Legal Division
233 Broadway – 25th Floor
New York, NY 10279
Telephone: 212-693-5752 or 5753
Fax: 212-693-2825

Request for Pension Valuation in a Matrimonial Action

Last Name: _____ **First Name:** _____

Active: ☐ **Retired:** ☐ **Retirement Type:** _____ **Rank:** _____ **Tax #:** _____

Command: _____ **Telephone # at Command:** _____ **Fax #:** _____

Mailing Address: _____

Apt. #: _____ **City:** _____ **State:** _____ **Zip:** _____

Asset Cutoff Date: _____ **Current Date:** _____

TYPICALLY THE DATE OF SEPARATION OR COMMENCEMENT OF THE ACTION FOR DIVORCE
DATE MUST BE ACCURATE AND ENTERED AS MONTH/DAY/YEAR
COPY OF SUMMONS FOR DIVORCE WITH PROOF OF FILING MUST ACCOMPANY THIS REQUEST

_____
Signature

ACKNOWLEDGEMENT MUST BE COMPLETED BY A NOTARY PUBLIC IF REQUEST IS BEING SUBMITTED VIA MAIL

State of _____,
ss:_____
County of _____,
On this _____ day of _____, 20___,
before me personally appeared_____
to me known and known to me to be the same person described in and who executed the foregoing instrument, and___he duly acknowledged to me that ___he executed the same.

_____
Notary Public, State of_____
(Please affix stamp)

****REQUEST WILL BE COMPLETED IN APPROXIMATELY SIX TO EIGHT WEEKS****