

Instructions for Marital Property Questionnaire

General Instructions

Accurate information concerning property and debts is very important in divorce cases. Please fill out the marital property questionnaire as completely as you can, drawing on any source of information to which you have access. Do not enlist your spouse's help unless we specifically request 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 present value of property, you should make your own independent estimate.

The attached form provides for only a few items under each type of property. If you need to provide additional information, 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."

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.

Property Division

In addition to factual data, we need to know your wishes about division of the property. Please indicate your wishes in the left margin of the form by placing an "H" next to the items you want to go to the husband/spouse 1 and a "W" next to items you want to go to the wife/spouse 2. Alternatively, next to each item place the name of the person who should receive the item.

Definitions

Separate Property: Property acquired by a spouse before marriage and property a spouse acquired individually during marriage by gift or inheritance or as a result of personal injury are considered to be separate property of that spouse. If either you or your spouse has any property you think is separate property, complete the section marked "Separate Estates of the Parties."

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

Fair Market Value: 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.

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 worksheet. If an asset has a title document (deed, deed of trust, certificate of title to a motor vehicle), return a copy with this worksheet. If an asset has any document that can clearly identify it, return a copy with this worksheet.

Here is a checklist of some of the copies of items you should return with the Marital Property Questionnaire:

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. certificates of 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.

Full Disclosure

Finally, we will rely on this marital property questionnaire 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 signing below, you are representing to our firm that you have included accurate information about all assets and debts of which you are aware.

Client Signature

Attorney/Client-Privileged Information

Client Name: _____

Schedule of Marital Property

We will need the following information in preparing your divorce proceedings. Please answer all questions; if a question does not apply, please mark it "N/A." Please do not hesitate to ask if you have any questions. If more pages are required for any category of asset, please attach additional pages.

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

Home Owned:

Street address: _____

County of location: _____

General description: _____

Legal description: _____

Current fair market value: \$ _____ as of _____

Exact name of mortgage company and account number, if any: _____

Attorney/Client-Privileged Information

Current balance of mortgages: \$ _____

a. First mortgage

Name of lienholder and account number: _____

Current balance of lien: \$ _____ as of _____

Monthly payment: \$ _____ Due date: _____ Interest rate: _____

b. Second lien

Name of second lienholder and account number: _____

Current balance of second lien: \$ _____ as of _____

Monthly payment: \$ _____ Due date: _____ 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: _____

Attorney/Client-Privileged Information

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: _____

Attorney/Client-Privileged Information

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

(Include cash, traveler's checks, money orders, and accounts with commercial banks, savings and loan associations, and credit unions; exclude accounts with brokerage houses and all retirement accounts.)

Checking Accounts:

a. Name of financial institution: _____

Address: _____

Account officer: _____

Account number: _____

Account name: _____

Type of account: _____

Attorney/Client-Privileged Information

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: _____

Attorney/Client-Privileged Information

Current balance: \$ _____ as of _____

When account opened: _____

Source of funds: _____

Use of account: _____

Savings 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: _____

Address: _____

Account officer: _____

Account number: _____

Account name: _____

Attorney/Client-Privileged Information

Type of account: _____

Name(s) on withdrawal cards: _____

Current balance: \$ _____ as of _____

When account opened: _____

Source of funds: _____

Use of account: _____

Pledged: _____ To: _____

Reason: _____

Certificates 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: _____ When due: _____

Where is C.D. now? _____

Source of funds: _____

Pledged: _____ To: _____

Reason: _____

b. Name of financial institution: _____

Address: _____

Account officer: _____

Attorney/Client-Privileged Information

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 Accounts

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): _____

Margin loan balance: \$ _____ as of _____

Value of community interest in each account (and subaccounts, 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): _____

Attorney/Client-Privileged Information

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.)

Stocks:

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 _____

Attorney/Client-Privileged Information

Bonds:

- 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: _____ Interest payable: _____
Convertible: _____ Due date: _____
Pledged: _____ To: _____
Reason: _____

6. Stock Options

(Include all 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 options registered? _____
Current stock price: \$ _____ as of _____
Strike price: \$ _____
Current net market value: \$ _____ as of _____
Value of community interest: \$ _____ as of _____

Attorney/Client-Privileged Information

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

\$ _____

b. Name of company: _____

Date of option or grant: _____

Vesting schedule: _____

Number of options: _____

Are the options exercisable? _____ Are the options registered? _____

Current stock price: \$ _____ as of _____

Strike price: \$ _____

Current net market value: \$ _____ as of _____

Value of community interest: \$ _____ as of _____

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

\$ _____

7. Bonuses

a. Name of company: _____

Spouse earning bonus: _____

Date bonus expected to be paid: _____

Time period covered by bonus: _____

Anticipated amount of bonus: \$ _____

b. Name of company: _____

Spouse earning bonus: _____

Date bonus expected to be paid: _____

Attorney/Client-Privileged Information

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.)

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

Defined Contribution Retirement 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):

- 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 _____

Defined Benefit Retirement Plans (any plan that is not a defined contribution plan and that usually involves payment of benefits according to a formula):

- a. Exact name of plan: _____
- Name and address of plan administrator: _____
- Employee: _____
- Employer: _____

Attorney/Client-Privileged Information

Starting date of creditable service: _____

Designated beneficiary: _____

Payee of survivor benefits: _____

Description of benefits: _____

Current balance: \$ _____ as of _____

Value of community interest in plan: \$ _____ as of _____

IRA/SEP:

a. Name of financial institution: _____

Account name: _____

Account number: _____

Payee of survivor benefits: _____

Designated beneficiary: _____

Current balance: \$ _____ as of _____

Value of community interest in plan: \$ _____ as of _____

b. Name of financial institution: _____

Account name: _____

Account number: _____

Payee of survivor benefits: _____

Designated beneficiary: _____

Current balance: \$ _____ as of _____

Value of community interest in plan: \$ _____ as of _____

Military Benefits:

a. Branch of service: _____

Attorney/Client-Privileged Information

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: _____ %

Nonqualified 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 _____

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

a. Name of plan: _____

Account name: _____

Account number: _____

Account balance as of date of marriage: \$ _____

Attorney/Client-Privileged Information

Has beneficiary been designated? _____ yes _____ no

If so, identify beneficiary: _____

Value of community interest in plan: \$ _____ as of _____

10. Other Deferred Compensation Benefits

(Examples include worker's compensation, disability benefits, other "special payments", and other forms of compensation.)

Husband:

a. Description of assets: _____

Value : \$ _____

Wife:

a. Description of assets: _____

Value: \$ _____

11. Insurance and Annuities

Life Insurance:

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)

Attorney/Client-Privileged Information

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: \$ _____

Annuities:

a. Name of company: _____

Policy number: _____

Name of annuitant: _____

Name of owner: _____

Attorney/Client-Privileged Information

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 _____

Health Savings Accounts:

a. Institution holding account: _____

Account number: _____

Value of assets in account: \$ _____ as of _____

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

Medical Savings Accounts:

a. Institution holding account: _____

Account number: _____

Value of assets in account: \$ _____ as of _____

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

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

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

Vehicles Owned:

a. 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? _____

b. 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 _____

Attorney/Client-Privileged Information

Current net equity in vehicle: \$ _____ Date acquired: _____

Source of down payment: _____

Who drives the 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 money owed to you or your spouse, including any expected federal or state income tax refund, but do 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: _____

Attorney/Client-Privileged Information

Is debt reasonable expected to be paid? _____ yes _____ no

Current loan balance \$ _____ as of _____

Balance of any accounts receivable: \$ _____

b. 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 reasonable expected to be paid? _____ yes _____ no

Current loan balance \$ _____ as of _____

Balance of any accounts receivable: \$ _____

14. Household Furniture, Furnishings, and Fixtures

State your opinion of the fair market value of the household furniture, furnishings, and fixtures.

Fair market value is not necessarily the cost or the replacement value. If you expect a dispute about the division of this property, you may want to attach an itemized list of major items by room.

If you or your spouse will contend that any of the property was owned before your marriage or acquired during the marriage by gift or inheritance, please so indicate.

Fair market value: \$ _____

15. Electronics and Computers

In Possession of Husband:

Description	Source	Value

In Possession of Wife:

Description	Source	Value

16. Antiques, Artwork, and Collections

In Possession of Husband:

Description	Source	Value

In Possession of Wife:

Description	Source	Value

17. Miscellaneous Sporting Goods and Firearms

In Possession of Husband:

Description	Source	Value

Attorney/Client-Privileged Information

In Possession of Wife:

Description	Source	Value

18. Jewelry and Other Personal Items

(List major items and state value.)

In Possession of Husband:

Description	Source	Value

In Possession of Wife:

Description	Source	Value

19. Livestock

(Include cattle, horses, and so forth.)

In Possession of Husband:

Description	Source	Value

In Possession of Wife:

Description	Source	Value

20. Club Memberships

- a. Name of club: _____
Name membership held in: _____
Account number: _____
Current value: \$ _____ as of _____
Method of valuation: _____

21. Travel Award Benefits

- a. Name of airline: _____
Account number: _____
Name on account: _____
Current number of miles: _____ as of _____
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 Possession of Husband:

Description	Source	Value
_____	_____	_____
_____	_____	_____

Attorney/Client-Privileged Information

In Possession of Wife:

Description	Source	Value

23. Safe-Deposit Boxes

- a. Name of financial institution or other depository: _____
Box number: _____
Names of persons who have access to contents: _____

Items in safe-deposit box: _____
- b. Name of financial institution or other depository: _____
Box number: _____
Names of persons who have access to 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: _____

Attorney/Client-Privileged Information

- 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 section entitled "Reimbursement" at the end of this document before completing the following 2 questions.

Reimbursement Claim against Husband's Separate Estate:

Description of basis of claim: _____
Amount claimed: \$ _____

Reimbursement Claim against Wife's Separate Estate:

Description of basis of claim: _____
Amount claimed: \$ _____

26. Contingent Assets
(For example, lawsuits by either party against a third party.)

Nature of claim: _____
Amount of claim: \$ _____
Legal representative: _____
Address: _____

Attorney/Client-Privileged Information

Cause number: _____

Court where case is pending: _____

Name of opposing attorney: _____

Address: _____

27. Community Liabilities

Credit 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: _____

Attorney/Client-Privileged Information

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? _____

Federal, State, and Local Tax Liability:

Amount owed in any previous tax year (describe liability, such as federal income tax, property taxes): \$ _____

Amount owed for current year: \$ _____

Attorney's Fees in This Case:

a. Husband: \$ _____ as of _____

b. Wife: \$ _____ as of _____

Other Professional Fees in This Case:

a. Husband: \$ _____ as of _____

b. Wife: \$ _____ as of _____

Other Liabilities Not Otherwise Listed in This Document:

Name of creditor: _____

Attorney/Client-Privileged Information

Name on account: _____

Account number: _____

Is loan evidenced in writing? _____

Margin account balances: _____

Party incurring liability: _____

Party actually signing: _____

Current balance: \$ _____ as of _____

Security, if any: _____

See section entitled "Reimbursement" at the end of this document before completing the following two questions.

Reimbursement Claims against Community Estate:

Reimbursement claim by husband's separate estate against community estate:

Description of basis of claim: _____

Amount claimed: \$ _____

Reimbursement claim by wife's separate estate against community estate:

Description of basis of claim: _____

Amount claimed: \$ _____

Pledges:

Name of recipient: _____

Address of recipient: _____

Date of pledge: _____

Total amount of pledge: \$ _____

Is pledge payable in installments? _____

Attorney/Client-Privileged Information

If payable in installments, date each installment payment is due: _____

If payable in installments, amount of each installment: \$ _____

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

Name of creditor: _____

Name of person primarily liable: _____

Amount of contingent liability: \$ _____

Nature of contingency: _____

28. Separate Assets of Husband

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 section entitled "Reimbursement" at the end of this document before completing the following two questions.

Husband's Separate Reimbursement Claim against Community Estate:

Description of basis of claim: _____

Amount claimed: \$ _____

Attorney/Client-Privileged Information

Husband's Separate Reimbursement Claim against Wife's Separate Estate:

Description of basis of claim: _____

Amount claimed: \$ _____

29. Liabilities of Husband's Separate Estate

Liabilities:

a. Description of liability: _____

Date of liability: _____

How liability acquired: _____

Amount of liability: \$ _____ as of _____

See section entitled "Reimbursement" at the end of this document before completing the following two questions.

Wife's Separate Reimbursement Claim against Husband's Separate Estate:

Description of basis of claim: _____

Amount claimed: \$ _____

Community Reimbursement Claim against Husband's Separate Estate:

Description of basis of claim: _____

Amount claimed: \$ _____

30. Separate Assets of Wife

Assets:

a. Description of asset: _____

Date property acquired: _____

Attorney/Client-Privileged Information

How acquired (for example, by gift, by devise, by descent, or owned before marriage):

Value: \$ _____ as of _____

See section entitled "Reimbursement" at the end of this document before completing the following two questions.

Wife's Separate Reimbursement Claim against Community Estate:

Description of basis of claim: _____

Amount claimed: \$ _____

Wife's Separate Reimbursement Claim against Husband's Separate Estate:

Description of basis of claim: _____

Amount claimed: \$ _____

31. Liabilities of Wife's Separate Estate

Liabilities:

a. Description of liability: _____

Date of liability: _____

How liability acquired: _____

Amount of liability: \$ _____ as of _____

See section entitled "Reimbursement" at the end of this document before completing the following two questions.

Husband's Separate Reimbursement Claim against Wife's Separate Estate:

Description of basis of claim: _____

Attorney/Client-Privileged Information

Amount claimed: \$ _____

Community Reimbursement Claim against Wife's Separate Estate:

Description of basis of claim: _____

Amount claimed: \$ _____

32. Children's Property

Custodial 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: _____

529 Plans:

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 _____

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 _____

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 _____

Reimbursement

Texas law recognizes three marital estates: the community estate (owned by the spouses together); the husband's separate estate; and the wife's separate estate. A spouse's separate estate consists of (1) the property owned or claimed by the spouse before marriage; (2) the property acquired by the spouse during marriage through gift, will, or inheritance; (3) the recovery for personal injuries sustained by the spouse during marriage, except any recovery for loss of earning capacity during marriage; and (4) the property set aside to the spouse by an agreement between the spouses. 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 check the appropriate question(s) 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:

_____ Has the community estate made any payments on the unsecured liabilities of your separate estate or your spouse's separate estate?

_____ Has the community estate made any payments on the secured liabilities of your separate estate or your spouse's separate estate?

_____ 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?

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

_____ Has your separate estate or your spouse's separate estate made any payments on the unsecured liabilities of the community estate?

Attorney/Client-Privileged Information

_____ Has your separate estate or your spouse's separate estate made any payments on the secured liabilities of the community estate?

_____ 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?

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

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

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

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

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

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