

[Shared Payment - for benefits in pay status]

STATE OF _____
IN THE CIRCUIT COURT FOR THE COUNTY OF _____

[PLAINTIFF'S NAME],

Case No. __-____

Plaintiff,

Hon. _____

v

[DEFENDANT'S NAME],

Defendant.

_____/

Attorneys for Plaintiff

_____(P____)

_____, _____

____/____-____

_____/

Attorneys for Defendant

_____(P____)

_____, _____

____/____-____

DOMESTIC RELATIONS ORDER

At a session of the Court, held in the State of
_____, County of _____, on this _____ day
of _____, 20__.

PRESENT: HONORABLE

This order creates and recognizes the existence of an alternate payee's right to receive a portion of the participant's benefits payable under an employer sponsored defined benefit pension plan that is qualified under Section 401 of the Internal Revenue Code (the "Code") and the Employee Retirement Income Security Act of 1974 ("ERISA"). It is intended to constitute a qualified domestic relations order under ERISA §206(d) and Code §414(p).

This order is entered pursuant to the authority granted in the applicable domestic relations laws of the State of [insert name of applicable State] and relates to the provision of marital property rights or spousal support to the alternate payee as a result of the judgment of divorce between the participant and alternate payee.

This order assigns a portion of [Plaintiff's] [Defendant's] retirement benefits to [Plaintiff] [Defendant] as follows:

1. The plan subject to this order is the Sheet Metal Workers Local 7, Zone 2 Pension Plan.

2. The plan administrator is the joint board of trustees, whose address is:

Trustees of the Sheet Metal Workers Local 7, Zone 2
Pension Trust
c/o Watkins Ross
200 Ottawa Ave NW Suite 600
Grand Rapids MI 49503

3. The participant is _____, whose last known address and telephone number are:

Address: _____

Telephone Number: (____) _____

4. The alternate payee is _____, whose last known address and telephone number are:

Address: _____

Telephone Number: (____) _____

5. The alternate payee is assigned a portion of the participant's benefit under the plan as follows:

[use one subsection (a) and then continue with subsection (b) and following]

(a) *[if participant is receiving a QJSA with the alternate payee]*
[\$____] [____%] per month. If the participant dies before the alternate payee, the alternate payee will be entitled to receive the survivor annuity benefit. If the alternate payee dies before the participant, the assigned benefit will revert to the participant.

(a) *[if participant is receiving a QJSA with a current spouse who is not the alternate payee]* [\$_____] per month until the alternate payee's death or, if earlier, the death of the survivor of the participant and the participant's current spouse. If the alternate payee dies before the participant (or the participant's current spouse), the assigned benefit will revert to the participant (or the participant's current spouse).

(a) *[if participant has elected a QJSA with a current spouse who is not the alternate payee]* [\$_____] [_____%] per month of the amount payable to the participant until the participant's death and, if the participant's current spouse survives the participant, [\$_____] [_____%] per month of the amount payable to the participant's surviving spouse until the alternate payee's death or, if earlier, the death of the survivor of the participant and the participant's current spouse. If the alternate payee dies before the participant (or the participant's current spouse), the assigned benefit will revert to the participant (or the participant's current spouse).

(b) The participant's benefit will be reduced by the portion assigned to the alternate payee.

(c) [If the plan provides any cost-of-living increase after the participant's annuity starting date, the alternate payee will be entitled to a pro rata share of the increase. As used in this subsection, *pro rata share* means the cost-of-living increase multiplied by a fraction with a numerator equal to the portion of the participant's accrued benefit assigned to the alternate payee and a denominator equal to the participant's accrued benefit, taking into account all of the participant's accrued benefit, without any adjustment for the alternate payee's age or for the commencement of payment before or after the participant's normal retirement date.]

6. The alternate payee shall include the taxable amount of the alternate payee's benefit in the alternate payee's gross income for federal income tax purposes (and corresponding state and local tax purposes).

7. Nothing in this order will be interpreted or construed to require the plan or plan administrator to:

(a) provide any type or form of benefit or any option that is not otherwise provided under the terms of the plan;

(b) provide benefits in excess of the benefits to which the participant would have been entitled in the absence of this order; or

(c) pay benefits to the alternate payee that are required to be paid to another alternate payee under another order previously determined to be a qualified domestic relations order.

8. The alternate payee shall provide the plan administrator with the alternate payee's Social Security number and a copy of the alternate payee's birth certificate and shall notify the plan administrator in writing of any change of name, address, or telephone number.

9. The alternate payee shall serve a certified copy of this order on the plan administrator.

10. This order is intended to be a qualified domestic relations order under section 206(d)(3) of the Employee Retirement Income Security Act of 1974 as amended and section 414(p) of the Internal Revenue Code of 1986 as amended. The Court will retain jurisdiction to clarify this order if the plan administrator has questions about interpretation or determines that the order does not qualify under ERISA or the Code.

11. In the case of conflict between the terms of this order and the terms of the plan, the terms of the plan shall prevail.

CERTIFIED AS TRUE COPY

Clerk of the Court

Circuit Judge

APPROVED AS TO FORM AND CONTENT:

Plaintiff

Attorney for Plaintiff

Defendant

Attorney for Defendant

TO BE OMITTED FROM THE PUBLIC RECORD
ATTACHMENT TO THE QUALIFIED DOMESTIC RELATIONS ORDER IN

Case No. __-____-D_

[NAME]

Social Security Number:

Date of Birth:

Phone No.: (____)

[NAME]

Social Security Number:

Date of Birth:

Phone No.: (____)