



PENSION APPRAISERS INC.

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1-800-447-0084 - Fax: 610-770-9342



www.pensionappraisers.com
www.qdrodesk.com

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

OPTIONS FOR PREPARING QUALIFYING COURT ORDER:

Option #1: Online - Answer questions at www.qdrodesk.com. Upon completion 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 7-10 business days. Unlimited Support 1-800-447-0084. Cost - \$495

Both Options are Supported by Pension Appraisers Staff

1. REQUESTOR INFORMATION:

Name: _____

Firm Name: _____ (if you are an attorney)

Attorney ID (if applicable): _____ (if you are an attorney)

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Telephone #: _____ Fax #: _____

E-mail Address: _____

If you are one of the Parties of the divorce who is represented by an attorney please provide your attorney's: (If you are an attorney and have already completed the section above please disregard.)

Name: _____

Attorney ID (if applicable): _____

Firm Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Telephone #: _____ Fax #: _____

E-mail Address: _____

Should the attorney's name and/or firm name, address and telephone number appear above the

Legal Caption? _____ Yes _____ No

If Yes:

_____ Attorney's Name _____ Firm's Name

Are you the (or, if attorney, who do you represent?):

_____ Plaintiff / Petitioner _____ Defendant / Respondent

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: _____

2. COURT INFORMATION:

Name of Court: _____

State: _____ County: _____

Division: _____ Docket Number: _____

Which party is considered the plaintiff/petitioner?

_____ PARTNER 1 - The Participant: (Employee Spouse)

_____ PARTNER 2 -The Alternate Payee: (Non-Employee Spouse)

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

_____ None _____ Attorneys for Both Partners

_____ Both Partners _____ Opposing Atty. Name: _____

3. PARTNER 1 - The Participant: (Employee Spouse)

Name of Participant: _____

Date of Birth: _____

Last Known Mailing Address: _____

City, State, Zip Code: _____

Phone #: _____

Social Security Number: _____ Gender: _____ Male _____ Female

4. PARTNER 2 -The Alternate Payee: (Non-Employee Spouse)

Name of Alternate Payee: _____

Date of Birth: _____

Last Known Mailing Address: _____

City, State, Zip Code: _____

Phone #: _____

Social Security Number: _____ Gender: _____ Male _____ Female

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: _____

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

Exact Plan Name: RAILROAD RETIREMENT SYSTEM

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. 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. They only accept orders already signed by the court.)

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

Credit Card: MC Visa Amex Discover

Credit Card #: _____

Expiration Date: ____ / ____ CVV: _____

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 with 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.