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INFORMATION NEEDED FOR QDRO PREPARATION

Once completed, please return by e-mail to cheryl@wrightcountylaw.com
with an e-mail copy to patty@wrightcountylaw.com.

Please provide current contact information for both parties and their respective attorneys. We have found that people move and the addresses in the Decree are not always current.

Court File No.: _____

Petitioner:

Full Name: _____
Street Address: _____
City, State, Zip: _____
Telephone No.: _____
Email Address: _____
Date of Birth: _____

Petitioner's Attorney:

Name & Attorney ID No.: _____
Legal Firm: _____
Street Address: _____
City, State, Zip: _____
Telephone No.: _____
Email Address: _____

(List attorney and staff e-mails to be included)

Respondent:

Full Name: _____
Street Address: _____
City, State, Zip: _____
Telephone No.: _____
Email Address: _____
Date of Birth: _____

Respondent's Attorney:

Name & Attorney ID No.: _____

Legal Firm: _____

Street Address: _____

City, State, Zip: _____

Telephone No.: _____

Email Address: _____

(List attorney and staff e-mails to be included)

1. Name Change: Yes No Changed to: _____

2. Name all Plans you are requesting we prepare Orders for:

3. Who is responsible for payment of the QDRO drafting fees?

Shared equally Petitioner Respondent

4. Are the parties sharing QDRO administrative fees, if any, charged by the Plan?

Yes No (If permitted by Plan Procedures)

5. Please provide a copy of the Confidential Information Form that was filed with court, or provide the party's Social Security numbers below:

Name: _____ SSN: _____

Name: _____ SSN: _____

6. Contact person for the Plan, please include contact name, email address, phone, and any correspondence regarding the QDRO process:

7. Human Resources contact person of the employer, please include contact name, email address, and phone number:

Please provide the following information with this completed form:

- Copy of Judgment and Decree as entered by the Court (*signed and entered by the court, certified copy not required*).
- Recent statement for each benefit being divided.
- Any model language and/or instructions for QDRO already provided by the Plan.
- Any Authorization for Information forms signed by the parties.
Present valuations/assessments of the benefits to be divided, if available.

***The above information may be emailed, faxed, or mailed to our office; following receipt of this form we will email a Fee Agreement to the responsible party(s).**

HALVORSON LEGAL

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Disclaimer - The information contained herein is for informational purposes only. Each individual's financial and family circumstances are unique and can only be properly addressed by speaking to an attorney learned in family law.