

Part A: Employee Benefit Plan Questionnaire.

Your full name: _____

Have you ever been known by any other name? If so, state here:

Your Social Security number: ____-____-_____

Your spouse's full name: _____

Has your spouse ever been known by any other name? If so, state here:

Your spouse's Social Security number: ____-____-_____

(Note: If you are not sure of your spouse's Social Security number, look on your old federal or state income tax returns. Pay stubs and driver's licenses usually also show Social Security numbers. They are in the form of a 9-digit number such as 123-45-6789).

Date of marriage: _____

Date of separation: _____ (leave blank if not separated yet)

Date of divorce: _____ (leave blank if not divorced yet)

Part A-1: Your Employment.

The form on this page relates to YOUR EMPLOYMENT during your marriage. If you worked for more than one employer, please make extra copies of this page and fill out a separate page for EACH JOB you held during the marriage. INCLUDE PART-TIME JOBS and SECOND JOBS (National Guard/Reserves, etc.). Do the best you can to complete every item.

1. Employed from _____ to _____

2. Employer's name: _____

3. Employer's address: _____

4. Employer's telephone and fax numbers:

5. Name of person to contact there about employee benefits: _____ and their address and telephone number:

6. To your knowledge are you entitled to any pension or retirement benefits as a result of this employment? If so, please describe in as much detail as you can.

7. Are you entitled to the proceeds of any employer-sponsored savings plan, stock option plan, stock bonus plan, or any other form of employee benefit? If so, please describe in as much detail as you can on a separate sheet.

8. If you have received any information from this employer about pension or retirement benefits, please provide us with a copy or the original of that information when you return this questionnaire to us.

9. If you are currently employed, please attach a copy of a recent paycheck stub from your job, showing gross pay, take-home pay, deductions, etc.

Part A-2: Your Spouse's Employment.

The form on this page relates to YOUR SPOUSE'S EMPLOYMENT during your marriage. If he or she worked for more than one employer, please make extra copies of this page and fill out a separate page for EACH JOB your spouse held during the marriage. INCLUDE PART-TIME JOBS and SECOND JOBS (National Guard/Reserves, etc.). Do the best you can to complete

every item.

1. Employed from _____ to _____

2. Employer's name: _____

3. Employer's address: _____

4. Employer's telephone and fax numbers:

5. Person to contact there about employee benefits: _____ and their
address and telephone number:

6. To your knowledge is your spouse entitled to any pension or retirement benefits as a result of this employment? If so, please describe in as much detail as you can on a separate sheet.

7. To your knowledge is your spouse entitled to the proceeds of any employer-sponsored savings plan, stock option plan, stock bonus plan, or any other form of employee benefit? If so, please describe in as much detail as you can.

8. If your spouse has received any information from this employer about pension or retirement benefits, or any form of employee benefit plan, *and if you can obtain a copy of it without creating problems at home*, please provide us with a copy of that information when you return this questionnaire to us.

9. *If you can obtain a copy of it without creating problems at home*, please attach a copy of a recent paycheck stub from your spouse's current job, showing gross pay, take-home pay, deductions, etc.

Part B: When and in what form you would like to receive your share of your spouse's pension?

In this part of the questionnaire, we would like you to set down your personal goals and your thoughts and comments about when and in what form you would like to receive your share of your spouse's pension rights and other employee benefits. Many employee pension and benefit plans only offer a few alternative methods of distribution, so an alternative you want (such as a lump-sum payment) may not be available from the plan. We cannot guarantee that we will be able to arrange for payment in any particular form, but we will do our best to obtain what you want for you.

Please rank the following alternatives from 1 to 6, with *1 being the best* alternative (the one you would prefer the most) and *6 being the worst* alternative (the one you would least like to have):

___ Lump-sum payment from the plan right away, or as soon as possible, even though I understand I will have to pay taxes on it

___ Rollover of part of my spouse's benefits into an IRA I can establish (no tax payable until I make withdrawals from the IRA)

___ Award of a larger share of other assets (such as more equity in the family home, vehicles, cash, stocks, or bonds) to be given to me immediately in exchange for my waiving any interest in my spouse's pension rights

___ A pension to provide for my own retirement security, starting when my spouse retires and ending on his or her death

___ A pension to provide for my own retirement security, starting when my spouse retires and ending on my death even if my spouse dies first

___ A pension to provide for my own retirement security starting when I choose and continuing until my death even if my spouse dies first