

**CAUSE NUMBER**

**IN THE MATTER OF  
THE MARRIAGE OF**

**AND**

**AND IN THE INTEREST OF**

**CHILDREN**

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**IN THE DISTRICT COURT  
  
JUDICIAL DISTRICT  
  
TRAVIS COUNTY, TEXAS**

**INVENTORY AND APPRAISEMENT OF [Name of Party].**

[Name of Party] [Petitioner/Respondent], submits this inventory and appraisal of all assets and liabilities, community and separate estates, as follows:

**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)

Street address:

County of location:

Description of improvements, if any:

Legal description:

Current fair market value (as of [date]): \$[amount]

Name of mortgage company and account number, if any:

Current balance of mortgage (as of [date]): \$[amount]

Other liens against property (as of [date]): \$[amount]

Current net equity in property: \$[amount]

- 2. 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)

Name of institution:  
Account name:  
Account number:  
Type of account:  
Name(s) on withdrawal:  
Approximate balance:

Name of institution:  
Account name:  
Account number:  
Type of account:  
Name(s) on withdrawal:  
Approximate balance:

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

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:

**4. Brokerage and Mutual Fund Accounts**

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 [date]): \$[amount]  
Value of community interest in each account (and  
subaccounts if any) (as of [date]): \$[amount]  
Tax basis of each security held: \$[amount]

**5. Bonuses**

Name of company:  
Spouse earning bonus:  
Date bonus expected to be paid:  
Time period covered by bonus:  
Anticipated amount of bonus:

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

Name of business:  
Address:  
Type of business organization:  
Percentage of ownership:  
Number of shares owned (if applicable):  
Value (as of [date]): \$[amount]  
Balance of accounts receivable if on cash basis accounting: \$[amount]  
Balance of liabilities if on cash basis accounting: <[\$[amount]>

**7. Retirement Benefits**

*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))

Exact name of Plan:  
Name and address:  
Employee:  
Employer:  
Starting date of credible Service: \_\_\_\_\_  
Account Name:  
Account balance as of date of marriage: \$ \_\_\_\_\_  
Payee of survivor benefits: \_\_\_\_\_  
Designated Beneficiary: \_\_\_\_\_  
Current account balance of \_\_\_\_\_ \$ \_\_\_\_\_  
Balance of loan against plan: \$ \_\_\_\_\_  
Value of community interest in plan as of \_\_\_\_\_ : \$ \_\_\_\_\_

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

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 **[date]**): \$**[amount]**

*IRA/SEP*

Name of financial institution:  
Account name:  
Account number:  
Payee of survivor benefits:  
Designated beneficiary:  
Current account balance (as of **[date]**): \$**[amount]**  
Value of community interest (as of **[date]**): \$**[amount]**

*Military Benefits*

Branch of service:  
Name of servicemember:  
Rank/pay grade of servicemember:  
Starting date of creditable service:  
Status of servicemember: [active/reserve/retired]  
Payee of survivor benefits:  
Description of benefits:  
Monthly benefit payable: \$**[amount]**  
Value of community interest in plan (as of **[date]**): \$**[amount]**  
Percentage of plan that is community: **[percent]**%



*Annuities*

Name of company:  
Policy number:  
Name of annuitant:  
Name of owner:  
Type of annuity:  
Amount of premiums [monthly/quarterly/  
semiannually]: \$[amount]  
Date of issue:  
Face amount:  
Designated beneficiary:  
Value on date of marriage:  
Current value (as of [date]): \$[amount]  
Balance of loan against policy: \$[amount]  
Value of community interest (as of [date]): \$[amount]

*Health Savings Accounts*

Institution holding account:  
Account number:  
Name of high-deductible health plan with which the  
HSA is coupled:  
Value of assets in account (as of [date]): \$[amount]

*Medical Savings Accounts*

Institution holding account:  
Account number:  
Name of high-deductible health plan with which the  
MSA is coupled:  
Value of assets in account (as of [date]): \$[amount]

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

Year:  
Make:  
Model:  
Name on certificate of title:  
In possession of: \_\_\_\_\_  
Fair market value of vehicle: \$ \_\_\_\_\_  
(Source: \_\_\_\_\_)  
Name of creditor if loan against vehicle: \_\_\_\_\_  
Current net equity in vehicle: \$ \_\_\_\_\_  
Year:  
Make:  
Model:  
Name on certificate of title:  
In possession of: \_\_\_\_\_  
Fair market value of vehicle: \$ \_\_\_\_\_  
(Source: \_\_\_\_\_)  
Name of creditor if loan against vehicle: \_\_\_\_\_  
Current net equity in vehicle: \$ \_\_\_\_\_

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

Estimated Worth: \$ \_\_\_\_\_

**11. Tools, Guns and Sporting Equipment**

\_\_\_\_\_ Estimated Worth: \$ \_\_\_\_\_

**12. Electronics and Computers**

**13. Liabilities**

**A. *Credit Cards and Charge Accounts in [Name of Party]'s name***

Name of financial institution:

Account name:

Account numbers:

Type of account:

Current account balance

**B. *Medical Debts***

\_\_\_\_\_  
Account Name:

Estimated account balance:        \$ \_\_\_\_\_

**C. *Federal, State, and Local Tax Liability***

**D. *Property Tax***

**E. *Spousal Support Paid During This Case***

**E. *Attorney's Fees & Expenses in This Case***

Legal Representation

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

Mediation expense

Amount paid:

Total:



**14. Separate Property of [Name of Party]**

Description of asset:  
Date property acquired:  
How acquired (e.g., by gift, by devise, by descent, or  
owned before marriage):  
Value (as of [date]):

**15. Reimbursement Claims**

**Verification**

I, [Name of Party]. state on oath that, to the best of my knowledge and belief, this inventory and appraisal contains-

- 1. full and complete list of all properties that I claim belong to the community estate of me and my spouse, with the values thereof;
- 2. a full and complete list of all properties in my possession or subject to my control that I claim or admit are my or my spouse's separate property and estate, with the values thereof; and
- 3. a full and complete list of the debts that I claim are community indebtedness.

Any omission from this inventory is not intentional but is done through mere inadvertence and not to mislead my spouse. There may be other assets and liabilities of which my spouse is aware, and the omission of those items from this inventory should not be construed as a waiver of my interest in them.

\_\_\_\_\_  
[Name of Party]

<b>State of Texas</b>	§
	§
<b>County of Travis</b>	§

SIGNED under oath before me on \_\_\_\_\_, 2013.

\_\_\_\_\_  
Notary Public, State of Texas