



**QDRO Pros, Inc. DATA SHEET**  
**FEDERAL GOVERNMENT – CSRS, FERS**

**Plan Information**

What is participant's name?

First name \_\_\_\_\_ Middle name \_\_\_\_\_ Last name \_\_\_\_\_

Which Plan is being divided? CSRS **or**  FERS

Plan Administrator Information:

Office of Personnel Management  
Retirement and Insurance Group  
P.O. Box 17  
Washington, DC 20044-0017  
Phone: (888) 767-6738

Did parties' marriage last at least 9 months? Yes **or**  No *If no, not qualified for as Former Spouse*

Did participant perform at least 18 months of civilian service? Yes **or**  No

If NO, STOP, no COAP may be prepared.

**Employment Information**

Date of Hire: Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

Is participant currently retired? Yes **or**  No

**If yes**, what was the date of retirement? Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

**If retired**, what is the Retirement claim number? \_\_\_\_\_

**If retired**, what benefit option was selected at the time of retirement?

**If retired**, what form of benefit did participant select?

- Joint and Survivor annuity with former spouse **or**
- Joint and Survivor annuity with someone else **or**
- Single Life annuity

**Division of Plan Information**

How is former spouse's share determined?

time rule **or**  fixed % \_\_\_\_\_ **or**  fixed \$ \_\_\_\_\_

If former spouse dies first, who should receive benefits?

- revert to participant **or**
- estate of former spouse **or**



minor children of marriage

Has former spouse (the non-employee) remarried?  Yes **or**  No

**If yes**, was former spouse 55 years or older when they remarried?  Yes **or**  No

**If yes**, if FERS, former spouse is not entitled survivor annuity.

**Military questions**

Does or will participant have pension benefits from military service?  Yes **or**  No

Is participant waiving military retirement and adding military service time or credits

to federal civilian retirement plan?  Yes **or**  No

**If yes**, Branch of Service\_\_\_\_\_

**If yes**, is or was participant  Active duty **and/or**  Reserve

If active duty, how many months of creditable service did participant earn during the marriage?\_\_\_\_\_

If reservist, how many points did participant accumulate during marriage?\_\_\_\_\_

**General Information**

Have any prior QDROs been filed on this plan? Yes **or**  No

**If yes**, please mail copies of prior QDROs to QDRO Pros, Inc.

Are there any special Arrangements between you and your former spouse that are not included in the MSA, Judgment for Dissolution, or in the questions above?

**If yes**, please describe special arrangements:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

