

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.

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.

THE CONTENTS OF THIS DOCUMENT 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: _____

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: _____

Current fair market value: \$ _____ as of _____

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

Current balance of mortgages: \$ _____

a. Purchase mortgage

Name of lienholder: _____

Current balance of lien: \$ _____ as of _____

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

b. Second lien (pools, etc.)

Name of second lienholder: _____

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

Attorney/Client-Privileged Information

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

c. Third lien (decrees)

Name of third lienholder: _____

Current balance of third 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: _____

1.2 Home Not Owned:

Address of dwelling: _____

General description of dwelling: _____

Attorney/Client-Privileged Information

Furnished? _____

When did you move in? _____

Who owns the property? _____

Address: _____

Phone: _____

Rent amount: \$ _____ Due date: _____

Are utilities included? _____ Is rent current now? _____

How long is the term of lease? _____

Written lease signed? _____

Did you put up a deposit? _____ How much? \$ _____

How much notice to terminate lease? _____

1.3 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 _____

2. Mineral Interests

a. Name of mineral interest/lease/well: _____

Attorney/Client-Privileged Information

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

(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.)

3.1 Checking Accounts:

a. Name of financial institution: _____

Address: _____

Attorney/Client-Privileged Information

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 _____

Attorney/Client-Privileged Information

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 Savings Accounts:

a. Name of financial institution: _____

Address: _____

Attorney/Client-Privileged Information

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: _____

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: _____

Pledged: _____ To: _____

Reason: _____

3.3 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: _____

Attorney/Client-Privileged Information

Pledged: _____ To: _____

Reason: _____

b. 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: _____

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: _____

Attorney/Client-Privileged Information

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): _____

Account number (and numbers of subaccounts, if any): _____

Margin loan balance: \$ _____ as of _____

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

\$ _____ as of _____

Tax basis of each security held: \$ _____

5. Publicly Traded Stocks, Bonds, and Other Securities

(Include securities not in a brokerage account, mutual fund, or retirement fund.)

5.1 Stocks:

a. Name of security: _____

Attorney/Client-Privileged Information

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:

a. Name of issuer: _____

Address: _____

Serial number of bond: _____ Denomination: _____

Attorney/Client-Privileged Information

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 _____

Attorney/Client-Privileged Information

Strike price: \$ _____

Current net market value: \$ _____ as of _____

Value of community interest: \$ _____ as of _____

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: _____

Attorney/Client-Privileged Information

Date bonus expected to be paid: _____

Time period covered by bonus: _____

Anticipated amount of bonus: \$ _____

b. Name of company: _____

Date bonus expected to be paid: _____

Time period covered by bonus: _____

Anticipated amount of bonus: \$ _____

8. Closely Held Business Interests

(Include sole proprietorships, professional practices, corporations, partnerships, limited liability companies and partnerships, joint ventures, and other nonpublicly traded business entities.)

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: \$ _____

Attorney/Client-Privileged Information

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 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: _____

Attorney/Client-Privileged Information

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 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: _____

Starting date of creditable service: _____

Designated beneficiary: _____

Payee of survivor benefits: _____

Description of benefits: _____

Current balance: \$ _____ as of _____

Attorney/Client-Privileged Information

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

9.3 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 _____

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: _____

Attorney/Client-Privileged Information

Monthly benefit payable: \$ _____

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

Percentage of plan that is community: _____ %

9.5 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 _____

9.6 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.)

10.1 Husband:

a. Description of assets: _____

Value : \$ _____

10.2 Wife:

a. Description of assets: _____

Value: \$ _____

11. Insurance and Annuities

11.1 Life Insurance:

a. Name of insurance company: _____

Attorney/Client-Privileged Information

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: \$ _____

11.2 Annuities:

a. Name of company: _____

Policy number: _____

Name of annuitant: _____

Name of owner: _____

Type of annuity: _____

Attorney/Client-Privileged Information

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 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: _____

11.4 Medical Savings Accounts:

a. Institution holding account: _____

Account number: _____

Attorney/Client-Privileged Information

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.)

12.1 Vehicles Owned:

a. Year: _____ Make: _____ Model: _____

Name on certificate of 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 should be awarded the vehicle in the divorce? _____

Attorney/Client-Privileged Information

b. Year: _____ Make: _____ Model: _____

Name on certificate of 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 should be awarded the vehicle in the divorce? _____

c. Year: _____ Make: _____ Model: _____

Name on certificate of title: _____

In possession of: _____

Vehicle identification number: _____

Does vehicle have loan against it? _____ yes _____ no

Attorney/Client-Privileged Information

If yes, state:

Exact name of creditor: _____

Current balance: \$ _____ as of _____

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

Source of down payment: _____

Who should be awarded the vehicle in the divorce? _____

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: _____

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

Current loan balance \$ _____ as of _____

Balance of any accounts receivable: \$ _____

Attorney/Client-Privileged Information

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 reasonably expected to be paid? _____ yes _____ no
Current loan balance \$ _____ as of _____
Balance of any accounts receivable: \$ _____

c. 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 _____

Attorney/Client-Privileged Information

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

15.1 In Possession of Husband:

Description	Source	Value
_____	_____	_____
_____	_____	_____

15.2 In Possession of Wife:

Description	Source	Value
_____	_____	_____
_____	_____	_____

Attorney/Client-Privileged Information

16. Antiques, Artwork, and Collections

16.1 In Possession of Husband:

Description	Source	Value
_____	_____	_____
_____	_____	_____

16.2 In Possession of Wife:

Description	Source	Value
_____	_____	_____
_____	_____	_____

17. Miscellaneous Sporting Goods and Firearms

17.1 In Possession of Husband:

Description	Source	Value
_____	_____	_____
_____	_____	_____

17.2 In Possession of Wife:

Description	Source	Value
_____	_____	_____
_____	_____	_____

Attorney/Client-Privileged Information

18. Jewelry and Other Personal Items

(List major items and state value.)

18.1 In Possession of Husband:

Description	Source	Value
_____	_____	_____
_____	_____	_____

18.2 In Possession of Wife:

Description	Source	Value
_____	_____	_____
_____	_____	_____

19. Livestock

(Include cattle, horses, and so forth.)

19.1 In Possession of Husband:

Description	Source	Value
_____	_____	_____
_____	_____	_____

19.2 In Possession of Wife:

Description	Source	Value
_____	_____	_____
_____	_____	_____

Attorney/Client-Privileged Information

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.)

Attorney/Client-Privileged Information

22.1 In Possession of Husband:

Description	Source	Value
_____	_____	_____
_____	_____	_____

22.2 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: _____

Attorney/Client-Privileged Information

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: _____

Attorney/Client-Privileged Information

Items in storage unit: _____

25. Community Claim for Reimbursement

(Against Husband's or Wife's separate estate.)

25.1 Reimbursement Claim against Husband's Separate Estate:

Description of basis of claim: _____

Amount claimed: \$ _____

25.2 Reimbursement Claim against Wife's Separate Estate:

Description of basis of claim: _____

Amount claimed: \$ _____

26. Economic Contribution Claim of Community Estate

26.1 Economic Contribution Claim against Husband's Separate Estate:

Description of basis of claim: _____

Amount claimed: \$ _____

26.2 Economic Contribution Claim against Wife's Separate Estate:

Description of basis of claim: _____

Amount claimed: \$ _____

27. Contingent Assets

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

Nature of claim: _____

Attorney/Client-Privileged Information

Amount of claim: \$ _____

Legal representative: _____

Address: _____

Cause number: _____

Court where case is pending: _____

Name of opposing attorney: _____

Address: _____

28. Community Liabilities

28.1 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: _____

Attorney/Client-Privileged Information

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 _____

Attorney/Client-Privileged Information

Balance as of date of separation: \$ _____

Who charged what on this account? _____

Who will be responsible after divorce? _____

28.2 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: \$ _____

28.3 Attorney's Fees in This Case:

a. Husband: \$ _____ as of _____

b. Wife: \$ _____ as of _____

28.4 Other Professional Fees in This Case:

a. Husband: \$ _____ as of _____

b. Wife: \$ _____ as of _____

28.5 Other Liabilities Not Otherwise Listed in This Document:

Name of creditor: _____

Name on account: _____

Account number: _____

Is loan evidenced in writing? _____

Attorney/Client-Privileged Information

Margin account balances: _____

Party incurring liability: _____

Party actually signing: _____

Current balance: \$ _____ as of _____

Security, if any: _____

28.6 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: \$ _____

28.7 Economic Contribution Claims against Community Estate:

Economic contribution claim by husband's separate estate against community estate:

Description of basis of claim: _____

Amount claimed: \$ _____

Economic contribution claim by wife's separate estate against community estate:

Attorney/Client-Privileged Information

Description of basis of claim: _____

Amount claimed: \$ _____

28.8 Pledges:

Name of recipient: _____

Address of recipient: _____

Date of pledge: _____

Total amount of pledge: \$ _____

Is pledge payable in installments? _____

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

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

28.9 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: _____

29. Separate Assets of Husband

29.1 Assets:

a. Description of asset: _____

Attorney/Client-Privileged Information

Date property acquired: _____

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

Value: \$ _____ as of _____

29.2 Husband's Separate Reimbursement Claim against Community Estate:

Description of basis of claim: _____

Amount claimed: \$ _____

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

Description of basis of claim: _____

Amount claimed: \$ _____

29.4 Husband's Separate Economic Contribution Claim against Community Estate:

Description of basis of claim: _____

Amount claimed: \$ _____

29.5 Husband's Separate Economic Contribution Claim against Wife's Separate Estate:

Description of basis of claim: _____

Amount claimed: \$ _____

Attorney/Client-Privileged Information

30. Liabilities of Husband's Separate Estate

30.1 Liabilities:

- a. Description of liability: _____
Date of liability: _____
How liability acquired: _____
Amount of liability: \$ _____ as of _____

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

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

30.3 Community Reimbursement Claim against Husband's Separate Estate:

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

30.4 Economic Contribution Claim by Community Estate against Husband's Separate Estate:

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

30.5 Economic Contribution Claim by Wife's Separate Estate against Husband's Separate Estate:

Description of basis of claim: _____

Attorney/Client-Privileged Information

Amount claimed: \$ _____

31. Separate Assets of Wife

31.1 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 _____

31.2 Wife's Separate Reimbursement Claim against Community Estate:

Description of basis of claim: _____

Amount claimed: \$ _____

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

Description of basis of claim: _____

Amount claimed: \$ _____

31.4 Wife's Separate Economic Contribution Claim against Community Estate:

Description of basis of claim: _____

Attorney/Client-Privileged Information

Amount claimed: \$ _____

31.5 Wife's Separate Economic Contribution Claim against Husband's Separate Estate:

Description of basis of claim: _____

Amount claimed: \$ _____

32. Liabilities of Wife's Separate Estate

32.1 Liabilities:

a. Description of liability: _____

Date of liability: _____

How liability acquired: _____

Amount of liability: \$ _____ as of _____

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

Description of basis of claim: _____

Attorney/Client-Privileged Information

Amount claimed: \$ _____

32.3 Community Reimbursement Claim against Wife's Separate Estate:

Description of basis of claim: _____

Amount claimed: \$ _____

32.4 Economic Contribution Claim by Community Estate against Wife's Separate Estate:

Description of basis of claim: _____

Amount claimed: \$ _____

32.5 Economic Contribution Claim by Husband's Separate Estate against Wife's Separate Estate:

Description of basis of claim: _____

Amount claimed: \$ _____

33. Children's Property

33.1 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: _____

33.2 529 Plans:

a. Institution or entity administering the plan: _____

Attorney/Client-Privileged Information

Designated beneficiary: _____

Is the plan a prepaid plan or a savings plan? _____

Value of assets in the plan: \$ _____ as of _____

33.3 Other Property: _____

34. 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 _____

35. 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 _____