PENSION VALUATION	I REQUEST I	FORM	Illinois
DATE:CLIENT'S NAM	IE:	COUNTY:	
REQUESTOR'S NAME:			
MAILING ADDRESS			
CITY:	STATE: Illinois	ZIP:	
CITY: TELEPHONE: ()	FAX: ()	E-MAIL:	
Methods of Valuation	For Court Ordered	Report: Docket #	
If not checked, we will default to the GATT Method	Copy to Judge:		
GATT (GAM Mortality Tables & 30 Year Treasury Bond Rates)	Address:		
PBGC (GAM Mortality Tables & PBGC Annuity Rates)	Phone:	State: Fax:	Zip:
VALUATION DATE:	IL-Date as close as po	ssible to Date of Dissolution [l	n re Parker, 625 N.E. 2d 237-1993]
REQUIRED INFORMATION ABOUT PEN	ISION HOLDER		
NAME:	SEX:	DATE OF BIRTH: _	
DATE OF MARRIAGE:	DATE MARRIAGE	ENDED:	
	IL- [C	Cut-off date used to determine coverture	fraction - In re Parker, 625 N.E. 2d 237 - 1993]
NAME OF PENSION PLAN:			
DATE EMPLOYMENT STARTED:		(Date pension holder began	participation in the plan)
Please indicate any breaks in service:			
Employment Start/Stop Dates:			
Retirement Date: Was a survibenefit valued. Is the Pension Holder receiving D	ivor option selected? Yes	□No If yes, consider having t	he surviving spouse's
If yes, are Social Security Disability Benefits being	g paid? Yes No	INO IL-[in re Marriage of Smith, 405 N.I	2. 2d 884 (1980) and in re Gan, 404 N.E. 2d 306
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	(DAT entitled to if it were assumed that the em upon compensation and plan provisions	TE) WAS \$	(DOLLARS PER MONTH) est age employee can
*IS THE EMPLOYEE ELIGIBLE FOR POST-RETIREME If the answer is yes, what has been the average historical percentage inc equal to a 5 year average of 60% of the increase in the Consumer Price			
*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	ese cases IL-[Cornbleth, 580 A.2d 369 (PA	A Super. 1990) and Neel, 113 Ohio App. 3d	□ No ²⁴ (1996)]
*IS THE EMPLOYEE FULLY VESTED? Yes (If the answer is no, how many years of service does the pension plan re	NO quire for vesting:	Years) IL-[In re Marriage of Hunt, 397	7 N.E. 2d 511 (1979)]
*If you are unable to answer these questions, we will determine the ansv (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 (C) Employee's income(used to determine pension benefits) for the five	send a copy). of the Date the Marriage Ended.	,	
I have enclosed my check p Requests accompanied by personal checks or personal business			for \$240.00
_ —	checks will be held for 2 weeks to ensur	e the check clears. This does not apply to f	irm/attorney checks.
Card Number:			
□ Mastercard □ Amex □ Discover □ Visa Signature:		Date:	Exp. Date:
Name on the credit card:			
Billing address:		phone number: _	
MULTIPLE VALUATIONS: Additional \$200.00 pe	ADDITIONAL SERVICE	EStional reports based upon the f	ollowing
OPPOSITE METHOD OF THAT CHOSEN	ABOVE (if GATT above then	PBGC & visa versa)	Need Help? PENSION APPRAISERS, INC.
Please provide appraisals based upon more t	` ·	•	P.O. Box 4396
SOCIAL SECURITY OFFSET REPORTS: Additional \$125.00 per pension Allentown, PA 18105-4396 1-800-447-0084			
EXPEDITED SERVICE: Additional \$125.00 (24-ho	•	,	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 STRUCTURED SETTLEMENTS: Our fee for determining the present value of a structured settlement proposal is \$240.00. www.pensionappraisers.com			