



Thrift Savings Plan

REQUEST FOR PARTICIPANT ACCOUNT INFORMATION

TSP-92D

Certain Thrift Savings Plan (TSP) account information is available to current or former spouses to assist in developing a valid retirement benefits court order and protecting his or her rights. The participant's (or beneficiary participant's) current or former spouse, either party's attorney, or an authorized Retirement Benefits Specialist (RBS), may obtain TSP account balances and transaction history by submitting this form. A subpoena is not required.

This form should only be submitted to the TSP for the purposes of drafting a valid retirement benefits court order.

Please note: If it is determined that the requesting party is entitled to a participant's TSP account information, in accordance with the Privacy Act of 1974, as amended, 5 U.S.C. §552a, the TSP will not release information beyond what is specifically indicated on this form.

Mail or fax this form to: TSP Service Bureau
P.O. Box 385021
Birmingham, AL 35238
Fax number: (866) 817-5023

If you have questions about this form, call the toll-free ThriftLine at 877-968-3778. Outside the U.S. and Canada, please call 404-233-4400 (not toll free). For specific questions related to your individual situation, please consult your personal or legal representative.

I. INFORMATION ABOUT THE TSP PARTICIPANT

Please type or print:

1. _____
First Name Middle Name Last Name

2. This request applies to the participant's:

- Civilian Account } Account Number: _____
- Uniformed Services Account } _____
- Beneficiary Participant Account Account Number: _____

II. INFORMATION REQUESTED (Check all that apply)

- Account balance as of _____ mm/dd/yyyy
- Account balances from _____ mm/dd/yyyy to _____ mm/dd/yyyy
- Outstanding loan balances as of _____ mm/dd/yyyy
- Loan history from _____ mm/dd/yyyy to _____ mm/dd/yyyy
- Annual statement(s) as of _____ year(s)
- Quarterly statements from _____ mm/dd/yyyy to _____ mm/dd/yyyy
- Withdrawal history from _____ mm/dd/yyyy to _____ mm/dd/yyyy
- Other _____



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III. INFORMATION ABOUT YOU

3. What is your relationship to the participant?
- Current Spouse
 - Former Spouse _____
Divorce or Separation Date
 - Attorney
 - RBS (must submit a TSP-92B, *Retirement Benefits Specialist Authorization Form*)

4. _____
 First Name Middle Name Last Name

5. _____
 Address Line 1

City State Zip Code

6. _____
 Phone Number

IV. SIGNATURE

The requested TSP account information is provided in accordance with the Privacy Act of 1974, as amended, 5 U.S.C. §552a. By signing and submitting this request, I acknowledge that I am requesting this information for the purpose of drafting a retirement benefits court order pursuant to a divorce, separation, or annulment proceeding.

7. _____
 Signature

8. _____
 Date Signed (mm/dd/yyyy)