

To:
Wisconsin Department of
Employee Trust Funds
P.O. Box 7931
Madison, WI 53707-7931

State of Wisconsin, County: _____

For Official Use

Circuit Court Branch: _____

Address:

Note: Altered, incomplete or inaccurate forms may be rejected.

Order to Divide Wisconsin Retirement System Benefits Domestic Relations Order Wis. Stats. §§ 40.02(48m) and 40.08 (1m) Case No. _____	In re the marriage or domestic partnership of: _____ Petitioner, and _____ Respondent.
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Notwithstanding any conflicting or contrary provisions in the final judgment decree or order terminating this marriage or domestic partnership, or in any prior domestic relations orders, the court finds:

Participant and participant's employer

(check one) Petitioner
 Respondent

("Participant") is or was employed by _____ (*Employer name*) ("Participant's Employer"), a Wisconsin Retirement System participating employer under Wis. Stat. §40.02(47). *Note:* If both the Petitioner and Respondent are participants whose WRS benefits are to be divided, use a separate Order for each.

Termination of marriage or domestic partnership

(check one) Divorce
 Legal Separation
 Termination of Chapter 40 Domestic Partnership
 Termination of Chapter 770 Domestic Partnership

On _____ (*date*), the marriage or domestic partnership between the participant and his/her spouse or domestic partner ("Alternate Payee"), was in the case of marriage, terminated by this court under a final judgment, decree or order issued under Wis. Stat. § Chapter 767 or in the case of a domestic partnership, terminated by filing with ETF an Affidavit of Termination of Domestic Partnership (ET-2372) under Wis. Stat. Sec. 40.51(2m)(a) and Wis. Admin Code Sec. ETF 20.10(3), or terminated by filing a notice of termination of domestic partnership under Wis. Stat. §770.12. (*insert citation to the Wisconsin domestic relations law that applies to the termination of the domestic partnership*) _____.

Complete each section for the Participant and Alternate Payee

Participant		Alternate Payee	
Name (<i>first, middle, last</i>)		Name (<i>first, middle, last</i>)	
Social Security number	Birth date (<i>MM/DD/CCYY</i>)	Social Security number	Birth date (<i>MM/DD/CCYY</i>)
Last known mailing address:		Last known mailing address:	

Percentage

The Alternate Payee is awarded _____ % (*insert single percentage with no more than two decimal places and not to exceed 50%*) of the total value of *all* parts of the Participant's account as of the decree date. This *cannot* be a dollar figure.



Upon the above facts, it is hereby ordered that:

1. Hereinafter, the "decree date" shall be the first day of the month in which the marriage or domestic partnership of the parties was terminated.
2. Within 30 days of a request by the Department of Employee Trust Funds, and in any event, within 45 days of this Order, the Participant shall certify and prove personal active duty military service or provide an affidavit of no active military service (*Military Service Certification and Affidavit - QDRO* (ET-4322) to ETF at the address listed on the front of this form. It is strongly recommended that military documentation be submitted with the QDRO to ensure prompt and accurate division of the participant's account and to avoid potential delays in benefits for both parties.
3. Within 30 days of receipt of a written request from ETF or a copy of this Order, the Participant's Employer shall submit to ETF a report of the earnings, service and contributions of the Participant, in the form specified by ETF. The report shall include all of the Participant's earnings, service and contributions through the day before the decree date that have not previously been reported to ETF.
4. After receipt of the above certification of military service and report of earnings, service and contributions, ETF shall value the Participant's benefits under the Wisconsin Retirement System as of the decree date and divide those benefits as provided under Wis. Stat. § 40.08 (1m), using the decree date and percentage awarded to the Alternate Payee.
5. Neither the Participant nor Alternate Payee shall have any ownership or control of the benefits distributed to the other as a result of this order and operation of Wis. Stat. § 40.08 (1m).
6. There shall be no division or payment of benefits which are required to be paid to the Internal Revenue Service under a lien placed on the Participant's account under 26 U.S.C. 64.
7. There shall be no benefits paid to the Alternate Payee which are also required to be paid to another alternate payee under another order previously determined to be a Qualified Domestic Relations Order.
8. There shall be no payment of benefits exceeding in value those benefits to which the Participant is entitled on the decree date.
9. ETF is *not* required to:
 - a. Enforce or otherwise monitor the benefits assigned to the Alternate Payee under Wis. Stat. § 40.08 (1m).
 - b. Take any action or make any notifications as part of the exercise of ownership rights granted under Wis. Stat. § 40.08 (1m).
 - c. Enforce or otherwise monitor any beneficiary designation specified in any agreement of the parties or in the judgment, decree or order terminating this marriage or domestic partnership.
10. If the aggregate benefits payable to both the Participant and the Alternate Payee would exceed the benefit limits under Section 415(b) of the Internal Revenue Code (IRC), ETF shall make any necessary adjustments to the Participant's and Alternate Payee's benefits on an equitable pro rata basis to assure compliance with the Internal Revenue Code.
11. This Order is intended to be a Qualified Domestic Relations Order as defined by Wis. Stat. § 40.02 (48m). It supersedes any previous order to divide the Participant's Wisconsin Retirement System benefits issued in connection with the termination of this marriage or domestic partnership, including the judgment, decree or order terminating the marriage or domestic partnership.

Judge's Signature Required

Signature of the Circuit Court Judge or Circuit Court Commissioner

Title (Also print or type name if not eSigned)

Date

It is the responsibility of the parties to submit this DRO to ETF as soon as possible at the address listed on the front of this form. Any delay may impact benefits.

Distribution of copies: Original to Court file, Certified copy to Department of Employee Trust Funds, Copy to Petitioner, Copy to Respondent, Copy to Participant's Employer.

