

## INVENTORY AND APPRAISEMENT

### Community Estate of the Parties

**1. Real Property** (include any property purchased by contract for deed, such as Texas Veterans Land Board property, property purchased in recreational developments, and time-shares)

1.1. Street address: \_\_\_\_\_

County of location: \_\_\_\_\_

Description of improvements, if any: \_\_\_\_\_

Legal description: \_\_\_\_\_

Current fair market value (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

Name of mortgage company and account number, if any: \_\_\_\_\_

Current balance of mortgage (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

Other liens against property: \_\_\_\_\_

Names of other lienholders: \_\_\_\_\_

Current net equity in property: \$ \_\_\_\_\_

1.2. Street address: \_\_\_\_\_

County of location: \_\_\_\_\_

Description of improvements, if any: \_\_\_\_\_

Legal description: \_\_\_\_\_

Current fair market value (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

Name of mortgage company and account number, if any: \_\_\_\_\_

\_\_\_\_\_  
Current balance of mortgage (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

Other liens against property: \_\_\_\_\_

Names of other lienholders: \_\_\_\_\_

Current net equity in property: \$ \_\_\_\_\_

1.3. Street address: \_\_\_\_\_

County of location: \_\_\_\_\_

Description of improvements, if any: \_\_\_\_\_

Legal description: \_\_\_\_\_

Current fair market value (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

Name of mortgage company and account number, if any: \_\_\_\_\_

Current balance of mortgage (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

Other liens against property: \_\_\_\_\_

Names of other lienholders: \_\_\_\_\_

Current net equity in property: \$ \_\_\_\_\_

2. **Mineral Interests** (include any property in which the parties own the mineral estate, separate and apart from the surface estate, such as oil and gas leases; also include royalty interests, working interests, and producing and nonproducing oil and gas wells)

2.1. Name of mineral interest/lease/well: \_\_\_\_\_

Type of interest: \_\_\_\_\_

County of location: \_\_\_\_\_

Legal description: \_\_\_\_\_

Name of producer/operator: \_\_\_\_\_

Current value (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

2.2. Name of mineral interest/lease/well: \_\_\_\_\_

Type of interest: \_\_\_\_\_

County of location: \_\_\_\_\_

Legal description: \_\_\_\_\_

Name of producer/operator: \_\_\_\_\_

Current value (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

2.3. Name of mineral interest/lease/well: \_\_\_\_\_

Type of interest: \_\_\_\_\_

County of location: \_\_\_\_\_

Legal description: \_\_\_\_\_

Name of producer/operator: \_\_\_\_\_

Current value (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

**3. Cash and Accounts with Financial Institutions** (include cash, traveler's checks, money orders, and accounts with commercial banks, savings banks, credit unions, and funds on deposit with attorneys and other third parties; exclude accounts with brokerage houses and all retirement accounts)

3.1. Cash on hand: \_\_\_\_\_

3.2. Traveler's checks: \_\_\_\_\_

3.3. Money orders: \_\_\_\_\_

3.4. Name of financial institution: \_\_\_\_\_

Account name: \_\_\_\_\_

Account number: \_\_\_\_\_

Type of account: (checking/savings/money market/certificate of deposit) \_\_\_\_\_

Name(s) on withdrawal cards: \_\_\_\_\_

Current account balance (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

3.5. Name of financial institution: \_\_\_\_\_

Account name: \_\_\_\_\_

Account number: \_\_\_\_\_

Type of account: (checking/savings/money market/certificate of deposit) \_\_\_\_\_

Name(s) on withdrawal cards: \_\_\_\_\_

Current account balance (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

3.6. Name of financial institution: \_\_\_\_\_

Account name: \_\_\_\_\_

Account number: \_\_\_\_\_

Type of account: (checking/savings/money market/certificate of deposit) \_\_\_\_\_

Name(s) on withdrawal cards: \_\_\_\_\_

Current account balance (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

3.7. Name of financial institution: \_\_\_\_\_

Account name: \_\_\_\_\_

Account number: \_\_\_\_\_

Type of account: (checking/savings/money market/certificate of deposit) \_\_\_\_\_

Name(s) on withdrawal cards: \_\_\_\_\_

Current account balance (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

#### **4. Brokerage and Mutual Fund Accounts**

4.1. Name of brokerage firm or mutual fund: \_\_\_\_\_

\_\_\_\_\_  
Address of brokerage firm or mutual fund: \_\_\_\_\_

\_\_\_\_\_  
Name account held in: \_\_\_\_\_

\_\_\_\_\_  
Name of account (and subaccounts if any): \_\_\_\_\_

\_\_\_\_\_  
Account number (and numbers of subaccounts if any): \_\_\_\_\_

\_\_\_\_\_  
Margin loan balance (as of \_\_\_\_\_): \_\_\_\_\_

\_\_\_\_\_  
Value of community interest in each account (and subaccounts if any) (as of \_\_\_\_\_): \_\_\_\_\_

\_\_\_\_\_  
Tax basis of each security held: \$ \_\_\_\_\_

4.2. \_\_\_\_\_  
Name of brokerage firm or mutual fund: \_\_\_\_\_

\_\_\_\_\_  
Address of brokerage firm or mutual fund: \_\_\_\_\_

\_\_\_\_\_  
Name account held in: \_\_\_\_\_

\_\_\_\_\_  
Name of account (and subaccounts if any): \_\_\_\_\_

\_\_\_\_\_  
Account number (and numbers of subaccounts if any): \_\_\_\_\_

\_\_\_\_\_  
Margin loan balance (as of \_\_\_\_\_): \_\_\_\_\_

\_\_\_\_\_  
Value of community interest in each account (and subaccounts if any) (as of \_\_\_\_\_): \_\_\_\_\_

\_\_\_\_\_  
Tax basis of each security held: \$ \_\_\_\_\_

4.3. Name of brokerage firm or mutual fund: \_\_\_\_\_

Address of brokerage firm or mutual fund: \_\_\_\_\_

Name account held in: \_\_\_\_\_

Name of account (and subaccounts if any): \_\_\_\_\_

Account number (and numbers of subaccounts if any): \_\_\_\_\_

Margin loan balance (as of \_\_\_\_\_): \_\_\_\_\_

Value of community interest in each account (and subaccounts if any) (as of \_\_\_\_): \_\_\_\_\_

Tax basis of each security held: \$ \_\_\_\_\_

**5. Publicly Traded Stocks, Bonds, and Other Securities** (include securities not in a brokerage account, mutual fund, or retirement fund)

5.1. Name of security: \_\_\_\_\_

Number of shares: \_\_\_\_\_

Type of security: [common stock/preferred stock/bond/other security]: \_\_\_\_\_

Certificate numbers: \_\_\_\_\_

In possession of: \_\_\_\_\_

Name of exchange on which listed: \_\_\_\_\_

Pledged as collateral? [Yes/No]

Date acquired: \_\_\_\_\_

Tax basis: \$ \_\_\_\_\_

Current market value (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

Value of community interest(as of \_\_\_\_\_):  
\$ \_\_\_\_\_

5.2. Name of security: \_\_\_\_\_

Number of shares: \_\_\_\_\_

Type of security: [common stock/preferred stock/bond/other security]: \_\_\_\_\_

Certificate numbers: \_\_\_\_\_

In possession of: \_\_\_\_\_

Name of exchange on which listed: \_\_\_\_\_

Pledged as collateral? [Yes/No]

Date acquired: \_\_\_\_\_

Tax basis:\$ \_\_\_\_\_

Current market value (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

Value of community interest(as of \_\_\_\_\_):  
\$ \_\_\_\_\_

**6. Stock Options** (include all exercisable, nonexercisable, vested and nonvested stock options regardless of any restrictions on transfer)

6.1. Name of company: \_\_\_\_\_

Date of option/grant: \_\_\_\_\_

Vesting schedule: \_\_\_\_\_

Number of options: \_\_\_\_\_

Are the options exercisable? [Yes/No]

Are the options registered? [Yes/No]

Current stock price: \$ \_\_\_\_\_

Strike price: \$ \_\_\_\_\_

If purchased, total purchase price of option contract (including commissions):

\$ \_\_\_\_\_

Current net market value (as of \_\_\_\_\_):

\$ \_\_\_\_\_

Value of community interest (as of \_\_\_\_\_):

\$ \_\_\_\_\_

6.2. Name of company: \_\_\_\_\_

Date of option/grant: \_\_\_\_\_

Vesting schedule: \_\_\_\_\_

Number of options: \_\_\_\_\_

Are the options exercisable? [Yes/No]

Are the options registered? [Yes/No]

Current stock price: \$ \_\_\_\_\_

Strike price: \$ \_\_\_\_\_

If purchased, total purchase price of option contract (including commissions):

\$ \_\_\_\_\_

Current net market value (as of \_\_\_\_\_):

\$ \_\_\_\_\_

Value of community interest (as of \_\_\_\_\_):

\$ \_\_\_\_\_

## 7. Bonuses

7.1. Name of company: \_\_\_\_\_

Spouse earning bonus: \_\_\_\_\_

Date bonus expected to be paid: \_\_\_\_\_

Time period covered by bonus: \_\_\_\_\_

Anticipated amount of bonus: \$ \_\_\_\_\_

7.2. Name of company: \_\_\_\_\_

Spouse earning bonus: \_\_\_\_\_

Date bonus expected to be paid: \_\_\_\_\_



Time period covered by bonus: \_\_\_\_\_

Anticipated amount of bonus: \$ \_\_\_\_\_

**8. Closely Held Business Interests** (include sole proprietorships, professional practices, corporations, partnerships, limited liability companies and partnerships, joint ventures, and other nonpublicly traded business entities)

8.1. Name of business: \_\_\_\_\_

Address: \_\_\_\_\_

Type of business organization: \_\_\_\_\_

Percentage of ownership: \_\_\_\_\_

Number of shares owned (if applicable): \_\_\_\_\_

Value (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

Balance of accounts receivable if on cash basis accounting: \$ \_\_\_\_\_

Balance of liabilities if on cash basis accounting:  
<\$ \_\_\_\_\_ >

**9. Retirement Benefits**

9.A. *Defined Contribution Plans* (a plan that provides for an individual account for a participant and for benefits based solely on the amount contributed to the participant's account; IRC §§ 401(k), 403(b))

9.A.1. Exact name of plan: \_\_\_\_\_

Name and address of plan administrator: \_\_\_\_\_

Employee: \_\_\_\_\_

Employer: \_\_\_\_\_

Starting date of creditable service: \_\_\_\_\_

Account name: \_\_\_\_\_

Account number: \_\_\_\_\_

Account balance as of date of marriage: \$ \_\_\_\_\_

Payee of survivor benefits: \_\_\_\_\_

Designated beneficiary: \_\_\_\_\_

Current account balance (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

Balance of loan against plan: \$ \_\_\_\_\_

Value of community interest in plan (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

9.A.2. Exact name of plan: \_\_\_\_\_

Name and address of plan administrator: \_\_\_\_\_

Employee: \_\_\_\_\_

Employer: \_\_\_\_\_

Starting date of creditable service: \_\_\_\_\_

Account name: \_\_\_\_\_

Account number: \_\_\_\_\_

Account balance as of date of marriage: \$ \_\_\_\_\_

Payee of survivor benefits: \_\_\_\_\_

Designated beneficiary: \_\_\_\_\_

Current account balance (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

Balance of loan against plan: \$ \_\_\_\_\_

Value of community interest in plan (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

9.B. *Defined Benefit Plan* (any plan that is not a defined contribution plan and that usually involves payment of benefits according to a formula)

9.B.1. Exact name of plan: \_\_\_\_\_

Name and address of plan administrator: \_\_\_\_\_

Employee: \_\_\_\_\_

Employer: \_\_\_\_\_

Starting date of creditable service: \_\_\_\_\_

Designated beneficiary: \_\_\_\_\_

Payee of survivor benefits: \_\_\_\_\_

Description of benefits: \_\_\_\_\_

Value of community interest in plan (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

9.B.2. Exact name of plan: \_\_\_\_\_

Name and address of plan administrator: \_\_\_\_\_

Employee: \_\_\_\_\_

Employer: \_\_\_\_\_

Starting date of creditable service: \_\_\_\_\_

Designated beneficiary: \_\_\_\_\_

Payee of survivor benefits: \_\_\_\_\_

Description of benefits: \_\_\_\_\_

Value of community interest in plan (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

9.C. *IRA/SEP*

9.C.1. Name of financial institution: \_\_\_\_\_

Account name: \_\_\_\_\_

Account number: \_\_\_\_\_

Payee of survivor benefits: \_\_\_\_\_

Designated beneficiary: \_\_\_\_\_

Current account balance (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

Value of community interest (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

9.C.2. Name of financial institution: \_\_\_\_\_

Account name: \_\_\_\_\_

Account number: \_\_\_\_\_

Payee of survivor benefits: \_\_\_\_\_

Designated beneficiary: \_\_\_\_\_

Current account balance (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

Value of community interest (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

9.D. *Military Benefits*

9.D.1. Branch of service: \_\_\_\_\_

Name of service member: \_\_\_\_\_

Rank/pay grade of service member: \_\_\_\_\_

Starting date of creditable service: \_\_\_\_\_

Status of service member: [active/reserve/retired]

Payee of survivor benefits: \_\_\_\_\_

Description of benefits: \_\_\_\_\_

Monthly benefit payable: \$ \_\_\_\_\_

Value of community interest in plan (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

Percentage of plan that is community: \_\_\_\_\_%

9.D.2. Branch of service: \_\_\_\_\_

Name of service member: \_\_\_\_\_

Rank/pay grade of service member: \_\_\_\_\_

Starting date of creditable service: \_\_\_\_\_

Status of service member: [active/reserve/retired]

Payee of survivor benefits: \_\_\_\_\_

Description of benefits: \_\_\_\_\_

Monthly benefit payable: \$ \_\_\_\_\_

Value of community interest in plan (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

Percentage of plan that is community: \_\_\_\_\_%

9.E. *Nonqualified Plans (Not under ERISA)*

9.E.1. Name of financial institution: \_\_\_\_\_

Account name: \_\_\_\_\_

Account number: \_\_\_\_\_

Account balance as of date of marriage: \$ \_\_\_\_\_

Payee of survivor benefits: \_\_\_\_\_

Designated beneficiary: \_\_\_\_\_

Value of community interest in plan (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

9.E.2. Name of financial institution: \_\_\_\_\_

Account name: \_\_\_\_\_

Account number: \_\_\_\_\_

Account balance as of date of marriage: \$ \_\_\_\_\_

Payee of survivor benefits: \_\_\_\_\_

Designated beneficiary: \_\_\_\_\_

Value of community interest in plan (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

9.F. *Government Benefits (civil service, teacher, railroad, state and local)*

9.F.1. Name of plan: \_\_\_\_\_

Account name: \_\_\_\_\_

Account number: \_\_\_\_\_

Account balance as of date of marriage: \$ \_\_\_\_\_

Payee of survivor benefits: \_\_\_\_\_

Designated beneficiary: \_\_\_\_\_

Value of community interest in plan (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

9.F.2. Name of plan: \_\_\_\_\_  
 Account name: \_\_\_\_\_  
 Account number: \_\_\_\_\_  
 Account balance as of date of marriage: \_\_\_\_\_  
 Payee of survivor benefits: \_\_\_\_\_  
 Designated beneficiary: \_\_\_\_\_  
 Value of community interest in plan (as of \_\_\_\_\_):  
 \$ \_\_\_\_\_

**10. Other Deferred Compensation Benefits** (e.g., worker's compensation, disability benefits, other "special payments", and other forms of compensation)

10.1. Husband

Description of Asset	Value
_____	_____
_____	_____

10.2. Wife

Description of Asset	Value
_____	_____
_____	_____

**11. Union Benefits** (include all insurance, pensions, retirement benefits, and other benefits arising out of membership in any union)

11.1. Name of union member: \_\_\_\_\_  
 Name of Union: \_\_\_\_\_  
 Description of benefits: \_\_\_\_\_  
 Value (as of \_\_\_\_\_):\$ \_\_\_\_\_

11.2. Name of union member: \_\_\_\_\_  
 Name of Union: \_\_\_\_\_  
 Description of benefits: \_\_\_\_\_  
 Value (as of \_\_\_\_\_):\$ \_\_\_\_\_

**12. Insurance and Annuities**

12.A. *Life Insurance*

12.A.1. Name of insurance company: \_\_\_\_\_  
Policy number: \_\_\_\_\_  
Name of insured: \_\_\_\_\_  
Name of owner: \_\_\_\_\_  
Type of insurance: [term/whole/universal]  
Amount of premiums [monthly/quarterly/semiannually]: \$\_  
Date of issue: \_\_\_\_\_  
Face amount: \_\_\_\_\_  
Cash surrender value on date of marriage: \_\_\_\_\_  
Current cash surrender value: \_\_\_\_\_  
Designated beneficiary: \_\_\_\_\_  
Balance of loan against policy: \$ \_\_\_\_\_  
Value of community interest (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

12.A.2. Name of insurance company: \_\_\_\_\_  
Policy number: \_\_\_\_\_  
Name of insured: \_\_\_\_\_  
Name of owner: \_\_\_\_\_  
Type of insurance: [term/whole/universal]  
Amount of premiums [monthly/quarterly/semiannually]: \$\_  
Date of issue: \_\_\_\_\_  
Face amount: \_\_\_\_\_  
Cash surrender value on date of marriage: \_\_\_\_\_  
Current cash surrender value: \$ \_\_\_\_\_

Designated beneficiary: \_\_\_\_\_

Balance of loan against policy: \$ \_\_\_\_\_

Value of community interest (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

*12.B. Annuities*

12.B.1. Name of company: \_\_\_\_\_

Policy number: \_\_\_\_\_

Name of annuitant: \_\_\_\_\_

Name of owner: \_\_\_\_\_

Type of annuity: \_\_\_\_\_

Amount of premiums [monthly/quarterly/semiannually]: \$ \_

Date of issue: \_\_\_\_\_

Face amount: \_\_\_\_\_

Designated beneficiary: \_\_\_\_\_

Value on date of marriage: \_\_\_\_\_

Current value (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

Balance of loan against policy: \$ \_\_\_\_\_

Value of community interest (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

12.B.2. Name of company: \_\_\_\_\_

Policy number: \_\_\_\_\_

Name of annuitant: \_\_\_\_\_

Name of owner: \_\_\_\_\_

Type of annuity: \_\_\_\_\_

Amount of premiums [monthly/quarterly/semiannually]: \$ \_

Date of issue: \_\_\_\_\_



Face amount: \_\_\_\_\_

Designated beneficiary: \_\_\_\_\_

Value on date of marriage: \_\_\_\_\_

Current value (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

Balance of loan against policy: \$ \_\_\_\_\_

Value of community interest (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

*12.C. Health Savings Accounts*

12.C.1. Institution holding account: \_\_\_\_\_

Account number: \_\_\_\_\_

Name of high-deductible health plan with which the HSA is  
coupled: \_\_\_\_\_

Value of assets in account (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

12.C.2. Institution holding account: \_\_\_\_\_

Account number: \_\_\_\_\_

Name of high-deductible health plan with which the HSA is  
coupled: \_\_\_\_\_

Value of assets in account (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

*12.D. Medical Savings Accounts*

12.D.1. Institution holding account: \_\_\_\_\_

Account number: \_\_\_\_\_

Name of high-deductible health plan with which the MSA is  
coupled: \_\_\_\_\_

Value of assets in account (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

12.D.2. Institution holding account: \_\_\_\_\_

Account number: \_\_\_\_\_

Name of high-deductible health plan with which the MSA is coupled: \_\_\_\_\_

Value of assets in account (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

**13. Motor Vehicles, Boats, Airplanes, Cycles, etc.** (including mobile homes, trailers, and recreational vehicles; exclude company-owned vehicles)

13.1. Year: \_\_\_\_\_

Make: \_\_\_\_\_

Model: \_\_\_\_\_

Name on certificate of title: \_\_\_\_\_

In possession of: \_\_\_\_\_

Vehicle identification number: \_\_\_\_\_

Fair market value of vehicle: \$ \_\_\_\_\_

Name of creditor if loan against vehicle: \_\_\_\_\_

Current balance (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

Current net equity in vehicle: \$ \_\_\_\_\_

13.2. Year: \_\_\_\_\_

Make: \_\_\_\_\_

Model: \_\_\_\_\_

Name on certificate of title: \_\_\_\_\_

In possession of: \_\_\_\_\_

Vehicle identification number: \_\_\_\_\_

Fair market value of vehicle: \$ \_\_\_\_\_

Name of creditor if loan against vehicle: \_\_\_\_\_

Current balance (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

Current net equity in vehicle: \$ \_\_\_\_\_

13.3. Year: \_\_\_\_\_  
Make: \_\_\_\_\_  
Model: \_\_\_\_\_  
Name on certificate of title: \_\_\_\_\_  
In possession of: \_\_\_\_\_  
Vehicle identification number: \_\_\_\_\_  
Fair market value of vehicle: \$ \_\_\_\_\_  
Name of creditor if loan against vehicle: \_\_\_\_\_  
Current balance (as of \_\_\_\_\_):  
\$ \_\_\_\_\_  
Current net equity in vehicle: \$ \_\_\_\_\_

13.4. Year: \_\_\_\_\_  
Make: \_\_\_\_\_  
Model: \_\_\_\_\_  
Name on certificate of title: \_\_\_\_\_  
In possession of: \_\_\_\_\_  
Vehicle identification number: \_\_\_\_\_  
Fair market value of vehicle: \$ \_\_\_\_\_  
Name of creditor if loan against vehicle: \_\_\_\_\_  
Current balance (as of \_\_\_\_\_):  
\$ \_\_\_\_\_  
Current net equity in vehicle: \$ \_\_\_\_\_

**14. Money Owed to Me or My Spouse** (include any expected federal or state income tax refund but do not include receivables connected with a business)

14.1. Name of debtor: \_\_\_\_\_  
Debtor's relationship to you: \_\_\_\_\_

Is debt evidenced in writing? [Yes/No]

Is debt secured? [Yes/No]

Current loan amount owed (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

14.2. Name of debtor: \_\_\_\_\_

Debtor's relationship to you: \_\_\_\_\_

Is debt evidenced in writing? [Yes/No]

Is debt secured? [Yes/No]

Current loan amount owed (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

**15. Household Furniture, Furnishings, and Fixtures**

15.1. In possession of husband (attach separate sheet by room if necessary):

Description of Asset	Value

15.2. In possession of wife (attach separate sheet by room if necessary):

Description of Asset	Value

**16. Electronics and Computers**

16.1. In possession of husband (attach separate sheet if necessary):

Description of Asset	Value

16.2. In possession of wife (attach separate sheet if necessary):

Description of Asset	Value

**17. Antiques, Artwork, and Collections** (include any works of art, such as paintings, tapestry, rugs, and coin or stamp collections)

17.1. In possession of husband (attach separate sheet if necessary):

Description of Asset	Value
_____	_____
_____	_____
_____	_____

17.2. In possession of wife (attach separate sheet if necessary):

Description of Asset	Value
_____	_____
_____	_____
_____	_____

**18. Miscellaneous Sporting Goods and Firearms**

18.1. In possession of husband (attach separate sheet if necessary):

Description of Asset	Value
_____	_____
_____	_____
_____	_____

18.2. In possession of wife (attach separate sheet if necessary):

Description of Asset	Value
_____	_____
_____	_____
_____	_____

**19. Jewelry and Other Personal Items**

19.1. In possession of husband (attach separate sheet if necessary):

Description of Asset	Value
_____	_____
_____	_____
_____	_____

19.2. In possession of wife (attach separate sheet if necessary):

Description of Asset	Value
_____	_____
_____	_____
_____	_____

**20. Livestock** (include cattle, horses, and so forth)

20.1. In possession of husband (attach separate sheet if necessary):

Description of Asset	Value
_____	_____
_____	_____
_____	_____

20.2. In possession of wife (attach separate sheet if necessary):

Description of Asset	Value
_____	_____
_____	_____
_____	_____

**21. Club Memberships**

21.1. Name of club: \_\_\_\_\_

Name membership held in: \_\_\_\_\_

Account number: \_\_\_\_\_

Current value (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

Method of valuation: \_\_\_\_\_

21.2. Name of club: \_\_\_\_\_

Name membership held in: \_\_\_\_\_

Account number: \_\_\_\_\_

Current value (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

Method of valuation: \_\_\_\_\_

**22. Travel Award Benefits (include frequent-flyer mileage accounts)**

22.1. Name of airline: \_\_\_\_\_

Account number and name on account: \_\_\_\_\_,

\_\_\_\_\_

Current number of miles (as of \_\_\_\_\_):  
\_\_\_\_\_

Current value (if any): \$ \_\_\_\_\_

22.2. Name of airline: \_\_\_\_\_

Account number and name on account: \_\_\_\_\_

Current number of miles (as of \_\_\_\_\_):

Value (if any): \$ \_\_\_\_\_

**23. Miscellaneous Assets** (include intellectual property, licenses, crops, farm equipment, construction equipment, tools, leases, cemetery lots, gold or silver coins not part of a collection described elsewhere in this inventory, estimated tax payments, tax overpayments, loss carry-forward deductions, lottery tickets/winnings, stadium bonds, stadium seat licenses, seat options, and season tickets)

23.1. In possession of husband (attach separate sheet if necessary):

Description of Asset	Value
_____	_____
_____	_____
_____	_____

23.2. In possession of wife (attach separate sheet if necessary):

Description of Asset	Value
_____	_____
_____	_____
_____	_____

**24. Safe-Deposit Boxes**

24.1. Name of financial institution or other depository:

\_\_\_\_\_

Box number: \_\_\_\_\_

Names of persons with access to contents: \_\_\_\_\_

\_\_\_\_\_

Items in safe-deposit box: \_\_\_\_\_

\_\_\_\_\_

24.2. Name of financial institution or other depository:

\_\_\_\_\_

Box number: \_\_\_\_\_

Names of persons with access to contents: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Items in safe-deposit box: \_\_\_\_\_  
\_\_\_\_\_

24.3. Name of financial institution or other depository:

\_\_\_\_\_  
Box number: \_\_\_\_\_  
Names of persons with access to contents: \_\_\_\_\_  
\_\_\_\_\_  
Items in safe-deposit box: \_\_\_\_\_  
\_\_\_\_\_

**25. Storage Facilities**

25.1. Name and location: \_\_\_\_\_  
\_\_\_\_\_

Unit number: \_\_\_\_\_  
Terms and length of lease: \_\_\_\_\_  
\_\_\_\_\_  
Names of persons with access to contents: \_\_\_\_\_  
\_\_\_\_\_  
Items in storage unit: \_\_\_\_\_  
\_\_\_\_\_

25.2. Name and location: \_\_\_\_\_  
\_\_\_\_\_

Unit number: \_\_\_\_\_  
Terms and length of lease: \_\_\_\_\_  
\_\_\_\_\_  
Names of persons with access to contents: \_\_\_\_\_  
\_\_\_\_\_  
Items in storage unit: \_\_\_\_\_  
\_\_\_\_\_

25.3. Name and location: \_\_\_\_\_  
\_\_\_\_\_

Unit number: \_\_\_\_\_



Terms and length of lease: \_\_\_\_\_  
\_\_\_\_\_

Names of persons with access to contents: \_\_\_\_\_  
\_\_\_\_\_

Items in storage unit: \_\_\_\_\_  
\_\_\_\_\_

**26. Community Claim for Reimbursement**

26.1. Reimbursement claim against husband's separate estate:

Basis of claim: \_\_\_\_\_

Amount claimed (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

26.2. Reimbursement claim against wife's separate estate:

Basis of claim: \_\_\_\_\_

Amount claimed (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

**27. Contingent Assets (e.g., lawsuits by either party against third party)**

27.1. Nature of claim: \_\_\_\_\_

Amount of claim: \$ \_\_\_\_\_

27.2. Nature of claim: \_\_\_\_\_

Amount of claim: \$ \_\_\_\_\_

**28. Community Liabilities**

28.A. *Credit Cards and Charge Accounts*

28.A.1. Name of creditor: \_\_\_\_\_

Account number: \_\_\_\_\_

Name(s) on account: \_\_\_\_\_

Current balance (as of \_\_\_\_\_):  
<\$ \_\_\_\_\_>

Balance as of \_\_\_\_\_ [date of separation]:  
<\$ \_\_\_\_\_>

- 28.A.2. Name of creditor: \_\_\_\_\_  
Account number: \_\_\_\_\_  
Name(s) on account: \_\_\_\_\_  
Current balance (as of \_\_\_\_\_):  
<\$ \_\_\_\_\_>  
Balance as of \_\_\_\_\_ [date of separation]:  
<\$ \_\_\_\_\_>
- 28.A.3. Name of creditor: \_\_\_\_\_  
Account number: \_\_\_\_\_  
Name(s) on account: \_\_\_\_\_  
Current balance (as of \_\_\_\_\_):  
<\$ \_\_\_\_\_>  
Balance as of \_\_\_\_\_ [date of separation]:  
<\$ \_\_\_\_\_>
- 28.A.4. Name of creditor: \_\_\_\_\_  
Account number: \_\_\_\_\_  
Name(s) on account: \_\_\_\_\_  
Current balance (as of \_\_\_\_\_):  
<\$ \_\_\_\_\_>  
Balance as of \_\_\_\_\_ [date of separation]:  
<\$ \_\_\_\_\_>
- 28.A.5. Name of creditor: \_\_\_\_\_  
Account number: \_\_\_\_\_  
Name(s) on account: \_\_\_\_\_  
Current balance (as of \_\_\_\_\_):  
<\$ \_\_\_\_\_>  
Balance as of \_\_\_\_\_ [date of separation]:  
<\$ \_\_\_\_\_>

28.B. *Federal, State, and Local Tax Liability*

28.B.1. Amount owed in any previous tax year:  
<\$ \_\_\_\_\_>  
[describe liability, e.g., federal income tax/property taxes]

Amount owed for current year \_\_\_\_\_:  
<\$ \_\_\_\_\_>

28.B.2. Amount owed in any previous tax year:  
<\$ \_\_\_\_\_>  
[describe liability, e.g., federal income tax/property taxes]

Amount owed for current year \_\_\_\_\_:  
<\$ \_\_\_\_\_>

28.C. *Attorney's Fees in This Case*

28.C.1. Husband (as of \_\_\_\_\_):  
<\$ \_\_\_\_\_>

28.C.2. Wife (as of \_\_\_\_\_):  
<\$ \_\_\_\_\_>

28.D. *Other Professional Fees in This Case*

28.D.1. Husband (as of \_\_\_\_\_):  
<\$ \_\_\_\_\_>

28.D.2. Wife (as of \_\_\_\_\_):  
<\$ \_\_\_\_\_>

28.E. *Other Liabilities Not Otherwise Listed in This Inventory* (e.g., loans, margin accounts, if not previously disclosed)

28.E.1. Name of creditor: \_\_\_\_\_

Account number: \_\_\_\_\_

Party incurring liability: \_\_\_\_\_

Is loan evidenced in writing? [Yes/No]

Current balance (as of \_\_\_\_\_):  
<\$ \_\_\_\_\_>

Security, if any: \_\_\_\_\_

28.E.2. Name of creditor: \_\_\_\_\_

Account number: \_\_\_\_\_

Party incurring liability: \_\_\_\_\_

Is loan evidenced in writing? [Yes/No]

Current balance (as of \_\_\_\_\_):  
<\$ \_\_\_\_\_>

Security, if any: \_\_\_\_\_

28.E.3. Name of creditor: \_\_\_\_\_

Account number: \_\_\_\_\_

Party incurring liability: \_\_\_\_\_

Is loan evidenced in writing? [Yes/No]

Current balance (as of \_\_\_\_\_):  
<\$ \_\_\_\_\_>

Security, if any: \_\_\_\_\_

28.F. *Reimbursement Claims against Community Estate*

28.F.1. Reimbursement claim by husband's separate estate:

Basis of claim: \_\_\_\_\_

Amount claimed (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

28.F.2. Reimbursement claim by wife's separate estate:

Basis of Claim: \_\_\_\_\_

Amount claimed (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

28.G. *Pledges (include charitable, church and school related)*

28.G.1. Name and address of recipient: \_\_\_\_\_  
\_\_\_\_\_

Date of pledge: \_\_\_\_\_

Total amount of pledge: < \_\_\_\_\_ >

Is pledge payable in installments? [Yes/No]

Date each installment payment is due: \_\_\_\_\_

Amount of each installment: \_\_\_\_\_

28.H. *Contingent Liabilities* (e.g., lawsuit against either party, guaranty either party may have signed)

28.H.1. Name of creditor: \_\_\_\_\_  
Name of person primarily liable: \_\_\_\_\_  
Amount of contingent liability: <\$ \_\_\_\_\_ >  
Nature of contingency: \_\_\_\_\_

28.H.2. Name of creditor: \_\_\_\_\_  
Name of person primarily liable: \_\_\_\_\_  
Amount of contingent liability: <\$ \_\_\_\_\_ >  
Nature of contingency: \_\_\_\_\_

### Separate Estates of the Parties

29. **Separate Assets of Husband** (generally defined as assets owned before marriage or assets acquired during marriage by gift or inheritance or as a result of personal injury)

29.1. Description of asset: \_\_\_\_\_  
Date property acquired: \_\_\_\_\_  
How acquired (e.g., by gift, by devise, by descent, or owned before marriage): \_\_\_\_\_  
Value (as of \_\_\_\_\_): \$ \_\_\_\_\_

29.2. Husband's separate reimbursement claim against community estate:  
Basis of claim: \_\_\_\_\_  
Amount claimed (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

29.3. Husband's separate reimbursement claim against wife's separate estate:  
Basis of claim: \_\_\_\_\_  
Value (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

30. **Liabilities of Husband's Separate Estate**

30.1. Description of liability: \_\_\_\_\_  
Date of liability: \_\_\_\_\_  
How liability acquired: \_\_\_\_\_  
Amount of liability (as of \_\_\_\_\_):  
<\$ \_\_\_\_\_ >

30.2. Wife's separate reimbursement claim against husband's separate estate:  
Basis of claim: \_\_\_\_\_  
Value (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

30.3. Community estate's reimbursement claim against husband's separate estate:  
Basis of claim: \_\_\_\_\_  
Value (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

**31. Separate Assets of Wife** (generally defined as assets owned before marriage or assets acquired during marriage by gift or inheritance or as a result of personal injury)

31.1. Description of asset: \_\_\_\_\_  
Date property acquired: \_\_\_\_\_  
How acquired (e.g., by gift, by devise, by descent, or owned before marriage):  
\_\_\_\_\_  
Value (as of \_\_\_\_\_): \$ \_\_\_\_\_

31.2. Wife's separate reimbursement claim against community estate:  
Basis of claim: \_\_\_\_\_  
Value (as of \_\_\_\_\_): \$ \_\_\_\_\_

31.3. Wife's separate reimbursement claim against husband's separate estate:  
Basis of claim: \_\_\_\_\_  
Value (as of \_\_\_\_\_): \$ \_\_\_\_\_

**32. Liabilities of Wife's Separate Estate**

32.1. Description of liability: \_\_\_\_\_

Date of liability: \_\_\_\_\_

How liability acquired: \_\_\_\_\_

Amount of liability (as of \_\_\_\_\_):  
<\$ \_\_\_\_\_ >

32.2. Husband's separate property reimbursement claim against wife's separate estate:

Basis of Claim: \_\_\_\_\_

Amount claimed (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

32.3. Community estate's reimbursement claim against wife's separate estate:

Basis of Claim: \_\_\_\_\_

Amount claimed (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

### Child's Property

33. **Child's Property** (e.g., custodial accounts under the Texas Uniform Gifts to Minors Act or Uniform Transfers to Minors Act, 529 plans)

A. *Custodial Account under Texas Uniform Transfers to Minors Act*

33.A.1. Name of financial institution: \_\_\_\_\_

Address of financial institution: \_\_\_\_\_

Name of account: \_\_\_\_\_

Account number: \_\_\_\_\_

Amount on deposit (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

Name of minor for whom funds were deposited: \_\_\_\_\_

33.A.2. Name of financial institution: \_\_\_\_\_

Address of financial institution: \_\_\_\_\_

Name of account: \_\_\_\_\_

Account number: \_\_\_\_\_

Amount on deposit (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

Name of minor for whom funds were deposited: \_\_\_\_\_

33.A.3. Name of financial institution: \_\_\_\_\_

Address of financial institution: \_\_\_\_\_

Name of account: \_\_\_\_\_

Account number: \_\_\_\_\_

Amount on deposit (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

Name of minor for whom funds were deposited: \_\_\_\_\_

33.A.4. Name of financial institution: \_\_\_\_\_

Address of financial institution: \_\_\_\_\_

Name of account: \_\_\_\_\_

Account number: \_\_\_\_\_

Amount on deposit (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

Name of minor for whom funds were deposited: \_\_\_\_\_

B. *529 Plan*

33.B.1. Institution or entity administering plan: \_\_\_\_\_

Designated beneficiary: \_\_\_\_\_

Type of plan: \_\_\_\_\_

Value of assets in plan (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

33.B.2. Institution or entity administering plan: \_\_\_\_\_

Designated beneficiary: \_\_\_\_\_

Type of plan: \_\_\_\_\_

Value of assets in plan (as of \_\_\_\_\_):  
\$ \_\_\_\_\_



33.B.3. Institution or entity administering plan: \_\_\_\_\_  
Designated beneficiary: \_\_\_\_\_  
Type of plan: \_\_\_\_\_  
Value of assets in plan (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

33.B.4. Institution or entity administering plan: \_\_\_\_\_  
Designated beneficiary: \_\_\_\_\_  
Type of plan: \_\_\_\_\_  
Value of assets in plan (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

**Trust and Estate Assets**

**34. Assets Held by Either Party for the Benefit of Another** (include formal and informal trusts)

34.1. Name(s) of person(s) holding assets: \_\_\_\_\_  
Description of assets: \_\_\_\_\_  
Name and title of fiduciary (e.g., executor, trustee): \_\_\_\_\_  
Name of owner of beneficial interest: \_\_\_\_\_  
Value of assets (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

34.2. Name(s) of person(s) holding assets: \_\_\_\_\_  
Description of assets: \_\_\_\_\_  
Name and title of fiduciary (e.g., executor, trustee): \_\_\_\_\_  
Name of owner of beneficial interest: \_\_\_\_\_  
Value of assets (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

**35. Assets Held for the Benefit of Either Party as a Beneficiary** (include formal and informal

trusts)

35.1. Name(s) of person(s) holding assets:

Description of assets: \_\_\_\_\_

Name and title of fiduciary (e.g., executor, trustee):  
\_\_\_\_\_

Name of owner of beneficial interest: \_\_\_\_\_

Value of assets (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

35.2. Name(s) of person(s) holding assets:

Description of assets: \_\_\_\_\_

Name and title of fiduciary (e.g., executor, trustee):  
\_\_\_\_\_

Name of owner of beneficial interest: \_\_\_\_\_

Value of assets (as of \_\_\_\_\_):  
\$ \_\_\_\_\_