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Indiana Pension Valuation / Tracing Intake Form

Attorney Mediator or Self Represented

Name _____ Phone _____ Fax _____

Firm Name _____ Email _____

Address _____

City _____ State _____ ZIP _____

Representing: Participant or Non-Participant Spouse Name: _____

Jointly Retained? Yes No Joint Party's Email _____

Participant Information:

Name _____ Gender _____

Address _____ Phone _____

City _____ State _____ ZIP _____

Plan Name _____

(If there are additional plans please provide detail on [supplemental form](#))

(Defined Contribution Plans) Were there contributions prior to marriage? Yes / No

Statistical Information: Please provide all applicable dates

Marriage: _____ Date of Final Separation: _____

Plan Entry: _____ Date _____ Terminated Retired

Birth (Participant): _____ Birth (Non-Participant Spouse) _____

Is Participant currently collecting a monthly pension: Yes No Monthly pension amount \$ _____

(Pensions) If yes, what form of payment was elected at retirement ? (e.g. Single Life Annuity, 50% Joint and Survivor benefit, etc.)

Please Enclose the following if participant is not already collecting their benefit:

Pension Valuation

- Most recent statement of accrued benefits from plan administrator, if available.

Tracing

- If contributions were made to the account(s) prior to marriage, please provide all quarterly account statements from the date of marriage through the most recent available. Please do not staple statements.
- If no contributions were made prior to marriage, please provide all quarterly account statements from the date of separation through the most recent available. Please do not staple statements.

Our fee for a pension valuation is \$375 per plan.

Our hourly rate for tracing is \$375/hour and we can generally trace 5 years of quarterly statement per hour.

A retainer request will be provided via e-mail and payment is required before work can begin.