

Hawaii Domestic Relations Order (HiDRO) Request for Information

This form (Request) permits members, former members with vested status, and retirants (retiree) of the Employees' Retirement System of the State of Hawaii (ERS), and their spouse or ex-spouse (the Requestor), to request the information identified below belonging to a member, former member with vested status, or retirant, and relevant to a Hawaii Domestic Relations Orders (HiDRO). The information provided will be based on the member or retirant's employment and pension records available as of the date this Request. If this Request is submitted by a spouse or ex-spouse, a certified copy of the complaint for divorce or divorce decree must also be provided. This form may be submitted to the Employees' Retirement System, 201 Merchant Street, Suite 1400, Honolulu, HI 96813.

Information provided regarding members:

- Membership start date and termination date, if no longer employed in an ERS member position;
- Membership class(es) and periods of credited service;
- Accumulated contribution account balance (if applicable);
- Compensation history for periods of credited service;
- The most recent estimate of maximum retirement allowance, if any, without disclosure of the designated beneficiary;
- The most recent pending or filed application for retirement or refund of contributions; and
- All previous HiDRO model forms submitted for qualification or qualified.

Information provided regarding retirants:

- Retirement date(s);
- Membership class(es) and periods of credited service;
- Average Final Compensation;
- Retirement allowance payment option elected, without disclosure of the designated of beneficiary;
- Whether the Requestor has been designated as beneficiary;
- Current monthly pension (estimated or finalized);
- Refund received by the Retirant, if any (**refunds previously paid are not subject to a HiDRO**); and
- All previous HiDRO model forms submitted for qualification or qualified.

Requestor's Name:	
Requestor's Address:	
Requestor's E-Mail Address:	Requestor's Telephone:
If the Requestor is represented by an attorney, is a letter of representation signed by the Requestor attached? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Member/Retirant Name:	
Member/Retirant Date of Birth:	Member/Retirant Social Security Number:
Date of Marriage:	Date of Complaint for Divorce/Divorce Decree:
If the Requestor is not the Member/Retirant, is a certified copy of the Complaint for Divorce or Divorce Decree attached? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Signature:	Date: