

**Information & Instructions: Inventory and appraisal and proposed division of the community estate**

**PREVIEW**

1. The purpose of an Inventory and Appraisal is to obtain a listing of all of the assets owned by the parties.
2. The inventory should contain an objective evaluation of the fair market value of the assets.
3. Frequently one party may have a superior knowledge of the estate and its value. Accordingly, without the use of an inventory, the other party would be at a severe disadvantage during settlement negotiations concerning the issue of property settlement.
4. Furthermore, if the parties have been separated for an extended period of time, the estate and its valuation may have changed during the separation period. Accordingly, an inventory would be necessary to apprise the Court, attorneys and all parties thereto of the current valuation of the estate.
5. Previously inventories were filed with the court, now each party provides their inventory to the opposing counsel and, if necessary, the inventory may be introduced at trial.

**Form: Instructions for completing inventory and appraisal and proposed division of the community estate**

**INSTRUCTIONS FOR COMPLETING THE INVENTORY AND APPRAISEMENT**

**YOU MUST LIST AND DISCLOSE ALL OF THE PROPERTY INCLUDING BUT NOT LIMITED TO: COMMUNITY PROPERTY ONLY. INTANGIBLE PROPERTY WHETHER THE ITEM IS IN YOUR POSSESSION OR IN THE POSSESSION OF YOUR SPOUSE.**

**1. Community Real Property:**

This is land and/or residences purchased since the date of marriage. Real property or land, including residences, farms, recreational property (deer leases, "weekend" property) whether developed or not, and should include the address of the property, the complete legal description as it appears on the deed, and the name on the title to such property. Also include your opinion as to the fair market value, the monthly payments, and the name and address of the mortgage company.

**2. Community Vehicles:**

These are motorized vehicles of any kind purchased since the date of marriage. Include all motorized vehicles, such as automobiles, trucks, RV's, boats, 3-wheelers, etc., the VIN number, and the name of the person who currently drives each vehicle. Also include the VIN number or identification number and the name and address of the lien holder, if any, as well as any amount owing.

**3. Community Funds on Deposit in Financial Institutions (not employment-related):**

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These are funds such as salaries, bonuses, commissions, expense account reimbursements, interest from trust accounts, etc., which were earned and/or obtained since the date of marriage. Include all banks account numbers and the last known balance of each, regardless of whose name the account is in, including certificates of deposit, IRA accounts, checking and savings accounts, etc. Do not include any savings or other accounts which exist by way of your employment or your spouse's employment.

#### 4. Community Funds on Deposit in Employment-Related Institutions:

These are funds which have accumulated by way of your employment of your spouses' employment since the date of marriage. Include pension plans, 401K plans, stock purchase plans, profit sharing plans, deferred payment plans, etc., the account number, the exact name of each plan which exists through your employment or that of your spouse.

#### 5. Community Household Furniture, Furnishings, Goods and Appliances:

This is household furnishings and accessories purchased or obtained since the date of marriage. List all household furnishings, etc., regardless of who is in possession of the property. Fair market value would be the price you would place on the item of property if you were going to sell it in a garage sale. Also include the amount owing, if any, on each item.

#### 6. Community Collectibles:

Items collected or obtained or purchased since the date of marriage. List all collectible items which will increase in value, such as coin collections, book collections, antiques, etc., your opinion as to the fair market value, and the amount owing, if any.

#### 7. Community Recreational, Sport and Hobby Equipment:

These are items used for recreational and/or hobby purposes which have been purchased or obtained since the date of marriage. List all equipment or items used for recreational purposes, such as camping equipment, fishing equipment, painting or sculpturing equipment, etc., your opinion as to the fair market value, and the amount owing, if any.

#### 8. Community Lawn and Garden Equipment and Tools:

This is equipment used for the maintenance and care of lawns, auto maintenance, building maintenance, etc., which have been obtained since the date of marriage. List all equipment used in the care or maintenance of gardens or lawns, pastures, etc., and all tools, whether used in relation to your employment or not, your opinion as to the fair market value, and the amount owing, if any.

#### 9. Separate Property:

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List all property, including real estate, which was owned by you or your spouse prior to the date of marriage, including gifts, inheritances, the proceeds of any trust accounts, etc.

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**10. Proposed Division of Community Estate:**

Provide a proposed division of the community property, including real estate, i.e., the way you would like to see the community property divided. Include in this proposed division employment benefits, if any, and how you would like them divided.

**11. Division of Community Debts:**

Provide a proposed division of the community debts and liabilities, including the payment of credit card debts, i.e. the way you would like to see the community debts divided.

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PLEASE RETURN THE COMPLETED FORM TO MY OFFICE AS SOON AS  
POSSIBLE.

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Form: Inventory and appraisement

# PREVIEW

NO. [Cause Number]

IN THE MATTER OF THE MARRIAGE OF  
[Petitioner Name], Petitioner

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§

IN THE DISTRICT COURT

v.

[Respondent Name], Respondent

[District] JUDICIAL DISTRICT

AND IN THE INTEREST OF:  
[CHILD NAME]

[SUIT COUNTY] COUNTY, TEXAS

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INVENTORY AND APPRAISEMENT OF

## Petitioner

This inventory is submitted by [Petitioner Name], and includes inventory and appraisement of community and separate assets and liabilities.

### Community Estate of the Parties

#### 1. Real Property

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The category includes all real property and such items in which there is any interest in mineral estates, recreational property, oil and gas properties and those items which were purchased by contract for deed.

#### 1.1 Real Estate

Street Address:	[Real Estate Address]
Property Location:	[County]
Improvements on Property:	[Improvements]
Legal Description:	[Legal Description]
Fair Market Value on Evaluation Date, [Date]:	[Amount]
Mortgage Company name and account number:	[Mortgage Company], Account Number: [Account Number]
Mortgage Balance on Evaluation Date, [Date]:	[Amount]
Net Equity:	[\$[Amount]]

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2. Cash and Account with Financial Institution

This category includes banking accounts, credit unions, and savings and loan associations, as well as balances of cash, travelers checks or money orders. Retirement accounts are not included in this

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category.

**Financial institution**

Address:	[Bank Address]
Account Number:	[Account Number]
Name on Account:	Petitioner
Type of Account (ck,sv,cd, etc.):	[Type of Account]
Person who can make withdrawals:	Petitioner
Balance on Date:	[Amount]

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**3. Accounts Receivable**

This category is for any receivable for personal reasons, and includes anticipated tax refunds.

Debtor or Receivable Name:	[Debtor Name]
Relationship (i.e., business, etc.):	[Relationship]
Purpose of Debt, loan or receivable:	[Loan Purpose]
Evidence in Writing	yes
Security for Debt or Receivable:	yes
Description of Security:	[Security]
Reasonably expected payments	yes
Amount still owed (balance):	[Amount]

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**4. Retirement Accounts**

Institution Name: [Bank]

Address:	[Address]
Account Name:	Petitioner
Account Number:	[Retirement Account Number]
Account Balance Date of Marriage:	[Amount]
Current Account Balance of [Date]:	[Amount]
Payee of Survivor Benefits:	Petitioner
Beneficiary:	[Beneficiary]

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**5. Company Retirement Benefits**

5.1 Retirement Benefits for Petitioner [Petitioner Name]

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Name and Address Plan Administrator:	[Name and address of plan administrator]
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Employee Name:	[Petitioner Name]
Employer Name:	[Employer]
Petitioner's starting date of creditable service:	[Date]
Petitioner's Percentage Vested	[Percentage Vested] %
Petitioner Designated Beneficiary:	[Designated Beneficiary]
Petitioner Survivor Payee:	[Payee of Survivor Benefits]
Description of Benefits:	[Description of Benefits]
Value of community interest in plan on date of retirement evaluation, [Date]:	[Amount]
Plan computation method:	[Computation Method]
Loan or offset:	Yes
Loan Details if any:	[Retirement Loan Details]
Loan Balance as of [Date]:	[Amount]

## 5.2 Retirement Benefits for Respondent [Respondent Name]

Name and Address Plan Administrator:	[Name and Address of Plan Administrator]
Employee Name:	[Respondent Name]
Employer Name:	[Employer]
Respondent's starting date of creditable service:	[Date]
Respondent's Percentage Vested	[Percentage Vested]
Respondent Designated Beneficiary:	[Designated Beneficiary]
Respondent Survivor Payee:	[Payee of Survivor Benefits]
Description of Benefits:	[Description of Survivor Benefits]
Value of community interest in plan on date of retirement evaluation, [Date]:	[Amount]
Plan computation method:	Computation Method]
Loan or offset:	yes
Loan Details if any:	[Details of Loan]
Loan Balance as of [Date]	[Amount]

## 6. Governmental Retirement Benefits

This category includes military, TV, service, federal, state or local governmental employment, and those covered by the Teacher's Retirement System or other public education entities)

### 6.1 Petitioner's Benefits under Governmental retirement system:

Employee Name:	[Petitioner Name]
Employer (system, agency, branch of service):	[Government Employer]
Plan Name:	[Name of Plan]
Starting Date Creditable Service:	[Date]

Beneficiary:	[Beneficiary]
Payee of survivor benefits:	[Payee]
Benefit Description:	[Description of Benefits]
Value as of [Date]:	[Amount]

**6.2 Respondent's Benefits under Governmental retirement system:**

Employee Name:	[Respondent Name]
Employer (system, agency, branch of service):	[Government Employer]
Plan Name:	[Retirement Plan]
Starting Date Creditable Service:	[Date]
Beneficiary:	[Beneficiary]
Payee of survivor benefits:	[Payee]
Benefit Description:	[Description of Benefits]
Value as of [Date]:	[Amount]

**6.3 Other Deferred Compensation Benefits.**

This category includes such items as workers' compensation benefits, bonuses, stock options, renewal commissions or other items not yet received.

**7. Husband Deferred Compensation Assets**

Description: [Description]	Value: [Amount]
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**7.1 Wife Deferred Compensation Assets**

Description: [Deferred Compensation]	Value: [Amount]
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**8. Life Insurance and Annuities**

Insurance Company Name: [Insurance Company]

Policy Number:	[Policy Number]
Insured Name:	[Insured]
Policy Owner:	[Owner]
Type of Insurance (term/whole/universal):	term
Premium amount due on:	\$10 (monthly, quarterly, semiannually)
Issue Date:	[Date]
Policy Face Amount:	[Amount]
Cash Surrender Value Date of Marriage:	[Amount]
Current Cash Surrender Value:	[Amount]
Beneficiary:	[Beneficiary]
Policy Loan	yes/no

Loan Explanation:	[Loan Explanation]
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### 9. Publicly Traded Stocks, Bonds, and Other Securities

This category does not include any brokerage accounts or retirement accounts.

#### Security [Stock]

Security Name:	[Stock]
Number of shares owned:	Amount
Security Type (common, preferred stocks, bonds):	common/preferred, etc.
Certificate Numbers of owned security:	[Certificate Numbers]
Who has possession?	[Who Possesses Stock]
Current Market Value on [Date]	[Amount]
Exchange name, if any:	[Stock Exchange]
Is security pledged as collateral?	yes/no
Details of Pledge:	[Pledge Details]

### 10. Closely Held Business Interests

This category includes sole proprietorships, any professional practice or partnership, joint ventures, and corporate interests which are traded on the public markets.

#### 10.1 Business

Business Name: [Business Name]

Business Address:	[Address]
Type of Organization:	corporation
Percentage of Ownership:	%
Shares Owned (if corporation):	
Value on [Date]:	[Amount]

### 11. Vehicles

## THANK YOU

This category does not include vehicles owned by any business.

Vehicle [Make and Model]

Year, Make and Model:	[Make and Model]
Certificate of Title in Name of:	[Name of Title]
Who drives vehicle?	[Who Drives]
Finance Company:	[Finance Company]

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Vehicle identification number:	[VIN Number]
Balance Owed on [Date]:	[Amount]
Market Value:	[Amount]
Net Equity in Vehicle:	[Amount]

### 13. Household Furniture, Furnishings and Fixtures

#### 13.1 Husband Possession

Total Value: (attach separate sheet for items valued over \$[Amount])	[Amount]
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#### 13.2 Wife Possession

Total Value: (attach separate sheet for items valued over \$[Amount])	[Amount]
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### 13. Miscellaneous Sporting Goods and Firearms

#### 13.1 Husband Possession

Total Value: (attach separate sheet for items valued over \$50.00)	[Amount]
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#### 13.2 Wife Possession

Total Value: (attach separate sheet for items valued over \$50.00)	[Amount]
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### 14. Antiques, Art Work, and Collections

This category includes art works, paintings, collectibles, and antiques

#### 14.1 Husband Possession

Total Value: (attach separate sheet for items valued over \$50.00)	[Amount]
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Description: [Description]

#### 14.2 Wife Possession

Total Value: (attach separate sheet for items valued over \$50.00)	[Amount]
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Description: [Description]

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## 15. Electronics and Computers

### 15.1 Husband Possession

Total Value: (attach separate sheet for items valued over \$50.00)	[Amount]
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Description: [Description]

### 15.2 Wife Possession

Total Value: (attach separate sheet for items valued over \$50.00)	[Amount]
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Description: [Description]

## 16. Clothing and Jewelry

### 16.1 Husband Possession

Total Value: (attach separate sheet for items valued over \$50.00)	[Amount]
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### 16.2 Wife Possession

Total Value: (attach separate sheet for items valued over \$50.00)	[Amount]
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## 17. Livestock

This category includes cattle and horses.

### 17.1 Husband Possession

Total Value: (attach separate sheet for items valued over \$50.00)	[Amount]
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### 17.2 Wife Possession

Total Value: (attach separate sheet for items valued over \$50.00)	[Amount]
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## 18. Club Memberships

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Club Name: [Club]

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Value on [Date]:	[Amount]
How Value Determined:	[Method of Evaluation]

## 19. Frequent Flyer Mileage Accounts

19.1 Airline Name: [Airline]

Miles in Account on [Date]:	[Frequent Flyer Miles]
Value:	[Amount]

## 20. Miscellaneous Assets

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This category is self-descriptive and includes all other "assets" such as licenses, crops, cemetery lots, tax credits, generally with a value of more than \$50.00 and not listed in any other category.

### 20.1 In possession of husband:

Total Value (attach separate sheet for items valued over \$50.00):	[Amount]
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Description: [Description]

### 20.2 In possession of wife:

# THIS DOCUMENT

Total Value (attach separate sheet for items valued over \$50.00):	[Amount]
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Description: [Description]

## 21. Community Claim for Reimbursement

### 21.1 Reimbursement claim against husband's separate estate:

Claim Amount:	[Amount]
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# THANK YOU

Description: [Description]

### 21.2 Reimbursement claim against wife's separate estate:

Claim Amount:	[Amount]
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Description: [Description]

**22. Contingent assets and claims**

**PREVIEW**

This category includes claims not yet due, or which are the subject of lawsuits against a member of the community.

**22.1 Contingent Claim 1: [Description]**

Claim Amount:	[Amount]
Legal Representative:	[Legal Representative]
Representative Address:	[Address]
Cause Number, if any:	[Case Number]
County in which cause is pending:	[County]
Opposing Attorney:	[Opposing Attorney]
Opposing Attorney Address:	[Opposing Attorney Address]

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**23. Community Liabilities**

**23.1 Husband Attorney Fees**

Attorney's Fees through [Date]:	[Amount]
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**23.2 Wife Attorney Fees:**

Attorney's Fees through [Date]:	[Amount]
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**23.3 Husband Other Professional Fees:**

Other Professional Fees through [Date]:	[Amount]
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**23.4 Wife Other Professional Fees:**

Other Professional Fees through [Date]:	[Amount]
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**Credit Cards and Charge Accounts**

**23.5 Creditor Name: [Creditor Name]**

**THANK YOU**

Account Number:	[Account Number with Creditor]
Account Name or Names:	[Name on Account]
Balance on [Date]:	[Amount]

23.6

# PREVIEW

Previous Tax Liability:	[Amount]
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23.7

Current Year Tax Owed, Year of Divorce: [Tax Year Owed]	[Amount]
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### Other Liabilities Not Previously Listed

23. Other Liability 1:

Creditor Name:	[Other Loan Creditor]
Account Number, if any:	[Account Number]
Is liability evidenced in writing?	Yes/No
Current Amount Owed on [Date]:	[Amount]
Security, if any:	[Description of Security]

### 24. Reimbursement Claims Against Community Estate

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

Value:	[Amount]
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Description: [Description]

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

Value:	[Amount]
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Description: [Description]

### 25. Contingent Liabilities

This category includes such items as lawsuits against parties, guaranties, or other debts not yet due and not otherwise listed.

25.1 Contingent Liability 1

Creditor Name:	[Contingent Liability]
Who is Primarily Liable:	[Who is Liable]
Contingent Amount:	[Amount]
Description:	[Nature of contingent Liability]

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26. Assets Held as Fiduciary or Beneficiary

Asset held by either party as a fiduciary: [Name of Asset]

Asset Description:	[Description]
Name of Account:	[Name of Account]
Fiduciary Name and Title:	[Name and Title of Fiduciary]
Beneficial Interest Owner:	[Owner of Fiduciary Interest]
Value of Asset:	[Amount]

Asset held for either party as a beneficiary: [Asset]

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Asset Description:	[Description]
Name of Account:	[Account Name]
Fiduciary Name and Title:	[Name and Title of Fiduciary]
Beneficial Interest Owner:	[Name of Owner]
Value of Asset:	[Amount]

Custodial account (Texas Uniform Gifts to Minors Act)

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Financial Institution Name:	[UGMA Institution]
Name on Account:	[Name on Account]
Account Number:	[Account Number]
Deposit Balance:	[Amount]
Minor Beneficiary Name:	[Minor Name]
Minor Social Security Number:	[Social Security Number]
Administrator Name:	[Administrator Name]

Separate Estates of the Parties

27. Separate Estate of Husband

27.1 Husband Asset 1

THANK YOU

Description:	[Description]
Date of Acquisition:	[Date]
Means of Acquisition: (gift, devise, etc.)	
Value:	[Amount]

(separate sheet attached for additional assets)

Description:	[Description]
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Date Liability Accrued:	[Date]
How Liability acquired:	[How Acquired]
Amount of Liability:	[Amount]

**PREVIEW**

(separate sheet attached for additional liability)

**27.3 Husband's reimbursement claim against community estate:**

Value:	[Amount]
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**27.4 Husband's reimbursement claim against wife's separate estate:**

Value:	[Amount]
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**27.5 Community reimbursement claim against husband's separate estate:**

Value:	[Amount]
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**27.6 Wife's reimbursement claim against husband's separate estate:**

Value:	[Amount]
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**28. SEPARATE ESTATE OF WIFE**

**28.1 Wife Assets**

**THIS DOCUMENT**

Description:	[Description]
Date of Acquisition:	[Date]
Means of Acquisition: (gift, devise, etc.)	
Value:	[Amount]

(separate sheet attached for additional assets)

**Wife Liability**

Description:	[Description]
Date Liability Accrued:	[Date]
How Liability acquired:	[How Acquired]
Amount of Liability:	[Amount]

**THANK YOU**

(separate sheet attached for additional liability)

**28.3 Wife's reimbursement claim against community estate:**

Value:	[Amount]
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28.4 Wife's reimbursement claim against husband's separate estate:

Value:	[Amount]
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28.5 Community reimbursement claim against wife's separate estate:

Value:	[Amount]
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28.6 Husband's reimbursement claim against wife's separate estate:

Value:	[Amount]
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I, [Name], upon my oath, state that this inventory contains a full and complete statement of all community and separate property in my possession, subject to my control, or of which I am aware, with the values stated herein; and a complete list of all debts or liabilities of which I am aware to be separate or community obligations.

This affidavit is made by me with certain reservations and qualifications in that no omission from here is intentional but was made in good faith and no fraud was intended by me and that there may be omitted assets or liabilities of which only my spouse is aware and my omission cannot be construed as any waiver of my interest therein.

SIGNED on \_\_\_\_\_.

\_\_\_\_\_  
[Name]

State of Texas  
County of \_\_\_\_\_

# THANK YOU

Subscribed and sworn to before me by \_\_\_\_\_ on \_\_\_\_\_.

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

Notary's typed or printed name  
My commission expires: \_\_\_\_\_

[or Notary's Stamp]

## CERTIFICATE OF SERVICE

I certify that a true and correct copy of the foregoing has been served upon all attorneys of record and any parties who are not represented by an attorney on \_\_\_\_\_.

**Attorney for:** Other attorney's client's name

**Attorney's name:** Other attorney's name

**Attorney's address:** Other attorney's address

**Type of Service:**

\_\_\_ U.S. Mail, certified return receipt requested no. \_\_\_\_\_.

\_\_\_ U.S. Mail, first class.

\_\_\_ Hand delivery by [name of delivery service]: \_\_\_\_\_.

\_\_\_ Facsimile transmission to \_\_\_\_\_ [fax number] before 5 p.m.

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\_\_\_\_\_  
[Attorney's name]

State of Texas

County of \_\_\_\_\_

# THIS DOCUMENT

This instrument was acknowledged before me on \_\_\_\_\_, by [Name of person giving the acknowledgement.]

Subscribed and sworn to before me by \_\_\_\_\_ on \_\_\_\_\_.

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

# THANK YOU

\_\_\_\_\_  
Notary's typed or printed name  
My commission expires: \_\_\_\_\_

[or Notary's Stamp]

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