

Send or Scan Form, Data and Fee
Pension Analysis Consultants, Inc.
8215 Forest Avenue, P.O. Box 7107
Elkins Park, PA 19027
pac1@pensionanalysis.com
© Pension Analysis Consultants, Inc. 2022



PENSION ANALYSIS CONSULTANTS, INC.

We Value Your Future®
www.pensionanalysis.com

Contact Us
Phone: (215) 782-9845
(800) 288-3675
Fax: (215) 782-9852
(888) 782-9852

QDRO e-request:
mypac.pensionanalysis.com

VALUATION REQUEST FORM 2022

REQUESTED BY: _____

REQUESTOR EMAIL: _____

PAC MAY DISCUSS WITH: _____

PARTICIPANT INFORMATION (PLANHOLDER; EMPLOYEE OF PLAN TO BE VALUED)			
PLANHOLDER NAME		<input type="checkbox"/> FEMALE	<input type="checkbox"/> MALE
BIRTH DATE		DATE OF MARRIAGE	
HIRE DATE		DATE OF MARITAL SEPARATION, COMPLAINT	
PLAN ENTRY DATE		DIVORCE COUNTY	
EMPLOYER		PLAN NAME	
STATUS AT PLAN	<input type="checkbox"/> ACTIVE AT PLAN <input type="checkbox"/> TERMINATED / / <input type="checkbox"/> RETIRED / /		

ALTERNATE PAYEE INFORMATION (NON-EMPLOYEE SPOUSE)			
NON-EMPLOYEE SPOUSE		BIRTH DATE	<input type="checkbox"/> FEMALE <input type="checkbox"/> MALE

REQUESTING PARTY FOR REPRESENTING	
ATTORNEY or MEDIATOR	<input type="checkbox"/> PLANHOLDER <input type="checkbox"/> SPOUSE
FIRM	
ADDRESS	
EMAIL	PHONE

SERVICE RUSH SERVICE AVAILABILITY - CALL US FIRST **DOCUMENTATION NEEDED** **FEE DUE AT REQUEST**

STANDARD TURNAROUND 10-14 BUSINESS DAYS <input type="checkbox"/>	REGULAR RUSH (4-7 DAYS) add \$75 <input type="checkbox"/>	PRIORITY RUSH (8-48 HOURS) add \$125 <input type="checkbox"/>
INTEREST RATE TO BE USED: <input type="checkbox"/> IRC OR <input type="checkbox"/> PBGC. (PBGC GIVES A HIGHER VALUE). IF NO RATE IS CHOSEN BY THE REQUESTOR, IRC RATE WILL BE USED.		
<input type="checkbox"/> DEFINED BENEFIT PLAN VALUATION	PROVIDE A STATEMENT OF ACCRUED BENEFIT PAYABLE AT NORMAL RETIREMENT	\$250
<input type="checkbox"/> MILITARY PENSION (ACTIVE)	PROVIDE RANK & RESERVES-POINTS HISTORY	\$250
<input type="checkbox"/> FEDERAL PENSION	PROVIDE HIGH 3 SALARY AND CONTRIBUTIONS	\$250
<input type="checkbox"/> SOCIAL SECURITY OFFSET	PROVIDE WAGE HISTORY OF EMPLOYEE	\$340
<input type="checkbox"/> *JOINT AND SURVIVOR	PROVIDE OPTION TAKEN AT RETIREMENT	\$120*
<input type="checkbox"/> *ADDITIONAL INTEREST RATE OR CUTOFF DATE		\$125 PER ADDITION*
<input type="checkbox"/> CRITIQUE OF OPPOSING VALUATION -- VERBAL -- WRITTEN	SERVICE DOCUMENTATION & OPPOSING REPORT	\$100* \$300/HOUR WITH RETAINER
<input type="checkbox"/> DEFINED CONTRIBUTION VALUATION (401(K), 403(B), TIAA-CREF, TSP, STOCK OWNERSHIP STARTED BEFORE THE MARRIAGE ____ STARTED AFTER THE MARRIAGE ____	STARTED BEFORE MARRIAGE: PROVIDE QUARTERLY STATEMENTS FROM MARRIAGE TO PRESENT DATE STARTED AFTER MARRIAGE: PROVIDE QUARTERLY STATEMENTS FROM MARITAL CUT-OFF DATE TO PRESENT DATE	BEFORE MARRIAGE DATE: \$600 HOURLY FEES MAY APPLY IN COMPLEX CASES AFTER MARRIAGE DATE: \$300

*IN ADDITION TO THE STANDARD REPORT, IF NEEDED INDIVIDUALLY A FULL FEE WILL APPLY. REFUNDS FOR ANY REASON ARE GIVEN AT THE DISCRETION OF PAC, LESS ADMINISTRATIVE AND HANDLING FEE.
CALL OFFICE FOR TESTIMONY, WAGE OR EARNING LOSS, DIABILITY OR CONSULTING. TWO WEEK MINIMUM NOTICE FOR TESTIMONY
Cancellations after a payment is processed is subject to a \$25 Fee. Withdrawn requests are subject to a minimum of \$125 fee for administration, handling, and review.

PAYMENT: PROVIDE CHECK OR MONEY ORDER PAYABLE TO PAC, or CREDIT CARD INFORMATION AND CARDHOLDER NAME AND CARDHOLDER ADDRESS

CARD NUMBER, EXPIRATION DATE & SECURITY CODE	CHECK ENCLOSED \$ _____ CARD AUTHORIZED \$ _____
CARDHOLDER NAME AND ADDRESS ON THE CARD	