

1 Name \_\_\_\_\_  
Address \_\_\_\_\_  
2 City State Zip \_\_\_\_\_  
3 Phone \_\_\_\_\_

4 [Attorneys for Petitioner/Respondent] or [Pro Per]

5  
6  
7 **IN THE SUPERIOR COURT OF THE STATE OF ARIZONA**  
8 **IN AND FOR THE COUNTY OF \_\_\_\_\_**

9 In Re the Marriage of:  
10 \_\_\_\_\_,  
11 \_\_\_\_\_,  
12 Petitioner,  
13 and  
14 \_\_\_\_\_,  
15 Respondent.

NO.: \_\_\_\_\_

**DOMESTIC RELATIONS ORDER**

**OR**

**AMENDED DOMESTIC  
RELATIONS ORDER**

16 *After this Order is drafted, provide the PSPRS/CORP/EORP with a copy for review  
17 and acceptance prior to filing it with the court.*

18  
19 The Court makes the following findings and orders:

20 **SECTION 1 – RETIREMENT PLAN**

21 This Domestic Relations Order (“Order”) hereby creates or recognizes the existence of an  
22 Alternate Payee's right to, or assigns to an Alternate Payee the right to receive a portion of the  
23 benefits payable to a retirement plan Participant. The Order divides the Participant’s interest in one  
24 of the following public retirement plans (hereinafter “System or Plan”) as indicated:

25 Check only ONE of the following:

- 26  Public Safety Personnel Retirement System; **OR**  
27  Corrections Officer Retirement Plan; **OR**  
28  Elected Officials’ Retirement Plan.

1 **SECTION 2 – MEMBER/PARTICIPANT INFORMATION**

2  
3 The “Participant” is the

4 Check only ONE of the following:

5  Petitioner; **OR**

6  Respondent

7 in these proceedings, whose mailing address and date of birth are:

8 Address: \_\_\_\_\_

9 Date of Birth: \_\_\_\_\_

10 **SECTION 3 – NON-MEMBER/ALTERNATE PAYEE INFORMATION**

11 The “Alternate Payee” is the

12 Check only ONE of the following:

13  Petitioner; **OR**

14  Respondent

15 in these proceedings, whose mailing address and date of birth are:

16 Address: \_\_\_\_\_

17 Date of Birth: \_\_\_\_\_

18  
19 **SECTION 4 – GENERAL INFORMATION**

20 a. This Order relates to the marital property rights of the spouses under the community  
21 property laws of Arizona.

22 b. For purposes of calculating benefits based on the formula provided in this Order, the  
23 Participant and the Alternate Payee were married on \_\_\_\_\_.

24 c. For purposes of calculating benefits based on the formula provided in this Order, the  
25 date in which the community property interest ended is: \_\_\_\_\_ (which is either  
26 the date of divorce, **OR** based on a date other than the date of divorce as determined by the parties  
27 and the Court).  
28

1 **SECTION 5 – PARTICIPANT’S TERMINATION OF EMPLOYMENT BEFORE**  
2 **RETIREMENT (REFUND)** [Skip this Section if Participant is already retired, or  
3 participating in the Deferred Retirement Option Plan (DROP)]

4 If the Participant’s employment is terminated, and the Participant withdraws his or her  
5 accumulated contributions in a lump sum (the “Lump Sum Refund”):

6 Check only ONE of the following (A, B, OR C):

7  **Item A (Formula):** The Alternate Payee is entitled to receive as his or her sole and  
8 separate property, directly from the System or Plan, a percentage of the Lump Sum Refund, plus the  
9 corresponding percentage of an enhanced refund (if any), based on the following formula:

10  
11 (total months as member during  
12 marriage per dates in Section 4  
13  $\frac{\text{NUMERATOR}}{\text{DENOMINATOR}}$   $\times .50 =$  Alternate Payee’s %  
14 of benefits  
15 (total months of credited service)

14 **OR**

15  **Item B (Specific Dollar Amount):** The Alternate Payee is entitled to receive as his or  
16 her sole and separate property, directly from the System or Plan, a **specific dollar amount of**  
17 **\$ \_\_\_\_\_.**00 (you MUST enter a dollar amount) of the Lump Sum Refund.

19 **OR**

20  **Item C (Specific Percentage):** The Alternate Payee is entitled to receive as his or her  
21 sole and separate property, directly from the System or Plan, a **specific percentage of \_\_\_\_\_%**  
22 (you MUST enter a percentage here, such as 25%, 50%, etc.) of the Lump Sum Refund.

23 . . .  
24 . . .  
25 . . .  
26 . . .  
27 . . .

**SECTION 6 – DIVISION OF MONTHLY PENSION PAYMENTS**

Alternate Payee is awarded, as his or her sole and separate property, a pro-rata share of Participant’s monthly pension, payable directly by the System or Plan at the same time and in the same manner payments are made to the Participant pursuant to the System or Plan, determined in the following manner:

Check only ONE of the following (A, B, or C):

**Item A (Formula):** If the Participant receives a monthly pension (or disability) payment, the Alternate Payee is entitled to receive as his or her sole and separate property, directly from the System or Plan, a percentage of the monthly payments based on the following formula, adopted by the Court, which calculation is to be completed by the System or Plan:

$$\frac{\text{NUMERATOR}}{\text{DENOMINATOR}} \times .50 = \text{Alternate Payee's \% of benefits}$$

(total months as member during marriage per dates in Section 4 including all service transfers and purchases completed during marriage) / (total months of credited service)

**OR**

**Item B (Specific Dollar Amount):** If the Participant receives a monthly pension (or disability) payment, the Alternate Payee is entitled to receive as his or her sole and separate property, directly from the System or Plan, a **specific dollar amount per month of \$ \_\_\_\_\_.**00 (you MUST enter a dollar amount).

**OR**

**Item C (Specific Percentage):** If the Participant receives a monthly pension (or disability) payment, the Alternate Payee is entitled to receive as his or her sole and separate property, directly from the System or Plan, a **pre-determined percentage per month of \_\_\_\_\_%** (you MUST enter a percentage such as 25%, 50%, etc.) of the Participant’s monthly pension payment.

. . .  
. . .  
. . .  
. . .

1 **SECTION 7 – POST-RETIREMENT BENEFIT INCREASES (COLA)**

2 Check only ONE of the following (A OR B).

3  **Item A:** The Alternate Payee shall be entitled to the post-retirement benefit increases  
4 (COLA) that the Participant becomes entitled to receive based upon the formula selected in  
5 Section 6.

6 **OR**

7  **Item B:** All post-retirement benefit increases (COLA) are awarded solely to the  
8 Participant.

9  
10 **SECTION 8 – DEFERRED RETIREMENT OPTION PLAN or REVERSE DEFERRED**  
11 **RETIREMENT OPTION PLAN, as applicable. [Skip this Section if Participant is already**  
12 **retired and/or did not participate in the DROP/Reverse DROP program]**

13 If the Participant elects a deferred retirement option plan, or reverse deferred retirement  
14 option plan, as applicable (“DROP/Reverse DROP”):

15 Check only ONE of the following (A, B, C, OR D):

16  **Item A (Formula):** If the Participant receives a monthly pension payment, the Alternate  
17 Payee is entitled to receive as his or her sole and separate property, directly from the System or Plan,  
18 a percentage of the accumulated pension deferred under DROP/Reverse DROP, based upon the  
19 formula method prescribed in Section 6. This payment will be in addition to the Alternate Payee’s  
20 portion of the Participant’s monthly pension as calculated under Section 6.

21 **OR**

22  **Item B (Specific Dollar Amount):** The Alternate Payee shall be entitled to receive as his  
23 or her sole and separate property, directly from the System or Plan, a **specific dollar amount of**  
24 **\$ \_\_\_\_\_.**00 (you MUST enter a dollar amount) of the DROP/Reverse DROP benefit. This  
25 payment will be in addition to the Alternate Payee’s portion of the Participant’s monthly pension as  
26 calculated under Section 6.

27 **OR**

1            **Item C (Specific Percentage):** The Alternate Payee is entitled to receive as his or her  
2 sole and separate property, directly from the System or Plan, a **pre-determined percentage of**  
3       % (you MUST enter a percentage such as 25%, 50%, etc.) of the DROP/Reverse DROP  
4 benefit. This payment will be in addition to the Alternate Payee's portion of the Participant's  
5 monthly pension as calculated under Section 6.

6           **OR**

7            **Item D:** All DROP/Reverse DROP, benefits are awarded solely to the Participant.  
8

9 **SECTION 9** – EMPLOYEE CONTRIBUTIONS DURING PARTICIPATION IN THE  
10 DEFERRED RETIREMENT OPTION PLAN, as applicable. [Skip this Section if  
11 Participant is not in the PSPRS, participated in DROP prior to 1-1-2012 and/or did not  
12 participate in the DROP program]

13           If the Participant elects to participate in the deferred retirement option plan after January 1,  
14 2012 and required to pay employee contributions during participation in DROP, the Alternate Payee  
15 is awarded the employee contributions in the following manner:

16           Check only ONE of the following (A OR B):

17            **Item A (One-Half through Community Property End Date):** The Alternate Payee is  
18 entitled to one-half of the employee contributions made only during the member's participation in  
19 DROP based upon the dates in Section 4. (If no community property end date is provided in Section  
20 4, one-half of the employee contributions will be paid to the Alternate Payee based on the date of  
21 divorce.)

22           **OR**

23            **Item B:** All employee contributions during the member's participation in DROP are  
24 awarded solely to the Participant.

25           . . .

26           . . .

27           . . .

1 **SECTION 10 – DISPOSITION OF ALTERNATE PAYEE’S SHARE IN THE EVENT**  
2 **ALTERNATE PAYEE PREDECEASES PARTICIPANT (THIS SECTION IS OPTIONAL)**

3 If the Alternate Payee predeceases the Participant:

4 Check only ONE of the following (A OR B):

5  **Item A:** As provided by law, Alternate Payee’s portion of the benefits passes to his/her  
6 estate. The personal representative of the Alternate Payee shall receive the share of the Participant’s  
7 benefit payments awarded to the Alternate Payee in this Order upon the same terms and conditions  
8 that the Alternate Payee would have received such payments if the Alternate Payee were living. The  
9 System or Plan shall not be responsible for making payments to the personal representative of the  
10 Alternate Payee until the personal representative has filed with the System or Plan proof of the  
11 personal representative’s authority to receive payments. The System or Plan cannot allow the  
12 Alternate Payee to designate a beneficiary with the System or Plan.

13 **OR**

14  **Item B:** The Alternate Payee hereby knowingly and voluntarily waives his/her right to  
15 bequeath his/her portion the awarded portion of the Participant’s retirement benefits to his/her estate,  
16 and agrees that his/her awarded portion of the retirement benefits may revert to Participant.  
17

18 **SECTION 11 – DISPOSITION OF ALTERNATE PAYEE’S SHARE OF BENEFITS**  
19 **IN THE EVENT PARTICIPANT PREDECEASES ALTERNATE PAYEE**

20 **In the event the Participant predeceases the Alternate Payee, any benefits that the**  
21 **Alternate Payee was entitled to receive, or was receiving, will cease upon the death of the**  
22 **Participant.**

23  
24 **SECTION 12 – ORDERS TO ALTERNATE PAYEE**

25 a. Alternate Payee shall provide the System or Plan written notification of any changes  
26 in Alternate Payee’s mailing address. The System or Plan is not liable for failing to make payments  
27 to Alternate Payee if the System or Plan does not have the current mailing address for the Alternate  
28 Payee at the time of payment.

1           b.       If there is a name change to the Alternate Payee, complete our *Address and Name*  
2 *Change Form* located on our website at <http://www.psprs.com/>.

3           c.       Alternate Payee shall provide his or her social security number to the System or Plan  
4 within ten (10) days of the date of this Order.

5  
6 **SECTION 13 – ORDERS TO PARTICIPANT**

7           a.       Participant shall provide the System or Plan written notification of any changes in  
8 Participant’s mailing address. The System or Plan is not liable for failing to make payments to  
9 Participant if the System or Plan does not have the current mailing address for the Participant at the  
10 time of payment.

11          b.       If there is a name change to the Participant, complete our *Address and Name Change*  
12 *Form* located on our website at <http://www.psprs.com/>.

13          c.       Participant shall serve a certified copy of this Order upon the System or Plan within  
14 ten (10) days of the date of this Order, at the following address: 3010 East Camelback Road, Suite  
15 200, Phoenix, Arizona 85016.

16  
17 **SECTION 14 – MISCELLANEOUS ORDERS**

18          a.       The Court retains jurisdiction to amend this Order but only for the purpose of  
19 establishing or maintaining its acceptance to the relevant System or Plan, and to supervise the  
20 payment of retirement benefits as provided in the Order to Alternate Payee. Such amendment shall  
21 not require the System or Plan to provide any type or form of benefit, or any option not otherwise  
22 provided under the System or Plan.

23          b.       Each recipient of monies is solely responsible for the payment of federal and state  
24 income taxes with respect to monies received by him or her under this Order.

25          c.       Any ambiguity, uncertainty or inconsistency in this Order shall be interpreted so as to  
26 ensure payment of benefits to the Alternate Payee.

27          d.       Benefits awarded to the alternate payee will be paid to the alternate payee upon the  
28



1 member's election for a refund or retirement benefit. The System or Plan is unable to issue any  
2 benefit to the alternate payee prior to the member's election. If the member is currently receiving a  
3 monthly retirement benefit, the Order will be processed within 1 to 2 months following receipt of the  
4 acceptable, certified Order.

5  
6  
7 DATED this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

8  
9  
10 \_\_\_\_\_  
Judge of the Superior Court

11 [The following signatures are required if the Order is submitted by stipulation (agreement) of the  
12 parties:]

13 **Approved as to Form and Content:**

14 \_\_\_\_\_  
Participant

15 \_\_\_\_\_  
Alternate Payee

16  
17 [If either of the parties has an attorney and is submitting the Order by stipulation (agreement), the  
18 following signature(s) is/are required:]

19 **Approved as to Form:**

20 \_\_\_\_\_  
Attorney for Participant

21 \_\_\_\_\_  
Attorney for Alternate Payee