

QDRO TRANSMITTAL LETTER

Date

Board of Trustees
Northwest Ironworkers Retirement Trust
P. O. Box 34203
Seattle, WA 98124

Re: QDRO – _____ and _____
Participant *Alternate Payee*

Dear Plan Administrator:

Enclosed is a Qualified Domestic Relations Order (“Order”) impacting the benefits under the Northwest Ironworkers Retirement Trust.

This Order is a: Draft, or
 Court Certified Copy

As noted in the Order, the social security number and date of birth of the Participant and Alternate Payee will be provided separately. They are as follows:

Participant

Participant: _____
Social Security Number: _____
Date of Birth: _____

Alternate Payee

Alternate Payee: _____
Social Security Number: _____
Date of Birth: _____

If further information is needed in connection with this QDRO, please contact

Names: _____
Phone Number: _____

Sincerely,

Signature

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IN THE SUPERIOR COURT OF THE STATE OF _____
IN AND FOR THE COUNTY OF _____

IN RE THE MARRIAGE OF:

_____,

Petitioner,

v.

_____,

Respondent.

NO. _____

QUALIFIED DOMESTIC RELATIONS
ORDER

WHEREAS, the Court has jurisdiction over all parties and over the subject matter in this dissolution action; and

WHEREAS, the parties to this Order and Court intend this Order to be a Qualified Domestic Relations Order (hereinafter referred to as "Order" or "QDRO") as that term is used in the Retirement Equity Act of 1984, as amended, and interpreted in accordance with that Act; and

WHEREAS, the parties have stipulated that the Court shall enter this Order as an Addendum to the Decree of Dissolution of Marriage filed herein on _____(date), NOW, THEREFORE,

IT IS HEREBY ORDERED by the Court as follows:

1. Definitions. The following are the definitions used in this Order:

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1.1 "Participant"
Name: _____
Address: _____

The Participant's social security number and date of birth will be provided separately to the Plan Administrator.

1.2 "Alternate Payee"
Name: _____
Relationship to Participant: _____
Address: _____

The Alternate Payee's social security number and date of birth will be provided separately to the Plan Administrator.

1.3 "Plan" Northwest Ironworkers Retirement Plan

1.4 "Plan Administrator" Board of Trustees
Address: P.O. Box 34203
Seattle, WA 98124

2. **Division of Marital Property.** This Order hereby creates and recognizes the existence of the Alternate Payee's rights to receive a portion of the Participant's benefits under the Plan.

3. **Participant's Retirement.** Participant retired effective _____ (date) and elected benefits payable in the form of a (select one):

- 50% Participant and Spouse Pension
- 75% Survivor Pension
- 100% Survivor Pension

designating Alternate Payee as beneficiary following Participant's death.

4. **Payments to Alternate Payee.** Effective the month following entry of this Order and receipt of a conformed copy by Pension Plan, the entire interest in the benefits from the Plan is awarded to participant. The Alternate Payee waives any and all rights to present or future benefit payments, including survivorship benefits that Alternate Payee may have otherwise been entitled to receive. Participant shall be entitled to increase the benefits payable to Participant to a Single Life Annuity pursuant to the terms of the Plan.

