Final Separation	Date [Harvey, 761 P. 2d	305-1988]
REQUIRED INFORMATION ABOUT PEN		•	
NAME:	SEX:	DATE OF BIR	TH:
DATE OF MARRIAGE:	DATE MARRIAG	E ENDED:	in the second second
NAME OF PENSION PLAN:			
DATE EMPLOYMENT STARTED:		(Date pension hole	der began participation in the plan)
Please indicate any breaks in service:	Termination Date:		
Retirement Date: Was a survi	ivor option selected? Divor	reminiation Da	having the surviving spouse's
benefit valued. Is the Pension Holder receiving D	Disability Benefits?	No HI - [Jones, 780 P. 2d 581	
If yes, are Social Security Disability Benefits being	g paid? □Yes □No		
NORMAL RETIREMENT AGE:			
*ACCRUED MONTHLY PENSION BENEFIT AS OF [This is the amount of monthly pension benefit the employee would be retire and receive unreduced benefits) with a fully vested pension based	(D entitled to if it were assumed that the d upon compensation and plan provisi	ATE) WAS \$ employee was of normal retirment ons as of the Date Marriage Endec	(DOLLARS PER MONTH) t age (earliest age employee can t]
*IS THE EMPLOYEE ELIGIBLE FOR POST-RETIREME			
If the answer is yes, what has been the average historical percentage increqual to a 5 year average of 60% of the increase in the Consumer Price l	rease per year:	lo not fill in the percentage, we w Valuation)	ill assume a rate
*WILL THE EMPLOYEE RECEIVE SOCIAL SECURITY [If no, consider requesting a Social Security Offset Report. Reference the In order to complete this type of analysis, we need a history of yearly ea	Y FOR THE YEARS OF PLAN ese cases HI-[Cornbleth, 580 A.2d 369 urnings while a participant is in the pla	N PARTICIPATION? [PA Super. 1990) and Neel, 113 Ol n. Additional charge \$125.00.	Yes □ No hio App. 3d 24 (1996)]
*IS THE EMPLOYEE FULLY VESTED? \blacksquare Yes \blacksquare (If the answer is no, how many years of service does the pension plan re	No equire for vesting:	Years) HI-[Linson, 618 P. 2	d 748 (1980)]
*If you are unable to answer these questions, we will determine the answ (A) A copy of the pension plan booklet (this will not be returned- please (B) Employee's annual benefits statements as of a date within 12 months	e send a copy).	if you enclose the following:	
(C) Employee's income(used to determine pension benefits) for the five	years preceding the Date the Marriage		_
I have enclosed my check p	ayable to Pension	on Appraisers,	Inc. for \$240.00
Card Number:	CHECKS WIII DE HEIG TO! 2 WEEKS TO ENS	are the check clears. This does no	apply to min/ attorney checks.
			<u> </u>
☐ Mastercard ☐ Amex ☐ Discover ☐ Visa Signature:		Date	Exp.
Discover Visa Signature: Name on the credit card:			
Billing address:	Cardholder's phone number:		rs nber
	ADDITIONAL SERVI	CES —	
MULTIPLE VALUATIONS: Additional \$200.00 per OPPOSITE METHOD OF THAT CHOSEN Please provide appraisals based upon more t	ABOVE (if GATT above the	n PBGC & visa versa)	Need Help?
DATES:	, -		P.O. Roy 4206
SOCIAL SECURITY OFFSET REPORTS: Addition			Allentown, PA 18105-4396
EXPEDITED SERVICE: Additional \$125.00 (24-ho	ur business day turn-around	via fax or email).	1-800-447-0084 Fax: 610-770-9342
COURT TESTIMONY: We will provide expert testimony regarding our appraisals. Our fee is \$1295.00 per day. QUALIFIED DOMESTIC RELATIONS ORDERS: Our fee for drafting a QDRO (from start to finish) is \$495.00 penapp@pensionappra			penapp@pensionappraisers.com www.pensionappraisers.com
STRUCTURED SETTLEMENTS: Our fee for determining the present v	alue of a structured settlement propo	sal 1s \$240.00.	www.pensionappraisers.com