		CAUSE N	NO		
	IN THE MATTER OF THE MARRIAGE OF			\$ \$ \$	IN THE DISTRICT COURT
			and	§	505TH JUDICIAL DISTRICT
				§ §	
				§	FORT BEND COUNTY, TEXAS
		SWORN INV	ENTOR	RY AN	ID APPRAISEMENT
			_, the \Box	Petitio	ner / □Respondent, files this sworn
	ntory and llows:	d appraisement of al	l assets a	nd liał	pilities, community and separate estates,
CON	MMUNI	TY ESTATE OF T	HE PAF	RTIES	}
1.	REAI	_ PROPERTY			
	1.1.	Street address:			
					ny:
		Current fair market	value: \$		
		Mortgage or Lien of	wed: \$		as of
		Name(s) on mortga	ge:		
		Account No			Is this a VA loan? □Yes / □No
	1.2.	Street address:			
		Description of imp	rovement	ts, if a	ny:
		Current fair market	value: \$		
					as of
					Is this a VA loan? ☐ Yes / ☐ No

Sworn Inventory of _____

Page 1 of 18

2. CASH AND ACCOUNTS WITH FINANCIAL INSTITUTIONS Name of Financial Institution: 2.1. Account Number: Type of Account: \square Checking / \square Savings / \square IRA / \square Money Market ☐ Trust / ☐ Stock Trading / ☐ Certificate of Deposit Name(s) on account: Balance: \$______as of _____ 2.2. Name of Financial Institution: Account Number: Type of Account: □Checking / □Savings / □IRA / □Money Market □ Trust / □Stock Trading / □Certificate of Deposit Name(s) on account: Balance: \$ as of 2.3. Name of Financial Institution: Account Number: ___ Type of Account: \square Checking / \square Savings / \square IRA / \square Money Market ☐ Trust / ☐ Stock Trading / ☐ Certificate of Deposit Name(s) on account: Balance: \$ as of 2.4. Name of Financial Institution: Account Number: Type of Account: \square Checking / \square Savings / \square IRA / \square Money Market ☐ Trust / ☐ Stock Trading / ☐ Certificate of Deposit Name(s) on account: Balance: \$ as of 2.5. Name of Financial Institution: Account Number: Type of Account: ☐ Checking / ☐ Savings / ☐ IRA / ☐ Money Market ☐ Trust / ☐ Stock Trading / ☐ Certificate of Deposit Name(s) on account: Balance: \$ as of _____

3. ACCOUNTS RECEIVABLE

Sworn Inventory of _____

	Name of Debtor:			
	Debtor's Relationship to you:			
	Purpose of Loan:			
	Is the debt evidenced in writing? ☐ Yes / ☐ No - If "Yes" attach a copy			
	Is the debt secured? ☐ Yes / ☐ No - If "Yes" describe:			
	Current loan balance: \$as of			
) <u>.</u>	Name of Debtor:			
	Debtor's Relationship to you:			
	Purpose of Loan:			
	Is the debt evidenced in writing? \square Yes / \square No - If "Yes" attach a copy			
	Is the debt secured? □Yes / □No - If "Yes" describe:			
	Current loan balance: \$as of			
	Name of Debtor:			
	Debtor's Relationship to you:			
	Purpose of Loan:			
	Is the debt evidenced in writing? ☐ Yes / ☐ No - If "Yes" attach a copy			
	Is the debt secured? □Yes / □No - If "Yes" describe:			
	Current loan balance: \$as of			
	Name of Debtor:			
	Debtor's Relationship to you:			
	Purpose of Loan:			
	Is the debt evidenced in writing? \square Yes / \square No - If "Yes" attach a copy			
	Is the debt secured? □Yes / □No - If "Yes" describe:			
	Current loan balance: \$ as of			

4. RETIREMENT ACCOUNTS

4.1.	Name of Financial Institution:				
	Account Number:				
	Type of Account: $\Box 401 \text{K} / \Box \text{KEOGH} / \Box \text{Defined Benefits}$				
	Name(s) on account:				
	Current Balance: \$	(attach most recent statement)			
		(if more than \$0 attach proof)			
4.2.	Name of Financial Institution:				
	Account Number:				
	Type of Account: $\Box 401 \text{K} / \Box \text{KEOGH} / \Box \text{Defined Benefits}$				
	Name(s) on account:				
	Payee of survivor benefits:				
	Current Balance: \$	(attach most recent statement)			
		(if more than \$0 attach proof)			
4.3.	Name of Financial Institution:				
	Account Number:				
	Type of Account: $\Box 401 \text{K} / \Box \text{KEOGH} / \Box \text{Defined Benefits}$				
	Name(s) on account:				
	Payee of survivor benefits:				
		(attach most recent statement)			
	Value on date married: \$	(if more than \$0 attach proof)			
4.4.	Name of Financial Institution:				
	Account Number:				
	Type of Account: □401K / □KEOGH / □Defined Benefits				
	Name(s) on account:				
	Current Balance: \$	(attach most recent statement)			
	Value on date married: \$	(if more than \$0 attach proof)			

5. COMPANY AND/OR GOVERNMENT RETIREMENT BENEFITS

1	Employer/Sponsor:					
	Plan Administrator:					
	Plan type: Company Government Military Rail Road Other					
	Employee Starting Date:					
	☐ Years / ☐ Months credible service - current:					
	☐ Years / ☐ Months credible service - on date of marriage:					
	Percentage employee is vested:					
	Is there a loan against this plan? □Yes / □No; If "Yes" balance\$					
	Current value of plan: \$attach most recent statement					
1	Employer/Sponsor:					
	Plan Administrator:					
	Plan type: Company Government Military Rail Road Other					
	Employee Starting Date:					
	☐ Years / ☐ Months credible service - current:					
	☐ Years / ☐ Months credible service - on date of marriage:					
	Percentage employee is vested:					
	Is there a loan against this plan? ☐ Yes / ☐ No; If "Yes" balance\$					
	Current value of plan: \$attach most recent statement					
1	Employer/Sponsor:					
	Plan Administrator:					
	Plan type: Company Government Military Rail Road Other					
	Employee Starting Date:					
	☐ Years / ☐ Months credible service - current:					
	☐ Years / ☐ Months credible service - on date of marriage:					
	Percentage employee is vested:					
	Is there a loan against this plan? \square Yes / \square No; If "Yes" balance\$					
	Current value of plan: \$attach most recent statement					

6.	HUS	BAND'S OTHER DEFERRED COMPENSATION BENEFITS
	6.1	Description of benefits::
		Value: Vesting date:
		Is Husband vested? \square Yes \square No; If "No" what event triggers vestment?
	6.2	Description of benefits::
		Value: Vesting date:
		Is Husband vested? ☐ Yes ☐ No; If "No" what event triggers vestment?
7.	WIF	E'S OTHER DEFERRED COMPENSATION BENEFITS
	7.1	Description of benefits::
		Value: Vesting date:
		Is Wife vested? ☐ Yes ☐ No; If "No" what event triggers vestment?
	7.2	Description of benefits::
		Value: Vesting date:
		Is Wife vested? ☐ Yes ☐ No; If "No" what event triggers vestment?
8.	LIFE I	NSURANCE AND ANNUITIES
	8	Company Name:
		Policy type: Term Whole Life Universal Annuity Other Name
		of Insured:Owner: _Yes _No
		Beneficiary: Owner: \(\text{Owner: } \(\text{Owner: } \)
		Monthly Premium \$Next payment due:
		Date issued: Face Value: \$
		Cash surrender value on date of marriage: \$
		Current cash surrender value: \$
		Is there a loan against? \(\text{Yes} \) \(\text{No If "Yes" what is owed: } \)

1	Company Name:			
	Policy type: □Term □Whole Life	☐Universal ☐Annuity ☐Other Name		
	of Insured:	Owner: □Yes □No		
	Beneficiary:	Owner: 🗆 Yes 🗆 No		
	Monthly Premium \$	Next payment due:		
	Date issued:	Face Value: \$		
	Cash surrender value on date of man	riage: \$		
	Current cash surrender value: \$			
		o If "Yes" what is owed: \$		
8	Company Name:			
		☐Universal ☐Annuity ☐Other Name		
	of Insured:	Owner: \(\subseteq \text{Yes} \subseteq \text{No} \)		
	Beneficiary:	Owner: 🗆 Yes 🗀 No		
	Monthly Premium \$	Next payment due:		
	Date issued:	Face Value: \$		
	Cash surrender value on date of man	riage: \$		
	Current cash surrender value: \$			
		o If "Yes" what is owed: \$		
¥	Company Name:			
	Policy type: □Term □Whole Life	☐Universal ☐Annuity ☐Other Name		
	of Insured:	Owner: \(\subseteq \text{Yes} \subseteq \text{No}		
	Beneficiary:	Owner: \(\subseteq \text{Yes} \(\subseteq \text{No} \)		
	Monthly Premium \$	Next payment due:		
	Date issued:	Face Value: \$		
	Cash surrender value on date of marriage: \$			
		o If "Yes" what is owed: \$		

9. PUBLICLY TRADED STOCKS, BONDS, AND OTHER SECURITIES 9. Security Name: Security type: Stock Futures Treasury Bills Bonds Options Certificate numbers: Current Market Value of all shares /contracts controlled: \$ Who has possession: ____Exchange listed: ____ Pledged?: \(\text{Yes} \) \(\text{No If "Yes", give details:} \) 92 Security Name: Security type: Stock Futures Treasury Bills Bonds Options Certificate numbers: Current Market Value of all shares /contracts controlled: \$ Who has possession: Exchange listed: Pledged?: Tes No If "Yes", give details: 93 Security Name: Security type: Stock Futures Treasury Bills Bonds Options Certificate numbers: Current Market Value of all shares /contracts controlled: \$ Who has possession: Exchange listed: Pledged?: Tes No If "Yes", give details: 9.4 Security Name: Security type: Stock Futures Treasury Bills Bonds Options Certificate numbers: Current Market Value of all shares /contracts controlled: \$ Who has possession:_____Exchange listed: _____ Pledged?: Tes No If "Yes", give details:

10. CLOSELY HELD BUSINESS INTERESTS

	10.1	Name of Business	<u> </u>				
		□Sole Proprietors	hip Partnership	□d/b/a	□LLC □nc □PA/PC Date		
		Business began:			Percentage owned:		
		Estimated Value: \$	8		as of		
	10.2		Name of Business:				
		□Sole Proprietors	hip □Partnership	□d/b/a	□LLC □nc □PA/PC Date		
					Percentage owned:		
		Estimated Value: \$	<u>S</u>		as of		
				~			
11.	MOT	OR VEHICLES, BO	DATS, AIRPLAN	ES, CYC	CLES, ETC.		
	11.1	Year:	Make:		Model:		
					Plate:		
					ect #:		
					Value: \$		
	11.2	Year:	Make:		Model:		
					Plate:		
					ect #:		
					Value: \$		
	11.3	Year:	Make:		Model:		
					Plate:		
		_			ect #:		
					Value: \$		

	Year: N	Make:	Model:	
	Name on Title:		Plate:	
	In possession of:	VIN:		
	Lien Holder:		Acct #:	
	Amt owed: \$	as of	Value: \$	
1.5	Year: N	Make:	Model:	
	Name on Title:		Plate:	
	In possession of:		/IN:	
	Lien Holder:		Acct #:	
	Amt owed: \$	as of	Value: \$	
1.6	Year: N	Make:	Model:	
	Name on Title:		Plate:	
	In possession of:		/IN:	
	Lien Holder:		A 4 11	
	Eith Holder.		Acct #:	
AISC	Amt owed: \$	as of	Acct #:Value: \$ S POSSESSION	
2.12.22.3		as of	Value: \$ S POSSESSION	
2.1 2.2 2.3 2.4 2.5 2.6	Amt owed: \$	as of	Value: \$ S POSSESSION	
2.1 2.2 2.3 2.4 2.5 2.6 2.7	Amt owed: \$	as of	Value: \$ S POSSESSION	
2.1 2.2 2.3 2.4 2.5 2.6 2.7 2.8 2.9	Amt owed: \$	as of	Value: \$ S POSSESSION	
2.1 2.2 2.3 2.4 2.5 2.6 2.7 2.8 2.9 2.10	Amt owed: \$	as of	Value: \$ S POSSESSION	

12.

Sworn Inventory of _____

13.	MISO	CELLANEOUS ITEMS	IN WIFE'S POS	SESSION
	13.1	Furniture:	\$	
	13.2	Antiques:	\$	
	13.3		\$	
	13.4	Household misc.	\$	
	13.5	Firearms:	\$	
	13.6	Sporting Equipment:	\$	
	13.7	Hand Tools:	\$	
	13.8	Power Tools:	\$	
	13.9	Garden Tools/Equip.	\$	
	13.10	Collectibles:	\$	
	13.11	Jewelry/watches:		
	13.12	2 Clothing/furs	\$	
14.		TOCK		
	14.1	Description:		
		In possession of: ☐Hu	isband \square wife	value: \$
	14.2	Description:		
		In possession of: ☐Hu	ısband □Wife	Value: \$
	14.3	Description:		
		In possession of: ☐Hu		
	14.4	Description:		
		In possession of: ☐Hu	ısband □Wife	Value: \$
	14.5	Description:		
		In possession of: ☐Hu	ısband □Wife	Value: \$

15.	TRAVEL ACCOUNTS
15	Description:
	In possession of: Husband Wife Value: \$
	Account/Membership #:
15	Description:
	In possession of: Husband Wife Value: \$
	Account/Membership #:
15.	Description
13.	Description: In possession of: ☐Husband ☐ Wife Value: \$
	Account/Membership #:
	Tablound Michigan Pini
15	Description:
	In possession of: Husband Wife Value: \$
	Account/Membership #:
16.	CLUB MEMBERSHIPS
16	Name of club:
	Value: \$Account/Membership #:
	Method of valuation:
16.2	Name of club:
10.2	Value: \$Account/Membership #:
	Method of valuation:
1.0	
16.3	Name of club:
	Value: \$Account/Membership #: Method of valuation:
	ivicinou or varuation.

17. MISCELLANEOUS ASSETS NOT OTHERWISE DISCLOSED

17.1	Description:	
	In possession of: ☐Husband ☐Wife	Value: \$
17.2	Description:	
	In possession of: ☐Husband ☐Wife	Value: \$
17.3	Description:	
	In possession of: ☐Husband ☐Wife	Value: \$
17.4	Description:	
	In possession of: ☐Husband ☐Wife	Value: \$
17.5	Description:	
	In possession of: ☐Husband ☐Wife	
17.6	Description:	
17.0	In possession of: ☐Husband ☐Wife	
17.7	Description:	
17.7	In possession of: ☐Husband ☐Wife	
17.8	Description:	
17.0	In possession of: ☐Husband ☐Wife	Value: \$
17.9	Description:	
17.7	In possession of: ☐Husband ☐Wife	Value: \$
17 10	Description	
17.10	Description: Husband □Wife	
17.11	_	
1/.11	Description:	Value: \$
17.10		
17.12	Description:	
	In possession of: \square Husband \square Wife	Value: \$

18. COMMUNITY CLAIM FOR REIMBURSEMENT

	18.1	Description:	
		Amt. Claimed: \$	Claimed against: □Husband □ Wife
		Details:	
	10.2	Description	
	18.2		
			Claimed against:
		Details:	
	18.3	Description:	
		Amt. Claimed: \$	Claimed against: ☐Husband ☐ Wife
		Details:	
	18.4	Description:	
	10.1	•	Claimed against: □Husband □ Wife
			onamica agamst. — Tasoana — Wife
		Details.	
19.	CREI	OIT CARDS ADN UNS	SECURED CHARGE ACCOUNTS
	19.1	Description:	
		Amt. owed: \$	Name on account: □Husband □ Wife
	19.2		
			Name on account: ☐Husband ☐ Wife
		Details:	
	19.3	Description:	
			Name on account: ☐Husband ☐ Wife
	10.4		
	19.4	A mt awad to	Nome on accounts Theshord TWife
			Name on account: ☐Husband ☐ Wife
		Details:	

CREDIT CARDS AND UNSECURED CHARGE ACCOUNTS (cont.)

	19.5	Description:
		Amt. owed: \$Name on account: ☐Husband ☐Wife
		Details:
	19.6	Description:
		Amt. owed: \$Name on account: ☐Husband ☐ Wife
		Details:
	19.7	Description:
		Amt. owed: \$Name on account: _Husband _Wife
		Details:
	19.8	Description:
		Amt. owed: \$Name on account: ☐Husband ☐Wife
		Details:
	19.9	Description:
		Amt. owed: \$Name on account: _Husband _Wife
		Details:
	19.10	Description:
		Amt. owed: \$Name on account: ☐Husband ☐ Wife
		Details:
20.	FEDI	ERAL, STATE, AND LOCAL TAX LIABILITY
	20.1	Taxing Authority Name:
		Amt. owed for current year: \$
		Amt. owed for previous years: \$
	20.2	Taxing Authority Name:
		Amt. owed for current year: \$
		Amt. owed for previous years: \$

21. HUSBAND'S SEPARATE ESTATE

	Beschiption.		
		How acquired:	
	Value: \$	Liability, if any: \$	
	Details of why this prope	rty is separate:	
21.2	Description:		
		How acquired:	
	Value: \$	Liability, if any: \$	
	Details of why this prope	rty is separate:	
1.3		TT ' 1	
		How acquired:	
		Liability, if any: \$	
		rty is separate:	
VIFE	'S SEPARATE ESTATE		
2.1	Description:		
	Date acquired:	How acquired:	
	Date acquired:Value: \$		
	Date acquired:Value: \$	How acquired: Liability, if any: \$	
2.2	Date acquired: Value: \$ Details of why this prope	How acquired:Liability, if any: \$rty is separate:	
2.2	Date acquired: Value: \$ Details of why this prope Description:	How acquired: Liability, if any: \$	
22.2	Date acquired:	How acquired:Liability, if any: \$rty is separate:	

22.

WIFE'S SEPARATE ESTATE (cont.)

	22.3	Description:			
			How acquired:		
		Value: \$	Liability, if any: \$		
		Details of why this property is separate:			
23.	HUSB	JSBAND'S SEPARATE ESTATE CLAIMS			
	3.1	Claims against Community: \$			
		Details:			
	23.1	Claims against Wife's Separat	e Estate: \$		
		Details:			
24.	WIFE'	E'S SEPARATE ESTATE CLAIMS			
	11	Claims against Community: \$			
		Details:			
	24.1	Claims against Husband's Sep	parate Estate: \$		
		Details:			
25.	DEBTS NOT LISTED ABOVE				
	25.1	Description:			
		Amt. owed: \$	Name on account: ☐Husband ☐ Wife		
		Details:			
	52	Description:			
		Amt. owed: \$	Name on account: ☐Husband ☐ Wife		
		Details:			
	53	Description:			
		Amt. owed: \$	Name on account: ☐Husband ☐ Wife		
		Details:			

DEBTS NOT LISTED ABOVE (cont.)

Sworn Inventory of _____

25.4	Description:			
		Name on account: ☐Husband ☐ Wife		
	Details:			
		VERIFICATION		
STATE OI	FTEXAS §			
FORT BE	ND COUNTY §			
Ι,		_, state on oath that, to the best of my knowledge and		
		l appraisement contains:		
a.	•	list of all properties in my possession or subject to my belong to the community estate of me and my spouse, eof;		
b.	_	list of all properties in my possession or subject to my or admit as my or my spouse's separate property and es thereof; and		
c.	a full and comple indebtedness.	ete list of the debts that I claim are community		
inadvertend liabilities o	ce and not to mislead r	tory is not intentional but is done through mere my spouse. Furthermore, there may be other assets and ware, and their omission from this inventory should not terest in those items.		
SIGNED th	nisday of			
SIGNED u	nder oath before me thi	sday of, 20		
		Notary Public, State of Texas		

Page 18 of 18