



# Division of Benefits Order Request for Estimate

Please print. • See next page for Acceptance Letter

## SECTION A - PERSONAL INFORMATION

<b>Social Security Number or Member ID</b>			<b>Date of Birth (MM/DD/YYYY)</b>						
<b>Name</b> (last/first/middle)									
<b>Mailing Address</b> (PO or street/city/state/zip)									
<b>Primary Phone</b>			<b>Alternate Phone</b>			<b>Alternate Phone</b>			
Cell	Home	Work	Cell	Home	Work	Cell	Home	Work	Work
<b>Email Address</b>									

## SECTION B - DISSOLUTION OF MARRIAGE

<b>Spouse/Ex-Spouse's Name</b> (last/first/middle)	
<b>Date of Marriage</b> (MM/DD/YYYY)	<b>Expected Date of Divorce</b> (MM/DD/YYYY)
<b>Case Number</b>	<b>County in Which Case Was Held</b>

## SECTION C - REQUESTING PARTY

<b>Name</b> (last/first/middle)				
<b>Mailing Address</b> (city/state/zip code)				
<b>Primary Phone</b>		Cell	Home	Work
<b>Relationship to Member</b>				
Self	Member's Attorney	Spouse/Ex-Spouse	Spouse/Ex-Spouse Attorney	

## SECTION D - APPLICANT SIGNATURE

I hereby request MOSERS provide a division of benefits estimate for the party listed above pursuant to Sections 104.312. and 104.1051, RSMo. I understand that if the person requesting the DBO estimate is not the member, a copy of the estimate and subsequent correspondence will also be mailed to the member.

<b>Signature</b>	<b>Date</b> (MM/DD/YYYY)
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All member documents and personal information is strictly confidential and will not be shared with others without authorization. Section 104.312 and 104.1051 of the Revised Statutes of Missouri (RSMo), permits the division of MOSERS retirement benefits in the event of a divorce. The *Division of Benefit Order Request for Estimate* form is required by MOSERS to release your benefit information to another party. This form must be signed, dated, and delivered to MOSERS. Steps for completing this form are outlined below.

- Complete Section A.
- Complete Section B.
- Provide information regarding spouse and date of marriage.
- Provide case number, county, and expected date of dissolution.
- Requesting party (applicant) is required to sign and date Section D.
- Return completed form to MOSERS.