

**PROPERTY QUESTIONNAIRE OF**

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**DATE OF MARRIAGE:** \_\_\_\_\_

Please answer all questions fully. If you need additional space, just copy the appropriate page.

**A. Real Estate (including Cemetery plots):**

A.1. Property address (location if rural): \_\_\_\_\_

Legal Description (Lot/Block Number/Subdivision): \_\_\_\_\_  
\_\_\_\_\_

County Where Property is Located: \_\_\_\_\_

Market value as of \_\_\_\_\_: \$ \_\_\_\_\_

Purchase price and date purchased: \$ \_\_\_\_\_ / \_\_\_\_\_

Mortgage Company: (name and address): \_\_\_\_\_  
\_\_\_\_\_

Mortgage loan number: \_\_\_\_\_ Monthly payment: \_\_\_\_\_

Outstanding mortgage balance as of \_\_\_\_\_: \$ \_\_\_\_\_

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

Description of second lien holder (name/address): \_\_\_\_\_  
\_\_\_\_\_

Mortgage loan number: \_\_\_\_\_ Monthly payment: \_\_\_\_\_

Outstanding mortgage balance as of \_\_\_\_\_: \$ \_\_\_\_\_

Improvements made since purchase (what, when, cost):

Current net equity in property as of \_\_\_\_\_: \$ \_\_\_\_\_  
(fair market value minus outstanding liens)

a. Who bought the property \_\_\_\_\_

b. How property acquired--circle one of the following (e.g., by gift, by inheritance, owned before marriage, purchased with separate money, purchased with community money, other)

A.2. Cemetery Plot

Location and description of plot: \_\_\_\_\_

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

Method of payment (monthly/quarterly/semiannually/annually): circle one

Date of purchase: \_\_\_\_\_ Purchase price: \_\_\_\_\_

**A.3. Recreational Property**

a. time shares (location/description): \_\_\_\_\_

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

Method of payment (monthly/quarterly/semiannually/annually): circle one

Date of purchase: \_\_\_\_\_ Purchase price: \_\_\_\_\_

b. condos (location/description): \_\_\_\_\_

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

Method of payment (monthly/quarterly/semiannually/annually): circle one

Date of purchase: \_\_\_\_\_ Purchase price: \_\_\_\_\_

**B. Mineral Interests.**

B.1. Name of mineral interest/lease well: \_\_\_\_\_

Type of interest (royalty, working, etc.): \_\_\_\_\_

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

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

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

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

Date of purchase: \_\_\_\_\_ Purchase price: \_\_\_\_\_

**C. Accounts with Financial Institutions:**

C.1. Name on/style of account: \_\_\_\_\_

Name and address of financial institution: \_\_\_\_\_

Date account was opened: \_\_\_\_\_ Account number: \_\_\_\_\_

If account was in existence before marriage, if so,  
amount on deposit at the time of marriage: \$ \_\_\_\_\_

Source of funds used to open account (circle one--community or separate)

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

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

Primary user of said account: \_\_\_\_\_

Type of account (checking/savings/money market) (circle one)

Is this an interest bearing account? (circle yes or no).

C.2. Name on/style of account: \_\_\_\_\_

Name and address of financial institution: \_\_\_\_\_

Date account was opened: \_\_\_\_\_ Account number: \_\_\_\_\_

If account was in existence before marriage, if so,  
amount on deposit at the time of marriage: \$ \_\_\_\_\_

Source of funds used to open account (circle one--community or separate)

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

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

Primary user of said account: \_\_\_\_\_

Type of account (checking/savings/money market) (circle one)

Is this an interest bearing account? (circle yes or no).

**D. Brokerage/Mutual Fund Accounts:**

D.1. Name/address of brokerage firm/mutual fund: \_\_\_\_\_  
\_\_\_\_\_

Name on account: \_\_\_\_\_

Name/type of account: \_\_\_\_\_ Account number: \_\_\_\_\_

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

D.2. Name/address of brokerage firm/mutual fund: \_\_\_\_\_  
\_\_\_\_\_

Name on account: \_\_\_\_\_

Name/type of account: \_\_\_\_\_ Account number: \_\_\_\_\_

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

**E. Publicly Traded Stocks, Bonds, and Other Securities:**

E.1. Name of security: \_\_\_\_\_ Type of security: (common or preferred)

Number of shares: \_\_\_\_\_ Certificate numbers: \_\_\_\_\_

Market value as of \_\_\_\_\_ : \$ \_\_\_\_\_

Name of exchange on which listed: (NYSE/NASDAQ/Other)

In possession of: \_\_\_\_\_ Pledged as collateral: [Yes/No]

E.2. Name of security: \_\_\_\_\_ Type of security: (common or preferred)

Number of shares: \_\_\_\_\_ Certificate numbers: \_\_\_\_\_

Market value as of \_\_\_\_\_ : \$ \_\_\_\_\_

Name of exchange on which listed: (NYSE/NASDAQ/Other)

In possession of: \_\_\_\_\_ Pledged as collateral: [Yes/No]

**F. Life Insurance and Annuities:**

**Life Insurance:**

F.1. Name and Address of Insurance Company: \_\_\_\_\_

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

Type of policy: (term or whole life) Policy number: \_\_\_\_\_

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

Date of issue: \_\_\_\_\_ Face amount: \$ \_\_\_\_\_

Cash surrender value as of \_\_\_\_\_ : \$ \_\_\_\_\_

Designated Beneficiary: \_\_\_\_\_ Balance of loan against policy: \_\_\_\_\_

F.2. Name and Address of Insurance Company: \_\_\_\_\_

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

Type of policy: (term or whole life) Policy number: \_\_\_\_\_

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

Date of issue: \_\_\_\_\_ Face amount: \$ \_\_\_\_\_

Cash surrender value as of \_\_\_\_\_ : \$ \_\_\_\_\_

Designated Beneficiary: \_\_\_\_\_ Balance of loan against policy: \_\_\_\_\_

**Annuities:**

F.3. Name/Address of Company: \_\_\_\_\_

\_\_\_\_\_

Policy number: \_\_\_\_\_ Name of annuitant: \_\_\_\_\_

Name of owner: \_\_\_\_\_ Type of annuity: \_\_\_\_\_

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

Date of issue: \_\_\_\_\_ Face amount: \$ \_\_\_\_\_

Value on date of marriage: \$ \_\_\_\_\_ Designated beneficiary: \_\_\_\_\_

Value as of \_\_\_\_\_ : \$ \_\_\_\_\_

**G. Retirement Benefits:**

**Defined Contribution Benefits:**

G.1. Exact name of plan: \_\_\_\_\_

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

Starting date of creditable service: \_\_\_\_\_ % employee is vested: \_\_\_\_\_

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

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

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

Payee of survivor benefits: \_\_\_\_\_ Designated beneficiary: \_\_\_\_\_

Loan against plan [Yes/No] Balance of loan against plan: \_\_\_\_\_

**Defined Benefit Plan:**

G.2. Exact name of plan: \_\_\_\_\_

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

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

Starting date of creditable service: \_\_\_\_\_ % employee is vested: \_\_\_\_\_

Designated beneficiary: \_\_\_\_\_ Payee of survivor benefits: \_\_\_\_\_

Value of benefits as of \_\_\_\_\_ : \$ \_\_\_\_\_

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

**Individual Retirement Plan/Self-Employed Plan:**

G.3. Name and address of financial institution: \_\_\_\_\_  
\_\_\_\_\_

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

Payee of survivor benefits: \_\_\_\_\_ Designated beneficiary: \_\_\_\_\_

Balance as of \_\_\_\_\_ : \$ \_\_\_\_\_

Balance on date of marriage: \_\_\_\_\_

**Military Benefits:**

G.4. Branch of service: \_\_\_\_\_ Name of service member: \_\_\_\_\_  
Rank/pay grade of service member: \_\_\_\_\_  
Starting date of creditable service: \_\_\_\_\_ Monthly benefit payable: \_\_\_\_\_  
Status of service member: [active/reserve/retired] (circle one)  
Payee of survivor benefits: \_\_\_\_\_ Description of benefits: \_\_\_\_\_

**Non-qualified Plans:**

G.5. Name/address of financial institution: \_\_\_\_\_  
\_\_\_\_\_  
Account name: \_\_\_\_\_ Account number: \_\_\_\_\_  
Account balance as of date of marriage: \_\_\_\_\_  
Account balance as of \_\_\_\_\_: \$ \_\_\_\_\_  
Payee of survivor benefits: \_\_\_\_\_ Designated beneficiary: \_\_\_\_\_

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

G.6. Name of plan: \_\_\_\_\_ Account number: \_\_\_\_\_  
Employee: \_\_\_\_\_ Employer: \_\_\_\_\_  
Account balance as of date of marriage: \_\_\_\_\_  
Balance as of \_\_\_\_\_: \$ \_\_\_\_\_  
Payee of survivor benefits: \_\_\_\_\_ Designated beneficiary: \_\_\_\_\_

**H. Stock Options:** (include all exercisable, non-exercisable, vested and non-vested stock options regardless of any restrictions on transfer)

H.1. Name of company: \_\_\_\_\_ Employee: \_\_\_\_\_  
Date of grant: \_\_\_\_\_ No. of options: \_\_\_\_\_ Strike Price: \_\_\_\_\_  
Vesting schedule: \_\_\_\_\_  
Are the options exercisable: [Yes/No] Are the options registered: [Yes/No]  
Stock price as of \_\_\_\_\_: \$ \_\_\_\_\_ Net market value as of \_\_\_\_\_: \$ \_\_\_\_\_

**I. Other Differed Compensation Benefits:**

I.1. Employee \_\_\_\_\_ Employer: \_\_\_\_\_

Worker's compensation [Yes/No] Value: \$ \_\_\_\_\_

Disability benefits [Yes/No] Value: \$ \_\_\_\_\_

Bonuses [Yes/No] Date expected to be paid : \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Other: \_\_\_\_\_

**J. Motor Vehicles, Boats, Airplanes, Cycles, etc.:**

J.1. Year and Model: \_\_\_\_\_ VIN: \_\_\_\_\_

Title in the name of: \_\_\_\_\_ In possession of: \_\_\_\_\_

Date purchased: \_\_\_\_\_ Purchase price: \$ \_\_\_\_\_

Name/address of lien holder: \_\_\_\_\_  
\_\_\_\_\_

Lien balance as of \_\_\_\_\_: \$ \_\_\_\_\_ Monthly payment: \$ \_\_\_\_\_

Fair market value as of \_\_\_\_\_: \$ \_\_\_\_\_ Net equity: \$ \_\_\_\_\_

J.2. Year and Model: \_\_\_\_\_ VIN: \_\_\_\_\_

Title in the name of: \_\_\_\_\_ In possession of: \_\_\_\_\_

Date purchased: \_\_\_\_\_ Purchase price: \$ \_\_\_\_\_

Name/address of lien holder: \_\_\_\_\_  
\_\_\_\_\_

Lien balance as of \_\_\_\_\_: \$ \_\_\_\_\_ Monthly payment: \$ \_\_\_\_\_

Fair market value as of \_\_\_\_\_: \$ \_\_\_\_\_ Net equity: \$ \_\_\_\_\_

J.3. Year and Model: \_\_\_\_\_ VIN: \_\_\_\_\_

Title in the name of: \_\_\_\_\_ In possession of: \_\_\_\_\_

Date purchased: \_\_\_\_\_ Purchase price: \$ \_\_\_\_\_

Name/address of lien holder: \_\_\_\_\_  
\_\_\_\_\_

Lien balance as of \_\_\_\_\_: \$ \_\_\_\_\_ Monthly payment: \$ \_\_\_\_\_

Fair market value as of \_\_\_\_\_: \$ \_\_\_\_\_ Net equity: \$ \_\_\_\_\_

J.4. Year and Model: \_\_\_\_\_ VIN: \_\_\_\_\_

Title in the name of: \_\_\_\_\_ In possession of: \_\_\_\_\_

Date purchased: \_\_\_\_\_ Purchase price: \$ \_\_\_\_\_

Name/address of lien holder: \_\_\_\_\_  
\_\_\_\_\_

Lien balance as of \_\_\_\_\_: \$ \_\_\_\_\_ Monthly payment:  
\$ \_\_\_\_\_

Fair market value as of \_\_\_\_\_: \$ \_\_\_\_\_ Net equity: \$ \_\_\_\_\_

J.5. Year and Model: \_\_\_\_\_ VIN: \_\_\_\_\_

Title in the name of: \_\_\_\_\_ In possession of: \_\_\_\_\_

Date purchased: \_\_\_\_\_ Purchase price: \$ \_\_\_\_\_

Name/address of lien holder: \_\_\_\_\_  
\_\_\_\_\_

Lien balance as of \_\_\_\_\_: \$ \_\_\_\_\_ Monthly payment: \$ \_\_\_\_\_

Fair market value as of \_\_\_\_\_: \$ \_\_\_\_\_ Net equity: \$ \_\_\_\_\_

**K. Closely Held Business Interests:** (include sole proprietorships, professional practices, partnerships, joint ventures, and other non-publicly traded corporate business entities, and so forth)

K.1. Name/Address of business: \_\_\_\_\_  
\_\_\_\_\_

Type of business organization: \_\_\_\_\_ Date started: \_\_\_\_\_

Nature of business: \_\_\_\_\_ % of ownership: \_\_\_\_\_

No. 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: \$ \_\_\_\_\_

**L. Money Owed to Community:**

**Accounts Receivable:** (do not include receivables connected with a business)

L.1. Name of debtor: \_\_\_\_\_ Relationship to you: \_\_\_\_\_

Date debt incurred: \_\_\_\_\_ Original amount of debt: \$ \_\_\_\_\_

Current amount of debt: \_\_\_\_\_

Debt (is/is not) evidenced in writing. Debt (is/is not) reasonably expected to be paid.

**Rental/Lease Income:**

L.2. Type/location of rental property: \_\_\_\_\_

Owner of rental property: \_\_\_\_\_ Date property acquired: \_\_\_\_\_

Name and address of debtor: \_\_\_\_\_  
\_\_\_\_\_

Amount of rental income: \$ \_\_\_\_\_ Method of payment [weekly/monthly]

**Income Tax Refund:**

L.3. Amount of expected refund: \$ \_\_\_\_\_

**M. Safe-Deposit Box/Storage Facility:**

**Safe-Deposit Box**

M.1. Name/address of financial institution or other depository: \_\_\_\_\_  
\_\_\_\_\_

Box Number: \_\_\_\_\_ Rental Fee [monthly/quarterly/yearly]: \$ \_\_\_\_\_

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

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

**Storage Facility**

M.2. Name/address of storage facility: \_\_\_\_\_  
\_\_\_\_\_

Unit Number: \_\_\_\_\_ Rental Fee [monthly/quarterly/yearly]: \$ \_\_\_\_\_

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

Items in storage facility: \_\_\_\_\_

**O. Memberships in clubs:**

O.1. Name of club: \_\_\_\_\_ Account No.: \_\_\_\_\_  
Name membership held in: \_\_\_\_\_ Type of membership: \_\_\_\_\_  
Value of membership: \$ \_\_\_\_\_

O.2. Name of club: \_\_\_\_\_ Account No.: \_\_\_\_\_  
Name membership held in: \_\_\_\_\_ Type of membership: \_\_\_\_\_  
Value of membership: \$ \_\_\_\_\_

**P. Household Furniture, Furnishings, and Fixtures:**

**Furniture and Furnishings:**

P.1. If you and your spouse have not reached an agreement regarding the division of the furniture and furnishings owned by the community attach a schedule by the room that the furniture or furnishing was located in the marital residence or the furniture and furnishings in each party's possession. By each piece, designate whether it is community property (purchased during the term of the marriage) or the separate property of either you or your spouse (owned prior to marriage, inherited, or received as a gift). If you have reached an agreement regarding the community property, just list the separate property of each party.

**Electronics and Computers:**

P.2. In possession Husband/with value of each piece/when and how acquired:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

P.3. In possession of Wife/with value of each piece/when and how acquired:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Antiques, Artwork, and Collection:**

P.4. In possession of Husband/with value of each piece/when and how acquired:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

P.5. In possession of Wife/with value of each piece/when and how acquired:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Miscellaneous Sporting Goods and Firearms:**

P.6. In possession of Husband/with value of each piece/when and how acquired:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

P.7. In possession of Wife/with value of each piece/when and how acquired:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Q. Jewelry and Personal Effects:**

Q.1. Jewelry/Personal Effects of Husband/value of each piece/when and how acquired:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Q.2. Jewelry/Personal Effects of Wife/value of each piece/when and how acquired:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**R. Miscellaneous Assets:**

R.1. **Livestock:** (include registered dogs, cats, birds, etc.)

Date and how acquired: \_\_\_\_\_

Type of livestock: \_\_\_\_\_ Number: \_\_\_\_\_

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

Have the livestock bore any offspring: [Yes/No] If so, when and how many: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**R.2. Crops:**

Location of crops: \_\_\_\_\_ Type of crops: \_\_\_\_\_

Property in the name of: \_\_\_\_\_

How and when were the crops acquired: \_\_\_\_\_

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

**R.3. Lottery/Gambling winnings:**

Type of winnings/losses: \_\_\_\_\_ Date of winnings/losses: \_\_\_\_\_

Source of funds used for gambling: \_\_\_\_\_

Amount of winnings/losses: \_\_\_\_\_

**R.4. Frequent Flyer Miles:**

Airline associated with program: \_\_\_\_\_

Name on account: \_\_\_\_\_ No. of miles earned: \_\_\_\_\_

**R.5. Season Tickets:**

Name of entity: \_\_\_\_\_ Seat number(s): \_\_\_\_\_

Fair market value: \_\_\_\_\_ Related parking passes: [Yes/No]

**R.6. Stadium Bonds:**

Name of entity: \_\_\_\_\_ Number of bond(s): \_\_\_\_\_

Fair market value: \_\_\_\_\_ Related parking passes: [Yes/No]

**R.7. Community Reimbursement Claims:**

R.7.1. Have community monies been used on your spouse's separate property, if so, how much: Explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

R.7.2. Have community monies been used on your separate property, if so, how much: Explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**R.8. Equitable Interest(s) of Community Estate:**

R.8.1. If community monies have been spent on your spouse's separate estate, such as a house, has that piece of property increased in value, if so by how much: Explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

R.8.2. If community monies have been spent on your separate estate, such as a house, has that piece of property increased in value, if so by how much: Explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

R.8.3. If your separate monies have been spent on your spouse's separate estate, such as a house, has that piece of property increased in value, if so by how much: Explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

R.8.4. If your spouse's separate monies have been spent on your separate estate, such as a house, has that piece of property increased in value, if so by how much: Explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**R.9. Contingent Assets:**

Do you or your spouse have any pending lawsuits filed against anyone, if so, please explain the nature of the claim and the anticipated damages: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**S. Community Debts/Liabilities:**

**Credit Cards and Charge Accounts**

S.1. Name of Creditor: \_\_\_\_\_ Account Number: \_\_\_\_\_

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

Balance as of [**date of separation**]: \_\_\_\_\_

S.2. Name of Creditor: \_\_\_\_\_ Account Number: \_\_\_\_\_

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

Balance as of [**date of separation**]: \_\_\_\_\_

S.3. Name of Creditor: \_\_\_\_\_ Account Number: \_\_\_\_\_

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

Balance as of [**date of separation**]: \_\_\_\_\_

S.4. Name of Creditor: \_\_\_\_\_ Account Number: \_\_\_\_\_

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

Balance as of [**date of separation**]: \_\_\_\_\_

S.5. Name of Creditor: \_\_\_\_\_ Account Number: \_\_\_\_\_

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

Balance as of [**date of separation**]: \_\_\_\_\_

S.6. Name of Creditor: \_\_\_\_\_ Account Number: \_\_\_\_\_

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

Balance as of [**date of separation**]: \_\_\_\_\_

S.7. Name of Creditor: \_\_\_\_\_ Account Number: \_\_\_\_\_

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

Balance as of [**date of separation**]: \_\_\_\_\_

S.8. Name of Creditor: \_\_\_\_\_ Account Number: \_\_\_\_\_

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

Balance as of [**date of separation**]: \_\_\_\_\_

S.9. Name of Creditor: \_\_\_\_\_ Account Number: \_\_\_\_\_

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

Balance as of [**date of separation**]: \_\_\_\_\_

S.10. Name of Creditor: \_\_\_\_\_ Account Number: \_\_\_\_\_

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

Balance as of [**date of separation**]: \_\_\_\_\_

**Federal, State, and Local Tax Liability:**

S.11. Describe tax liability: \_\_\_\_\_

Amount owed in any previous tax year: \$ \_\_\_\_\_

Amount owed in current year: \$ \_\_\_\_\_

**Attorney's Fees in this Case:**

S.12. Amount of your attorney's fees: \$ \_\_\_\_\_

S.13. Amount of your spouse's attorney's fees: \$ \_\_\_\_\_

**Other Professional Fees in this Case:**

S.14. Fees incurred by you: \$ \_\_\_\_\_

S.15. Fees incurred by your spouse: \$ \_\_\_\_\_

**Other Liabilities Not Otherwise Listed in this Inventory:** (e.g. loans, margin accounts, pledges)

S.16. Name of creditor: \_\_\_\_\_ Account number: \_\_\_\_\_

Party incurring liability: \_\_\_\_\_ Is loan evidenced in writing? [Yes/No]

Current balance as of \_\_\_\_\_: \$ \_\_\_\_\_ Security, if any: \_\_\_\_\_

S.17. Name of entity to whom pledge is owed: \_\_\_\_\_

Total amount of pledge: \_\_\_\_\_ Length of pledge: \_\_\_\_\_

**Reimbursement Claims Against Community Estate:**

S.18. Have your separate monies been used on community property: Explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

S.19. Have your spouse's separate monies been used on community property: Explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Equitable Interest Claims Against Community Estate:**

S.20. If your separate monies have been spent on your spouse=s separate estate, such as a house, has that piece of property increased in value, if so by how much: Explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

S.21. If your spouse=s separate monies have been spent on your separate estate, such as a house, has that piece of property increased in value, if so by how much: Explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Contingent Liabilities:** (lawsuit against either party, guaranty either party may have signed)

S.15. Name of creditor: \_\_\_\_\_ Person primarily liable: \_\_\_\_\_

Amount of contingent liability as of \_\_\_\_\_: \$ \_\_\_\_\_

Nature of contingency: \_\_\_\_\_

**Other Property**

**A. Custodial Accounts:**

A.1. Name/address of financial institution: \_\_\_\_\_

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

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

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

**B. Assets Held by Either Party for the Benefit of Another:**

B.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 \_\_\_\_\_: \$ \_\_\_\_\_

**C. Assets Held for the Benefit of Either Party as a Beneficiary:**

C.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 \_\_\_\_\_: \$ \_\_\_\_\_

Date Completed: \_\_\_\_\_ By: \_\_\_\_\_