



EAST COAST QDROS & ACTUARIAL SERVICES, LLC

2801 North University Drive

Suite 203

Coral Springs, Florida 33065

(954) 770-2586

rabzug@eastcoastqdros.com

QDRO CHECKLIST

Full Name of Parties:

Petitioner: _____

Respondent: _____

Retained by:

Attorney for Husband

Attorney for Wife

Jointly

Attorney Contact Information: Husband _____

Wife _____

Complete and Most Recent Addresses of Each Party

Petitioner: _____

Respondent: _____

Social Security Numbers of Each Party

Petitioner: _____ - _____ - _____

Respondent: _____ - _____ - _____

Dates of Birth of Each Party

Petitioner: _____ - _____ - _____

Respondent: _____ - _____ - _____

Date of Divorce _____ - _____ - _____

Date of Division: _____ - _____ - _____

(Usually date of filing)

Date of Marriage: _____ - _____ - _____

County & State of Action: _____

Case Number: _____

Name of Plan Participant: _____

Percentage/Dollar Amount of Award: _____

Precise Name of Plan: _____

Copy of applicable portion(s) of:

- Judgment/Marital Settlement Agreement
- Account Statement or Benefit Statement
- Summary Plan Description – (if available)

Fee (\$500 payable in advance or before commencement of work) **Who is responsible for Payment?** _____

The undersigned Attorney/Law Firm hereby retains East Coast QDROs & Actuarial Services, LLC to provide services in relation to the preparation of a Qualified Domestic Relations Order(s). The undersigned Attorney/Law Firm understands and acknowledges that East Coast is not providing services directly to the Law Firm's client. Services are provided to the Law Firm and not the Law Firm's client, regardless of the manner of payment.

Attorney's Signature

Date