[Your Name]
[Your Address]
[Your Phone Number]
[Your Email]

[Date]

[Plan Administrator Name]
[Name of Retirement Plan]
[Plan Administrator Address]
[City, State, Zip Code]

RE: Formal Submission of Qualified Domestic Relations Order (QDRO)
Participant Name: [Participant Name]
Participant Social Security Number (Last 4 digits): [XXX-XX-XXXX]
Alternate Payee Name: [Alternate Payee Name]
Case Number: [Court Case Number]

To the Plan Administrator,

Enclosed please find a certified copy of a Qualified Domestic Relations Order (QDRO) recently entered by the [Name of Court] on [Date the Order was signed].

This Order relates to the division of benefits under the [Full Name of Retirement Plan] in accordance with the domestic relations laws of the State of [State].

Pursuant to this Order, please perform the following actions:

- Review the enclosed Order to ensure it meets the requirements for qualification under Section 414(p) of the Internal Revenue Code and Section 206(d) of ERISA.
- Notify both the Participant and the Alternate Payee (or their respective legal counsel) in writing regarding the status of the qualification.
- Establish a separate account for the Alternate Payee or initiate the distribution process as specified in the terms of the Order.
- Provide the Alternate Payee with any necessary tax forms, distribution election packets, or beneficiary designation forms.

If there are any administrative fees associated with the review or processing of this QDRO, please notify [Name of Party responsible for fees] at your earliest convenience. If the Order is found to be deficient in any way, please provide specific written instructions regarding the required amendments.

Thank you for your prompt attention to this matter.

Sincerely,

[Your Signature]

[Your Printed Name]

Enclosure: Certified Copy of QDRO