

PASA **QDRO REQUEST**

INC.

SEND TO:

▶ PASA, INC.
 500 W. CUMMINGS PARK STE. 2500
 WOBURN, MA 01801
 ▶ INFO@PENSIONAPPRAISALS.COM
 ▶ FAX: 978.600.1487

WE WILL PROVIDE AN ENGAGEMENT LETTER TO BOTH ATTORNEYS TO ENSURE OUR INTERPRETATION AND/OR APPROACH IS APPROVED.

PLEASE NOTE THAT WE ARE NOT ATTORNEYS, AND WE CANNOT PROVIDE LEGAL OR FINANCIAL ADVICE.

OTHER DOCUMENTS NEEDED FROM YOU:

- ▶ **SEPARATION AGREEMENT**
 OR MARITAL SETTLEMENT AGREEMENT
 FIRST PAGE, SIGNATURE PAGE, RETIREMENT ASSETS SECTION
- ▶ **JUDGMENT OF DIVORCE NISI PAGE**
 OR DECREE OF DIVORCE
- ▶ **RETIREMENT PLAN STATEMENTS**
 SHOWING FULL PLAN NAMES / AS OF NISI DATE OR AGREED-UPON VALUATION DATE

PLAINTIFF

(OR PETITIONER) FIRST AND LAST NAME - NOTE IF LEGAL NAME HAS CHANGED.

STREET

CITY STATE ZIP

EMAIL TELEPHONE

TO BE INCLUDED IN PRIVATE ADDENDUM;
 SHARED ONLY WITH PLAN ADMINISTRATOR.
 DO NOT EMAIL.

SOCIAL SECURITY NUMBER

BIRTH DATE

ATTORNEY

ENTER NAME OF PLAINTIFF'S ATTORNEY (OR IF MEDIATOR). CHECK *PRO SE* IF ATTORNEY IS NOT INVOLVED POST-DIVORCE.

- MEDIATOR
 PRO SE

FIRM STREET

CITY STATE ZIP TELEPHONE

EMAIL

DEFENDANT

(OR PETITIONER) FIRST AND LAST NAME - NOTE IF LEGAL NAME HAS CHANGED.

STREET

CITY STATE ZIP

EMAIL TELEPHONE

TO BE INCLUDED IN PRIVATE ADDENDUM;
 SHARED ONLY WITH PLAN ADMINISTRATOR.
 DO NOT EMAIL.

SOCIAL SECURITY NUMBER

BIRTH DATE

ATTORNEY

ENTER NAME OF DEFENDANT'S ATTORNEY. CHECK *PRO SE* IF ATTORNEY IS NOT INVOLVED POST-DIVORCE.

- PRO SE*

FIRM STREET

CITY STATE ZIP TELEPHONE

EMAIL

LIST PLAN NAMES & PARTICIPANTS:

DATE OF MARRIAGE: _____

- _____ CHECK IF PARTIALLY ACCRUED PRIOR TO MARRIAGE
- _____ CHECK IF PARTIALLY ACCRUED PRIOR TO MARRIAGE
- _____ CHECK IF PARTIALLY ACCRUED PRIOR TO MARRIAGE
- _____ CHECK IF PARTIALLY ACCRUED PRIOR TO MARRIAGE