

# Troyan & Associates, P.A.

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The QDROAttorney.com Firm

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PRACTICE DEDICATED TO PENSIONS / QDROs / VALUATIONS

Requester's Name: \_\_\_\_\_ Date: \_\_\_\_\_;

Requester's E-Mail Address: \_\_\_\_\_;

Firm Name(if applicable): \_\_\_\_\_;

Street Address or Box # \_\_\_\_\_;

City, State, Zip: \_\_\_\_\_;

Requester's Telephone: \_\_\_\_\_; Requester's Affiliation: Pensioner: \_\_\_\_\_;

Non-Pensioner: \_\_\_\_\_; Mediator \_\_\_\_\_; Attorney for Participant/Pensioner: \_\_\_\_\_;

Attorney for Non-Pensioner \_\_\_\_\_; Send Copy to (name): \_\_\_\_\_;

Address/Email to Send Copy: \_\_\_\_\_;

Pensioner Name: \_\_\_\_\_ Date of Birth \_\_\_\_\_;

Plan Name: \_\_\_\_\_ Plan Entry Date: \_\_\_\_\_;

Date of Marriage: \_\_\_\_\_ End of Marriage Date: \_\_\_\_\_;

Employment Status: Active: \_\_\_\_\_; Terminated: \_\_\_\_\_; Retired: \_\_\_\_\_; Disabled: \_\_\_\_\_;

**Required: Benefit Statement:** An accrued benefit estimate/statement which provides the employee's date of hire, date of participation, credited service and accrued benefit as of the end of marriage date payable at normal retirement age.

**-OR-**

If retired and collecting: Provide date of retirement \_\_\_\_\_ and benefit calculation showing the retirement option elected, date of hire, participation, credited service, date of termination.

## Pension Evaluation Fee: **\$350.00**

\_\_\_\_\_(Next Day Rush Fee add \$100.00)

Check Enclosed. Amount \$ \_\_\_\_\_ Secure Payment Link: 

MAKE PAYMENT

VISA  DISCOVER  eCheck  LAWPAY 

Secure Payment made on our website at: <https://www.troyanlaw.com/> for eCheck / affirm

Credit Cards Accepted: Amex: \_\_\_\_\_; VISA \_\_\_\_\_; MC \_\_\_\_\_; Discover \_\_\_\_\_;

Cardholder's Name \_\_\_\_\_ Amt. to Charge: \$ \_\_\_\_\_

Card Number \_\_\_\_\_ Expiration Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Billing Zip Code \_\_\_\_\_ 3/4 Digit Security Code \_\_\_\_\_

Cardholder's Tel: #: \_\_\_\_\_ Email receipt to: \_\_\_\_\_

This form is available on our website: <https://www.troyanlaw.com/pension-evaluations>