LAW OFFICES OF BREWER JACKSON & LANG, P.C.

INVENTORY AND APPRAISEMENT WORKSHEET

Client's Name: Date:

Accurate information concerning property and debts is very important in divorce cases. Please fill out the below "Inventory and Appraisement Worksheet" as completely as you can, drawing on any source of information to which you have access. Do not enlist your spouse's help unless I specifically permit it. DO NOT LET ANYONE SEE THIS DOCUMENT. THIS PREPARATION OF YOUR INVENTORY AND APPRAISEMENT IS A CONFIDENTIAL MATTER BETWEEN YOU AND YOUR ATTORNEY. Be cautious: You and your spouse are now legal adversaries, and you should verify all information on your own. When it comes to questions of the current value of property, you should make your own independent estimate, whether you decide the value or consult another source (for example, NADA, Kelly Blue Book, tax appraisal district, or an appraiser). Please list all property whether the property is in your possession or name or in your spouse's possession or name. This inventory and appraisement should include all property, even if you have no specifics on the property.

The attached form provides for only a few items under each type of property. If you need to provide additional information, insert additional items, photocopy an extra page, or use a separate piece of paper and number the information as it is numbered on the inventory. If you do not know the answer to an item, do not leave it blank; write "I don't know," and follow this statement with the reason you do not know.

Understand that this inventory and appraisement is your attorney's main key to your estate, from which all spreadsheets will be generated. This document, once filed with the court, creates a judicial admission about its contents. This document is extremely important and will be used throughout your case.

This task will not be easy. Do not expect to complete the form at one sitting. Be assured, however, that your effort is necessary and worthwhile, because the inventory will be one of the most important documents in your divorce.

Definitions

<u>Separate Property</u> - If either you or your spouse has any property you think is separate property, complete the section marked "Separate Estates of the Parties." Separate property is defined as follows:

- 1. Property acquired by a spouse before marriage.
- 2. Property acquired by a spouse during marriage by gift or inheritance.
- 3. Funds received as a result of personal injury sustained by a spouse, except any recovery for loss of earning capacity during marriage.
- 4. Property acquired with funds that are separate property. Property may be purchased with funds that are both community and separate property. In such a case, please be sure to list pro rata the part of the property that is separate property in the separate property section and the part that is community property in the community property section.
- 5. Property set aside to the spouse by an agreement between the spouses.

Community Property - All property that is not separate property is community property.

<u>Fair Market Value</u> - A generally accepted definition of fair market value is the price at which the asset would change hands between a willing seller, under no compulsion to sell, and a willing buyer, under no compulsion to buy, with both parties having reasonable knowledge of the relevant facts. Use this value whenever possible. If an asset has no fair market value, state the actual value of the asset to you considering its present condition.

Reimbursement

Before completing any items involving reimbursement claims, please read this section.

Texas law recognizes three marital estates: the community estate, owned by both spouses together; the husband's separate estate; and the wife's estate. A spouse's separate estate consists of the spouse's separate property, as defined above. The community estate consists of all other property, other than separate property, acquired by either spouse during marriage.

If any of the following has happened in your case, please circle the appropriate numbers and consult with your attorney on how to proceed, what information and documents you will need, and how to complete the items on this schedule that correspond to the numbers:

25.1, 25.2, 29.3, 31.3 Has the community estate made any payments on the unsecured liability of your separate estate or your spouse's separate estate?

25.1, 25.2, 29.3, 31.3 Has the community estate made any payments on the secured liabilities on your separate estate or your spouse's separate estate?

25.1, **25.2**, **29.3**, **31.3** Has the community estate been used to make capital improvements to your separate estate or to your spouse's separate estate other than by incurring debt?

25.1, 25.2, 29.3, 31.3 Has either spouse received inadequate compensation for the time, toil, talent, and effort spent working for separate-property business owned by the spouse that is under the spouse's control or direction?

27.6, 28.2, 30.2 Has your separate estate or your spouse's separate estate made any payments on the unsecured liabilities of the community estate?

27.6, **28.2**, **30.2** Has your separate estate or your spouse's separate estate made any payments on the secured liabilities of the community estate?

27.6, 28.2, 30.2 Has your separate estate or your spouse's separate estate been used to make

capital improvements to the community estate other than by incurring debt?

28.3, 31.2 Has the husband's separate estate made any payments on the unsecured liabilities of the wife's separate estate?

28.3, 31.2 Has the husband's separate estate made any payments on the secured liabilities of the wife's separate estate?

28.3, 31.2 Has the husband's separate estate been used to make capital improvements to the wife's separate estate other than by incurring debt?

29.2, 30.3 Has the wife's separate estate made any payments on the unsecured liabilities of the husband's separate estate?

29.2, 30.3 Has the wife's separate estate made any payments on the secured liabilities of the husband's separate estate?

29.2, 30.3 Has the wife's separate estate been used to make capital improvements to the husband's separate estate other than by incurring debt?

Copies of Documents to Be Returned

If an asset has a statement of account, return a copy of the current statement of account with this Preparation of Inventory and Appraisement. If an asset has a title document (deed, deed of trust, title to motor vehicle), return a copy with this Preparation of Inventory and Appraisement. If an asset has any document that can clearly identify it, return a copy with this Preparation of Inventory and Appraisement.

Here is a checklist of some of the copies of items you should return with this Preparation of Inventory and Appraisement:

- 1. financial institution statements:
- 2. bank statements:

- 3. annuity statements;
- 4. IRA statements;
- 5. SEP statements;
- 6. certificate of deposit statements;
- 7. retirement benefits statements of account;
- 8. life insurance policies and premium notices;
- 9. broker statements;
- 10. deeds;
- 11. deeds of trust;
- 12. mortgage company payment coupon books (usually one page is enough);
- 13. title to motor vehicles;
- 14. stocks;
- 15. last statement from each creditor, including credit card statements;
- 16. appraisals;
- 17. any other documents that may lead to the discovery of assets or liabilities.

PLEASE ATTACH SUPPORTING DOCUMENTS FOR EACH ITEM LISTED IN THE INVENTORY AND LABEL EACH DOCUMENT (BY USING A SEPARATE FILE OR STICKY NOTE) WITH THE CORRESPONDING NUMBER IN THE INVENTORY AND APPRAISEMENT. PLEASE PERFORM THIS TASK EVEN IF YOU HAVE OTHERWISE GIVEN US THE DOCUMENTS. IF YOU NEED ACCESS TO A DOCUMENT FOR THIS PURPOSE, PLEASE COME TO OUR OFFICE AND USE ONE OF THE CONFERENCE ROOMS TO COMPLETE THIS ASSIGNMENT. IT IS VERY IMPORTANT WE HAVE BACKUP DOCUMENTATION FOR EACH ASSET AND DEBT. PLEASE PROVIDE AT

LEAST A FULL YEAR'S WORTH OF STATEMENTS FOR EACH CLASS OF DOCUMENTS REQUESTED.

WARNING-- Please do not write on the original documents themselves. Use sticky notes, please.

Full Disclosure

Finally, I will rely on this Preparation of Inventory and Appraisement in the case. If you omit any asset, the court could set it aside to your spouse now or at a later date. If you omit a liability, you may be solely responsible for it. By your signature below, you verify to me that these are all the assets and liabilities of community and separate property of which you have knowledge.

NOTICE OF CONFIDENTIALITY

THE INFORMATION IN THIS DOCUMENT IS SUBJECT TO THE ATTORNEY-CLIENT PRIVILEGE, AS PROVIDED IN THE TEXAS RULES OF EVIDENCE.

THE CONTENTS OF THIS DOCUMENT CONSTITUTE ATTORNEY WORK PRODUCT, ARE CONFIDENTIAL, AND ARE NOT TO BE DISCLOSED TO THIRD PERSONS OTHER THAN THOSE TO WHOM DISCLOSURE IS MADE IN FURTHERANCE OF THE RENDITION OF PROFESSIONAL LEGAL SERVICES.

1. Real Estate

1.1	Home Owned:
	Street address:
	County of location:
	General description:
	Legal description:

Current fair market value: \$ as of		
Exact name of mortgage company and account	nt number, if any:	
Current balance of mortgages: \$		
a. First mortgage		
Name of lienholder and account numb	per:	
Current balance of lien: \$	as of	
Monthly payment: \$ Due da	ate: Interest rate:	
b. Second lien		
Name of second lienholder and account	nt number:	
Current balance of second lien: \$	as of	
Monthly payment: \$ Due da	te: Interest rate:	
Current net equity in property: \$		
Date property was acquired:		
Amount of purchase price: \$		
Down payment and source of down payment:	\$	
Exact name on title:		
Who lives in the house now?		
Who wishes to live in the house after the divorce?		
Comments:		
Other Real Estate:		
General description:		

Location:
Description of improvements, if any:
Date improvements made:
Cost of improvements: \$
Balance owed, if any, on cost of improvements: \$
Source of money for improvements:
Legal description:
Other owners:
Date acquired: Total Cost: \$
Amount of purchase price: \$
Record title owner: \$
Down payment and source of down payment: \$
First lienholder:
Address:
Monthly payment: \$ Due date: Interest rate:
Balance due: \$ as of:
Second lienholder:
Address:
Monthly payment: \$ Due date: Interest rate:
Balance due: \$ as of:

2. Mineral Interests

	a.	Name of mineral interest/lease/well:
		Type of interest:
		County of location:
		Legal description:
		Name of producer or operator:
		Current value: \$
	b.	Name of mineral interest/lease/well:
		Type of interest:
		County of location:
		Legal description:
		Name of producer or operator:
		Current value: \$
		3. Cash and Accounts with Financial Institutions
(Inclu	de cash,	traveler's checks, money orders, and accounts with commercial banks, savings and
loan a	ssociatio	ons, and credit unions; exclude accounts with brokerage houses and all retirement
accour	nts.)	
3.1	Check	ing Accounts:
	a.	Name of financial institution:
		Address:
		Account officer:
		Account number:
		Account name:

	Type of account:
	Name(s) on withdrawal cards:
	Current balance: \$ as of
	When account opened:
	Source of funds:
	Use of account:
b.	Name of financial institution:
	Address:
	Account officer:
	Account number:
	Account name:
	Type of account:
	Name(s) on withdrawal cards:
	Current balance: \$ as of
	When account opened:
	Source of funds:
	Use of account:
c.	Name of financial institution:
	Address:
	Account officer:
	Account number:
	Account name:
	Type of account:

		Name(s) on withdrawal cards:
		Current balance: \$ as of
		When account opened:
		Source of funds:
		Use of account:
3.2	Savir	ngs Accounts:
	a.	Name of financial institution:
		Address:
		Account officer:
		Account number:
		Account name:
		Type of account:
		Name(s) on withdrawal cards:
		Current balance: \$ as of
		When account opened:
		Source of funds:
		Use of account:
		Pledged: To:
		Reason:
	b.	Name of financial institution:
	0.	
		Address:
		Account officer:
		Account number:

		Account name:	
		Type of account:	
		Name(s) on withdrawal cards:	
		Current balance: \$ as	
		When account opened:	
		Source of funds:	
Attorn	ney/Clie	ent-Privileged Information	
	•	Use of account:	
		Pledged: To:	
		Reason:	
3.3	Certif	ficates of Deposit:	
	a.	Name of financial institution:	
		Address:	
		Account officer:	
		Phone:	
		C.D. in the name of:	
		Amount of C.D.: \$	Interest rate:
		When purchased:	
		Where is C.D. now?	
		Source of funds:	
		Pledged: To:	
		_	
	b.	Name of financial institution:	
	υ.	Traine of Imaneial Institution.	

	Address:	
	Account officer:	
	Phone:	
	C.D. in the name of:	
	Amount of C.D.: \$	Interest rate:
	When purchased:	When due:
	Where is C.D. now?	
	Source of funds:	
	Pledged: To:	
	Reason:	
	4. Brokerage and Mutual Fund Accou	nts
a.	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	y):
	Margin loan balance: \$	as of
	Value of community interest in each account (and su	baccounts, if any):
	\$ as of	
	Tax basis of each security held: \$	
b.	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
	(In	clude securities not in a brokerage account, mutual fund, or retirement fund.)
5.1	Stoc	ks:
	a.	Name of security:
		Number of shares:
		Type of security (common stock, preferred stock, bond, or other description):
		Certificate numbers:
		In possession of:
		Name of exchange on which listed:
		Pledged as collateral? yes no
		If yes, explain terms, to whom pledged, and other details surrounding pledge of
		securities as collateral:
		Date acquired:
		Tax basis: \$

	Current market value: \$	as of
	Value of community interest \$	as of
5.2 Bonds	s:	
a.	Name of issuer:	
	Address:	
	Serial number of bond:	Denomination:
	Date acquired:	
	Cost: \$ Value: \$	as of
	Value of community interest: \$	as of
	Registered owner:	
	Source of funds:	
	Interest rate:	
	Convertible:	Due date:
	Pledged: To:	
	Reason:	
	6. Stock Options	
(Include all e	exercisable, vested, and nonvested stock options	regardless of any restrictions on
transfer.)		
a.	Name of company:	
	Date of option or grant:	
	Vesting schedule:	
	Number of options:	

	Are the options exercisable?Are the option	ons registered?
	Current stock price: \$ a	s of
	Strike price: \$	
	Current net market value: \$ a	as of
	Value of community interest: \$	as of
	If purchased, total purchase price of option contract (in	cluding commissions):
	\$	
b.	Name of company:	
	Date of option or grant:	
	Vesting schedule:	
	Number of options:	
	Are the options exercisable? Are the opti	ons registered?
	Current stock price: \$ a	s of
	Strike price: \$	
	Current net market value: \$ as	s of
	Value of community interest: \$	as of
	If purchased, total purchase price of option contract (inc	cluding commissions):
	\$	
	7. Bonuses	
a.	Name of company:	
	Spouse earning bonus:	
	Date bonus expected to be paid:	

	Anticipated amount of bonus: \$
b.	Name of company:
0.	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 an	d partnerships, joint ventures, and other nonpublicly traded business entities.)
a.	Name of business:
	Address of business:
	Type of business organization:
	Percentage of ownership:
	Number of shares owned (if applicable):
	Members in business:
	Annual income from business: \$
	Type of business:
	Date business began:
	Source of funds in business:
	Value of interest: \$ as of
	Is there a written organizational agreement?
	Comments:

9. Retirement Benefits

9.1	Defin	ed Contribution Retirement Plans (a plan that provides for an individual account
for a	particip	pant and for benefits based solely on the amount contributed to the participant's
accou	ınt):	
	a.	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:
		Has beneficiary been designated? yes no
		If so, identify beneficiary:
		Current balance: \$ as of
		Value of community interest in plan: \$ as of
		Current loan balance: \$ as of
9.2	Defin	ed Benefit Retirement Plans (any plan that is not a defined contribution plan and
that u	sually i	nvolves payment of benefits according to a formula):
	a.	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:	
		Current balance: \$ as	
		Value of community interest in plan: \$	as of
9.3	IRA/S	•	
	a.	Name of financial institution:	
		Account name:	
		Account number:	
		Payee of survivor benefits:	
		Designated beneficiary:	
		Current balance: \$ as	
		Value of community interest in plan: \$	
	b.	Name of financial institution:	
		Account name:	
		Account number:	
		Payee of survivor benefits:	
		Designated beneficiary:	
		Current balance: \$ as	
		Value of community interest in plan: \$	
0.4	N/1:1:4.	awy Donofita.	

9.4 Military Benefits:

	a.	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: %
9.5	Nonqu	nalified Plans (Not under ERISA):
	a.	Name of financial institution:
		Account name:
		Account number:
		Account balance as of date of marriage: \$
		Payee of survivor benefits:
		Has beneficiary been designated? yes no
		If so, identify beneficiary:
		Value of community interest in plan: \$ as of
9.6	Gover	rnment Benefits (civil service, teacher, railroad, state, and local):
	a.	Name of plan:
		Account name:
		Account number:

		Account balance as of date of marriage: \$
		Has beneficiary been designated? yesno
		If so, identify beneficiary:
		Value of community interest in plan: \$ as of
		10. Other Deferred Compensation Benefits
(Exan	nples inc	clude worker's compensation, disability benefits, other "special payments", and other
forms	of comp	pensation.)
10.1	Husba	and:
		a. Description of assets:
		Value : \$
10.2	Wife:	
	a.	Description of assets:
		•
		Value: \$
		11. Insurance and Annuities
11.1	Life Iı	nsurance:
	a.	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, if any: \$
b.	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, if any: \$
Annui	ties:
a.	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, if any: \$	
		Value of community interest: \$	as of
11.3	Healt	th Savings Accounts:	
	a.	Institution holding account:	
		Account number:	
		Value of assets in account: \$	as of
		Name of high-deductible health plan with wh	
			_
11.4	Medic	ical Savings Accounts:	
	a.	Institution holding account:	
		Account number:	
		Value of assets in account: \$	
		Name of high-deductible health plan with wh	ich the MSA is coupled:
		12 Motor Vehicles Roats Airplan	

12. Motor Vehicles, Boats, Airplanes, Cycles, etc.

(Include mobile homes, trailers, and recreational vehicles; exclude company-owned vehicles.)

12.1 Vehicles Owned:

a.	Year:	Make:	Model:	
	Name on title	y:		
	In possession	of:		
	Vehicle ident	ification number:		
	Does vehicle	have loan against it?	yes	no
	If yes, state:			
	Exact	name of creditor:		
	Curre	nt balance: \$	as of	
	Current net e	quity in vehicle: \$	Date acquired:	
	Source of dov	wn payment:		
	Who drives the	he vehicle?		
b.	Year:	Make:	Model:	
	Name on title	o:		
	In possession	of:		
	Vehicle ident	ification number:		
	Does vehicle	have loan against it?	yes	no
	If yes, state:			
	Exact	name of creditor:		
	Curre	nt balance: \$	as of	
	Current net e	quity in vehicle: \$	Date acquired:	
	Source of dov	wn payment:		
	Who drives the	he vehicle?		

c.	Year: Make:	Model:
	Name on title:	
	In possession of:	
	Vehicle identification number:	
	Does vehicle have loan against it	? yes no
	If yes, state:	
	Exact name of creditor:	
	Current balance: \$	as of
	Current net equity in vehicle: \$	Date acquired:
	Source of down payment:	
	Who drives the vehicle?	
	13. Loans	Receivable
(Include mo	ney owed to you or your spouse, in	cluding any expected federal or state income tax
refund, but o	lo not include receivables connected	with a business.)
a.	Name of debtor:	
	Debtor's relationship to you:	
	Purpose of loan:	
	Is debt evidenced in writing?	yes no
	Is debt secured? yes	no
	If so, detail security:	
	Is debt reasonably expected to be	paid? yes no
	Current loan balance \$	as of
	Balance of any accounts receivab	le: \$

	b.	Name of debtor:		
		Description	Source	Value
		Debtor's relationship to you:		
		Purpose of loan:		
		Is debt evidenced in writing?	yes n	0
		Is debt secured? yes	no	
		If so, detail security:		
		Is debt reasonably expected to be J	paid? yes	no
		Current loan balance \$ as of		
	Balan	ace of any accounts receivable: \$ _		
		14. Household Furniture,	Furnishings, and Fixture	s
State	your op	pinion of the fair market value of the	e household furniture, furn	ishings, and fixtures.
Fair n	narket v	value is not necessarily the cost or t	the replacement value. If	you expect a dispute
about	the divi	ision of this property, you may want	to attach an itemized list of	major items by room.
If you	or you	or spouse will contend that any of the	ne property was owned bef	ore your marriage or
acquii	red duri	ng the marriage by gift or inheritanc	e, please so indicate.	
	Fair n	narket value: \$		
		15. Electronics	and Computers	
15.1	In Po	ssession of Husband:		
		Description	Source	Value
4 = -				
15.2	In Po	ssession of Wife:		

16. Antiques, Artwork, and Collections

In Posses	ssion of Husband:		
	Description	Source	Value
In Posses	ssion of Wife:		
	Description	Source	Value
	17. Miscellaneous Sportin	ng Goods and Firearms	
In Posses	ssion of Husband:		
	Description	Source	Value
In Posses	ssion of Wife:		
	Description	Source	Value
	18. Jewelry and Oth	er Personal Items	
	(List major items an	nd state value.)	
In Posses	ssion of Husband:		

In P	Possession of Wife:		
	Description	Source	Value
	19. Li	ivestock	
	(Include cattle, ho	rses, and so forth.)	
In P	Possession of Husband:		
	Description	Source	Value
In P	Possession of Wife:		
	Description	Source	Value
	Name of alph		
a.			
	Name membership held in:		
	Account number:		
	Current value \$ Method of valuation:		
		ward Benefits	
	21. 1 ravei A	ward Benefits	
a.	Name of airline:		
	Account number:		
	Name on account:		
	Current number of miles:		
	Value (if any): \$		

22. Miscellaneous Assets

(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 document, estimated tax payments, tax overpayments, loss carry-forward deductions, lottery tickets/winnings, stadium bonds, stadium seat licenses, seat options, and season tickets.)

In P	Possession of Husband:		
	Description	Source	Value
In P	ossession of Wife:		
	Description	Source	Value
	23. Safe-Depo	osit Boxes	
a.	Name of financial institution or other	r depository:	
	Box number:		
	Names of persons who have access to	o contents:	
	Items in safe-deposit box:		
b.	Name of financial institution or other	r depository:	
	Box number:		
	Names of persons who have access to	o contents:	
	Items in safe-deposit box:		

24. Storage Facilities

	a.	Name of facility:
		Address of facility:
		Unit number:
		Length of lease:
		Terms of lease:
		Names of persons who have access to contents:
		Items in storage unit:
	b.	Name of facility:
		Address of facility:
		Unit number:
		Length of lease:
		Terms of lease:
		Names of persons who have access to contents:
		Items in storage unit:
		25. Community Claim for Reimbursement
		(Against Husband's or Wife's separate estate.)
See se	ction en	titled "Reimbursement" at the end of this document before completing 25.1 and 25.2.
25.1	Reimb	oursement Claim against Husband's Separate Estate:
	Descri	ption of basis of claim:
	Amoui	nt claimed: \$
25.2		oursement Claim against Wife's Separate Estate:
	Descri	ption of basis of claim:

	Amou	ınt claimed: \$
		26. Contingent Assets
		(For example, lawsuits by either party against a third party.)
	Natur	e of claim:
	Amou	ant of claim: \$
	Legal	representative:
	Addre	ess:
	Cause	number:
		Court where case is pending:
		Name of opposing attorney:
		Address:
		27. Community Liabilities
27.1	Credi	it Cards and Charge Accounts:
	a.	Name of creditor:
		Account number:
		Name(s) on account:
		Current balance: \$ as of
		Balance as of date of separation: \$
		Who charged what on this account?
		Who will be responsible after divorce?
	b.	Name of creditor:
		Account number:
		Name(s) on account:

	Current balance: \$ as of	
	Balance as of date of separation: \$	
	Who charged what on this account?	
	Who will be responsible after divorce?	
c.	Name of creditor:	
	Account number:	
	Name(s) on account:	
	Current balance: \$ as of	
	Balance as of date of separation: \$	
	Who charged what on this account?	
	Who will be responsible after divorce?	
d.	Name of creditor:	
	Account number:	
	Name(s) on account:	
	Current balance: \$ as of	
	Balance as of date of separation: \$	
	Who charged what on this account?	
	Who will be responsible after divorce?	
Fede	eral, State, and Local Tax Liability:	
Amo	ount owed in any previous tax year (describe liability, such as federal income tax	
prope	erty taxes): \$	
Amo	ount owed for current year: \$	
Attorney's Fees in This Case:		

27.2

	a.	Husband: \$	as of
	b.	Wife: \$	as of
27.4	Other	r Professional Fees in This Case:	
	a.	Husband: \$	as of
	b.	Wife: \$	as of
27.5	Other	r Liabilities Not Otherwise Listed	in This Document:
	Name	e of creditor:	
	Name	e on account:	
	Party	incurring liability:	
			as of
	Secur	ity, if any:	
See se	ection er	ntitled "Reimbursement" at the end	of this document before completing 27.6.
27.6	Reim	bursement Claims against Comm	nunity Estate:
	Reiml	bursement claim by husband's separ	rate estate against community estate:
		Description of basis of claim:	
	Reiml	bursement claim by wife's separate	
		Description of basis of claim:	

	Name	of recipient:	
	Addre	ss of recipient:	
		f pledge:	
		umount of pledge: \$	
		ge payable in installments?	
		able in installments, date each installment payment is due:	
	II paya	able in installments, amount of each installment: \$	
27.8	Contin	ngent Liabilities (for example, lawsuit against either party, guaranty either party	
may h	may have signed):		
	Name	of creditor:	
	Name of person primarily liable:		
	Amou	nt of contingent liability: \$	
	Nature	of contingency:	
		28. Separate Assets of Husband	
	28.1 A	ssets:	
	a.	Description of asset:	
		Date property acquired:	
		How acquired (for example, by gift, by devise, by descent, or owned before	
		marriage):	
		Value: \$ as of	

Pledges:

27.7

See section entitled "Reimbursement" at the end of this document before completing 28.2 and 28.3.

28.2	Husband's Separate Reimbursement Claim against Community Estate:
	Description of basis of claim:
	Amount claimed: \$
28.3	Husband's Separate Reimbursement Claim against Wife's Separate Estate:
	Description of basis of claim:
	Amount claimed: \$
	29. Liabilities of Husband's Separate Estate
29.1	Liabilities:
	a. Description of liability:
	Date of liability:
	How liability acquired:
	Amount of liability: \$ as of
See se	ection entitled "Reimbursement" at the end of this document before completing 29.2 and 29.3.
29.2	Wife's Separate Reimbursement Claim against Husband's Separate Estate:
	Description of basis of claim:
	Amount claimed: \$
29.3	Community Reimbursement Claim against Husband's Separate Estate:
_> .c	Description of basis of claim:
	Amount claimed: \$
20.1	•
30.1	Assets:
	a. Description of asset:
	Date property acquired:

	How acquired (for example, by gift, by devise, by descent, or owned before marriage):		
	Value: \$ as of		
See se	tion entitled "Reimbursement" at the end of this document before completing 30.2 and 30.3.		
30.2	Wife's Separate Reimbursement Claim against Community Estate:		
	Description of basis of claim:		
	Amount claimed: \$		
30.3	Wife's Separate Reimbursement Claim against Husband's Separate Estate:		
	Description of basis of claim:		
	Amount claimed: \$		
	31. Liabilities of Wife's Separate Estate		
31.1	Liabilities:		
	a. Description of liability:		
	Date of liability:		
	How liability acquired:		
	Amount of liability: \$ as of		
See se	tion entitled "Reimbursement" at the end of this document before completing 31.2 and 31.3.		
31.2	Husband's Separate Reimbursement Claim against Wife's Separate Estate:		
	Description of basis of claim:		
	Amount claimed: \$		
31.3	Community Reimbursement Claim against Wife's Separate Estate:		
	Description of basis of claim:		

		32. Children's Property
32.1	Custo	dial Account under Texas Uniform Transfers to Minors Act:
	a.	Name of financial institution:
		Name of account:
		Account number:
		Amount on deposit: \$ as of
		Name of minor for whom funds were deposited:
		Name of custodian:
32.2	529 P	lans:
	a.	Institution or entity administering the plan:
		Designated beneficiary:
		Is the plan a prepaid plan or a savings plan?
		Value of assets in the plan: \$ as of
32.3	Other	Property:
		33. Assets Held by Either Party for Benefit of Another
	a.	Name(s) of person(s) holding assets:
		Description of assets:
		Name and title of fiduciary (for example, executor or trustee):
		Name of owner of beneficial interest:
		Value of assets \$ as of

Amount claimed: \$ _____

34. Assets Held for Benefit of Either Party as Beneficiary

a.	Name(s) of person(s) holding assets:
	Description of assets:
	Name and title of fiduciary (for example, executor or trustee):
	Name of owner of beneficial interest:
	Value of assets \$ as of