Billing Zip Code:

Order Request Date:



## PENSION EVALUATORS® & QDROs at TROYAN, INC.® & ASSOCIATES GROUP

National Toll Free Number: 800.221.0706 | Fax: 732.212.1113
Dedicated Lawyers' LEGAL SERVICES
Nationwide Expert Actuarial Pension Appraisal & QDRO Preparation Firm
email: info@Pension-Evaluators.com | website: http://www.pension-evaluators.com | P.O. Box 8722, Red Bank, NJ 07701

## ACTUARIAL DEFINED CONTRIBUTION PENSION EVALUATION FOR DIVORCE Checklist Blue Form ACCUCALC® REQUESTING ATTORNEY OR CLIENT DEMOGRAPHIC INFORMATION

ir you are a Party in this action and requesting the report yourseir please complete this section with your information.								
Attorney/Client Name:					Phone Number:			
Firm Name:					Fax Number:			
Street Address / PO Box / Suite:								
City:		State: Zip Coc		ode: Email:				
Party you Represent: Husband Wif	fe Both	(Select One) Attorney	y	Joint Retainer Court	Appoin	tment Media	ator Collaborator	
Opposing Attorney's Name: (complete this section only if to provide copy of report)					Phone Number:			
Firm Name:					Fax Number:			
Street Address / PO Box / Suite:								
City:		State: Zip Code:		Email:				
Pensioner Name:	Pension Plar	Pension Plan Name:				Date of Marriage:		
Date of Birth:	Date Entered	rmal Retirement Age:		End of Marriage / Cutoff Date: (IF STILL MARRIED INPUT CURRENT AGE) (JURISDICTIONAL END OF MARRIAGE DATE: Date the Complaint for				
Gender: Male Female	Breaks in Ser Total Time:	vice Dates: or Start Date:		Return Date:		Divorce is filed. If there is none filed use current date. [New Jersey Statutes Annotated; Title 2A, Chapter 34-23])		
□ Present Value (Typically the Standard) State of Action/Divorce: <b>New Jersey</b> Evaluation Date: (If other than the standard of present day value specify date)								
Pension Evaluation Services/Fees								
Coverture Fraction Method \$250.00	,			Pre/Post Marital Tracing/Segregation Method Enter Total Marital Years -			Add QUICKCALC® \$500.00 Rush Service	
This method creates a fraction of total years in the plan through the account balance as of the End of Marriage Date over the total martial years contributing to the plan. A fraction is created and run against that balance. This method creates the actuarial reduction to marital/community value based on the length of plan contribution to the End of Marriage Date. In other words, that account balance is multiplied by the coverture fraction to determine the value of the account for marital/community property. In sum the coverture fraction isolation method is based on time sensitive calculations which are applied to the account balance as of the End of Marriage Date, creating the coverture fraction to that balance. The result is the value of the account for Marital/Community Property. Required is account balance as of the end of marriage date.	pre-mari on or ab The accommendation of the accommendation of the account account Property balances and as or a second or a se	thod as it states, subtract: ital amount from the amout the End of Marriage I ount balance as of the Er e Date is then subtracted to bunt balance as of the Da e. The difference in balances is the value of for Marital/Commu y. Required is the acc s as of the date of marriage date	This method as it states, subtracts the premarital amount from the amount on about the End of Marriage Date. The accourbalance as of the End of Marriage Date then subtracted from the account balance as of the Date of Marriage. The difference in the account balances is the value of the accourfor Marital/Community Property. Required the account balances as of the date of marriage and as of the end of marriage date. For client accounts above 21 years please contact the office for further term rates. (Febased on quarterly or annual statement supplied to this office). The result of the appraisal following the passive appreciation method shall also identify actual growth of the Pre-marital component adjusted for each and every statement supplied. If som statements aren't available please let us know and we can apply actuarial smoothing that any period.		amount on or te. The account arriage Date is bunt balance as lifference in the of the account ty. Required is f the date of marriage date. 1 years please term rates. (fee ual statements result of this we appreciation tual growth on justed for each lied. If some please let us	Note fee applies to one plan. For multiple plans, and additional services, please call for rates.		
Credit/Debit Card Number: Expiration Date: CW:								

Billing Street # or PO Box #:

Print Cardholder's Name:

Cardholder's Signature:

Charge Credit/Debit Card in the Amount of \$

If Attorney Card Payment on Behalf

**Enclosed in the Amount of \$** 

Husband

Wife