

MI-LAPP Case Referral Form

► Checklist

- Benefit statements document
 Judgement of divorce document
 Documentation regarding plans to be divided

Date of intake

Attorney name

Emergency case

Non-emergency case

Client name

Client Social Security Number

Client date of birth

Client phone

Date of marriage

Date of divorce

Name of agency

Name of contact person

Phone

E-mail

Best time to contact

Summary of case

Court dates or other immediate deadlines

Summary plan description—ERISA

Date for division of benefits

Opposing party name

Opposing party Social Security Number

Opposing party date of birth

Name of opposing party employer

Address of employer

City

State

Zip

Phone

Name of plan(s)

Name of plan administrator

Address of plan

City

State

Zip

Phone

- Return** completed form by mail, e-mail or fax to the appropriate contacts provided below.

MI-LAPP

c/o State Bar of Michigan

Michael Franck Building

Attention: Justice Initiatives Division

306 Townsend Street

Lansing, MI 48933-2012

E-mail: dwynter@mail.michbar.org

Fax: 517-316-7204