

**EXHIBIT A**

**NO.**

**IN THE MATTER OF  
THE MARRIAGE OF**

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§  
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§  
§  
§

**IN THE DISTRICT COURT**

**NAME  
AND  
NAME**

**\_\_\_\_ JUDICIAL DISTRICT**

**BEXAR COUNTY, TEXAS**

**INVENTORY AND APPRAISEMENT OF \_\_\_\_\_**

\_\_\_\_\_, Petitioner, submits this Inventory and Appraisement of all assets and liabilities, community and separate estates, as follows:

**Community Estate of the Parties**

**1. Real Property: Address here**

**Legal Description of property**

Current fair market value: \$  
Current mortgage balance: \$  
Other lien against the property: \$  
Current net equity in property: \$

**2. Cash and Accounts with Financial Institutions**

Name of financial institution:  
Name on Account:  
Account number:  
Account balance as of\_\_\_\_\_, 20\_\_: \$

**3. Brokerage and Mutual Fund Accounts**

Name of brokerage firm or mutual fund:  
Address of firm:  
Name account held in:  
Account number:  
Margin loan balance as of\_\_\_\_\_, 20\_\_: \$

**4. Publicly Traded Stocks, Bonds, and Other Securities (include securities not in a brokerage account, mutual fund, or retirement fund)**

Name of security:

Number of shares:  
Type of security:  
Certificate numbers:  
In possession of:  
Date acquired:  
Current market value: \$  
Value of community interest: \$

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

Name of company:  
Date of option:  
Vesting schedule:  
Number of options:  
Are the options exercisable?  Yes  No  
Are the options registered:  Yes  No  
Current stock price: \$  
If purchased, total purchase price of option contract: \$  
Current net market value as of \_\_\_\_\_20\_\_ : \$  
Value of community interest as of \_\_\_\_\_ 20\_\_ : \$

**6. Bonuses**

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

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

Name of business:  
Address of business:  
Type of business organization:  
Percentage of ownership:  
Value as of \_\_\_\_\_, 20\_\_ : \$  
Balance of accounts receivable: \$  
Balance of liabilities: \$

**8. Non-military Retirement Benefits**

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:  
Designated beneficiary:  
Current account balance as of \_\_\_\_\_, 20\_\_ : \$  
Balance of loan against plan: \$  
Value of community interest in plan as of \_\_\_\_\_, 20\_\_ : \$

## **9. IRA/SEP**

Name of financial institution:  
Account Name:  
Account number:  
Payee of survivor benefits:  
Designated beneficiary:  
Current account balance as of \_\_\_\_\_, 20\_\_ : \$  
Value of community interest as of \_\_\_\_\_, 20\_\_ : \$

## **10. Military Benefits**

10.1 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:  
Monthly benefit payable: \$  
Value of community interest in plan as of \_\_\_\_\_, 20\_\_ : \$  
Percentage of plan that is community: \_\_\_\_\_%

## **11. Other Deferred Compensation Benefits (worker's compensation, disability benefits, other "special payments," and other forms of compensation)**

11.1 Husband – description of assets:  
Value: \$

11.2 Wife – description of assets:  
Value: \$

**12. Insurance and Annuities**

- 12.1 Name of insurance company:  
Policy number:  
Name if insured:  
Name of owner:  
Type of insurance (term/whole/universal):  
Amount of premiums: \$  
Date of issue:  
Face amount: \$  
Cash surrender value on date of marriage: \$  
Current case surrender value: \$  
Designated beneficiary:  
Balance of loan against policy: \$
  
- 12.2 Name of annuity company:  
Policy number:  
Name of annuitant:  
Name of owner:  
Type of annuity:  
Amount of premiums: \$  
Date of issue:  
Face amount: \$  
Designated beneficiary:  
Value on date of marriage: \$  
Current value as of \_\_\_\_, 20\_\_: \$  
Balance of loan against policy: \$  
Value of community interest as of \_\_\_\_, 20\_\_: \$

**13. Motor Vehicles, Boats, Mobile Homes, Trailers, etc.**

- 13.1 Year:  
Make:  
Model:  
Name on certificate of title:  
In possession of:  
Vehicle identification number:  
Name of creditor if loan against vehicle:  
Current balance of loan as of \_\_\_\_, 20\_\_: \$  
Current net equity in vehicle: \$
  
- 13.2 Year:  
Make:  
Model:  
Name on certificate of title:  
In possession of:

Vehicle identification number:  
Name of creditor if loan against vehicle:  
Current balance of loan as of \_\_\_\_, 20\_\_ : \$  
Current net equity in vehicle: \$

13.3 Year:  
Make:  
Model:  
Name on certificate of title:  
In possession of:  
Vehicle identification number:  
Name of creditor if loan against vehicle:  
Current balance of loan as of \_\_\_\_, 20\_\_ : \$  
Current net equity in vehicle: \$

**14. Money Owed to Me or My Spouse** (include any expected federal or state income tax refund but do include receivables connected with a business)

14.1 Name of debtor:  
Debtor's relationship to you:  
Is debt evidenced in writing? \_\_\_\_Yes \_\_\_\_No  
Is debt secured: \_\_\_\_Yes \_\_\_\_No  
Current loan amount owed as of \_\_\_\_, 20\_\_ : \$

**15. Household Furniture, Furnishings, Fixtures, Electronics and Computers, Jewelry, Sporting Goods and Firearms, Antique, Artwork and collections**

15.1 Attach Exhibit \_\_\_\_ which lists property in possession of the husband and provides a value for each item.

15.2 Attach Exhibit \_\_\_\_ which lists property in possession of the wife and provides a value for each item.

**16. Miscellaneous Assets** (include club memberships, travel award benefits, livestock, intellectual property, equipment, tools, leases, cemetery plots, season tickets, etc.)

16.1 Attach Exhibit \_\_\_\_ which lists things in possession of the husband and provides a value for each item.

16.2 Attach Exhibit \_\_\_\_ which lists things in possession of the wife and provides a value for each item.

**17. Community Liabilities**

17.1 Attach Exhibit \_\_\_\_ which lists the following as to each credit card and charge account:

- a. Name of creditor:
  - b. Account number:
  - c. Name(s) on account:
  - d. Current balance as of \_\_\_\_, 20\_\_: \$
  - e. Balance as of date of separation: \$
- 17.2 Amount owed for federal, state and local taxes in previous years: \$  
Amount owed for current year 20\_\_: \$
- 17.3 Attorney's fees in this case:
- a. Husband as of \_\_\_\_, 20\_\_: \$
  - b. Wife as of \_\_\_\_, 20\_\_: \$
- 17.4 Other Liabilities – Attach Exhibit \_\_\_\_ and for each liability provide the following information
- a. Name of creditor:
  - b. Account number:
  - c. Party incurring liability:
  - d. Is loan evidenced in writing? \_\_\_\_Yes \_\_\_\_No
  - e. Current balance as of \_\_\_\_, 20\_\_: \$
  - f. Security, if any:

**Separate Property of the Parties**

**18. Separate Assets of Husband** (generally defined as assets owned before marriage or assets acquired during marriage by gift or inheritance or as a result of personal injury)

- 18.1 Description of asset:  
Date property acquired:  
How acquired (by gift, devise or descent or owned before marriage):  
Value as of \_\_\_\_, 20\_\_: \$

**19. Separate Assets of Wife** (generally defined as assets owned before marriage or assets acquired during marriage by gift or inheritance or as a result of personal injury)

- 19.1 Description of asset:  
Date property acquired:  
How acquired (by gift, devise or descent or owned before marriage):  
Value as of \_\_\_\_, 20\_\_: \$

**SUMMARY**

**Community Property**

|   | <u>Net Value:</u> |
|---|-------------------|
| 1. Real Property                        | \$                |
| 2. Cash and accounts                    | \$                |
| 3. Brokerage & Mutual funds             | \$                |
| 4. Stocks & Bonds                       | \$                |
| 5. Stock Options                        | \$                |
| 6. Bonuses                              | \$                |
| 7. Businesses                           | \$                |
| 8. Non-military retirement              | \$                |
| 9. IRA/SEP                              | \$                |
| 10. Military retirement                 | \$                |
| 11. Insurance/annuities                 | \$                |
| 12. Motor vehicles, boats, mobile homes | \$                |
| 13. Money owed to spouse(s)             | \$                |
| 14. Furniture, furnishing, appliances   | \$                |
| 15. Jewelry                             | \$                |
| 16. Miscellaneous                       | \$                |
| <b>TOTAL VALUE COMMUNITY</b>            | <b>\$</b>         |

**Verification**

I, \_\_\_\_\_, state on oath that, to the best of my knowledge and belief, this inventory and appraisal contains:

1. A 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 nor subject to my control that I claim or admit are my or my spouse's separate property and estate, with values thereof; and
3. A full and complete list of the debts 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.

\_\_\_\_\_  
CLIENT NAME HERE

SUBSCRIBED AND SWORN to before me the undersigned notary public on \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
NOTARY PUBLIC, STATE OF TEXAS  
My Commission Expires: \_\_\_\_\_  
ID No. \_\_\_\_\_