



Application

Participant (Owner of retirement account)

Name: _____

Social Security Number: _____

Date of Birth: _____

Current Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____

Email: _____

Participant Attorney's Name: _____

Participant Attorney's Address: _____

Phone: _____ Email: _____

Alternate Payee (Spouse/Former Spouse receiving the funds)

Name: _____

Social Security Number: _____

Date of Birth: _____

Current Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____

Email: _____

Alternate Payee Attorney's Name: _____

Alternate Payee Attorney's Address: _____

Phone: _____ Email: _____



Retirement Accounts

(For private pensions, see below. For State/Federal pensions, see next page.)

Retirement Account #1 (Plan name examples: Amazon 401k, Michelin pension, TSP, etc.)

Plan Name : _____

Retirement Account #2

Plan Name: _____

Retirement Account #3

Plan Name: _____

Retirement Account #4

Plan Name: _____

Pension Plan #1

Plan Name: _____

Hire Date: _____ Still Employed? _____

Last day of employment (if you left prior to retirement): _____

Date of Retirement: _____ Currently receiving payments? _____

If retired, did you select a survivor annuity for your spouse? _____

Pension Plan #2

Plan Name: _____

Hire Date: _____ Still Employed? _____

Last day of employment (if you left prior to retirement): _____

Date of Retirement: _____ Currently receiving payments? _____

If retired, did you select a survivor annuity for your spouse? _____



State Pensions

State Plan #1

State: _____ State Agency where employed: _____

Hire Date: _____ Still Employed? _____

Last day of employment (if you left prior to retirement): _____

Date of Retirement: _____ Currently receiving payments? _____

If retired, did you select a survivor annuity for your spouse? _____

State Plan #2

State: _____ State Agency where employed: _____

Hire Date: _____ Still Employed? _____

Last day of employment (if you left prior to retirement): _____

Date of Retirement: _____ Currently receiving payments? _____

If retired, did you select a survivor annuity for your spouse? _____

Federal Civilian Pensions (CSRS/FERS)

(If retired, email us a recent monthly annuity statement.)

Federal Agency where employed: _____

Hire Date: _____ Still Employed? _____

Last day of employment (if you left prior to retirement): _____

Date of Retirement: _____ Currently receiving payments? _____

If retired, did you select a survivor annuity for your spouse? _____



Military Pensions

(If active, email us your 36 highest base pay LES(s) up to your date of divorce. This is normally your most recent 36 statements. We will calculate your “High-36.” If active or retired Reserve/Guard, email us your Reserve Retirement Points statement; if active duty retired, email us your DD214 and a recent RAS.)

Branch (U.S. Army, USAF, etc.): _____ Date of Entry: _____

Rank on Date of Divorce (if active): _____

Date of Retirement: _____ Retirement Rank: _____

Creditable Time of Service on Date of Divorce (if active): Years _____ Months _____

Three (3) Additional Documents Needed to Begin

- Separation or Divorce Order with Settlement Agreement
- Recent account statement for each account being divided
- Signed Fee Agreement (available at www.simplyqdros.com/services/)

Please email application and above documents to reed@simplyqdros.com.

If you have questions, please contact us any time.