



Pension Division Order Questionnaire – except military pensions

Client Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ E-Mail _____

SSN _____ Birth Date _____

Client's Attorney _____

Firm Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

E-Mail _____ Bar # _____

Ex-Spouses Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ E-Mail _____

SSN _____ Birth Date _____

Ex-Spouses Attorney _____

Firm Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

E-Mail _____ Bar # _____



Pension Division Order Questionnaire – except military pensions

Judicial District _____ Case No. _____ Division _____

Parish _____ Judge _____

Date Community terminated _____ Date of Marriage _____

Date of Divorce _____ Date of Partition _____

Name of Plan _____

Name of Plan Participant _____

Send copies of any prior division order previously filed.

Type of Plan DEFINED BENEFIT / DEFINED CONTRIBUTION /NOT SURE

Defined contribution plan, please attach all statements since the termination of community and confirm the following:

Award _____ (% or dollars) Date of Award _____

If award is percentage, does this include or exclude loans? INCLUDE / EXCLUDE

Will award be adjusted for gains and losses before funds are segregated? YES / NO

Please send information on any separate interest that should not be divided.

Defined benefit plan, attach administrator’s estimate of future benefit (unretired) or statement of payments made since date of termination if in pay status (retired).

If Partition does not specify how benefit will be divided, will it be divided using the Sims vs. Sims formula? Yes /No. If no attach instructions of division calculated if not in the partition.

Send documents of any additional service purchased. Is this additional service part of the community interest? YES / NO

Date of Entry into the Plan _____

If Participant is in pay status and receiving a benefit,

1. Send copy of papers showing date of retirement and survivorship election
2. Is benefit to be suspended during QDRO approval process? YES / NO.

Should the Alternate Payee receive a survivor benefit? YES / NO. If yes, how will the cost of the survivor benefit be divided? _____

Is the survivor benefit to be equal to the pre survivor benefit received? _____

SEND A SEPARATE PAGE 2 FOR EACH PENSION PLAN TO BE DIVIDED