

Client Name: \_\_\_\_\_

**CLIENT QUESTIONNAIRE – PRENUPTIAL AGREEMENT**

1. Answer all questions completely. If you need more space, please use additional paper and attach it to this questionnaire.
2. If a particular question does not apply, enter "n/a".
3. **CONFIDENTIALITY:** The information you enter in this questionnaire is confidential and protected by Attorney-Client Privilege. The information will not be disclosed to anyone outside of this office, except in the course of rendering legal services on your behalf or as otherwise provided by law.
4. **PROVIDE COPIES OF DOCUMENTATION TO SUPPORT EACH OF THE PROPERTY TYPES BELOW** i.e. deeds, mortgage statements, mortgage account history, financial account statements, property appraisals, financial statements, stock certificates, stock option agreements, articles of incorporation, insurance policies, recent credit/charge card statements, recent credit history, tax statements, other statements evidencing a debt or money owed

**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)

1.1. Street address: \_\_\_\_\_

County of location: \_\_\_\_\_

Description of improvements, if any: \_\_\_\_\_

Legal description: \_\_\_\_\_

Current fair market value (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

Name of mortgage company and account number, if any: \_\_\_\_\_

Current balance of mortgage (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

Other liens against property: \_\_\_\_\_  
\_\_\_\_\_

Current net equity in property:\$ \_\_\_\_\_

1.2. Street address: \_\_\_\_\_

County of location: \_\_\_\_\_

Description of improvements, if any: \_\_\_\_\_  
\_\_\_\_\_

Legal description: \_\_\_\_\_  
\_\_\_\_\_

Current fair market value (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

Name of mortgage company and account number, if any: \_\_\_\_\_  
\_\_\_\_\_

Current balance of mortgage (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

Other liens against property: \_\_\_\_\_  
\_\_\_\_\_

Current net equity in property:\$ \_\_\_\_\_

1.3. Street address: \_\_\_\_\_

County of location: \_\_\_\_\_

Description of improvements, if any: \_\_\_\_\_  
\_\_\_\_\_

Legal description: \_\_\_\_\_  
\_\_\_\_\_

Current fair market value (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

Name of mortgage company and account number, if any: \_\_\_\_\_  
\_\_\_\_\_

Current balance of mortgage (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

Other liens against property: \_\_\_\_\_  
\_\_\_\_\_

Current net equity in property: \$ \_\_\_\_\_

**2. Mineral Interests** (include any property in which the parties own the mineral estate, separate and apart from the surface estate, such as oil and gas leases; also include royalty interests, working interests, and producing and nonproducing oil and gas wells)

2.1. Name of mineral interest/lease/well: \_\_\_\_\_  
\_\_\_\_\_

Type of interest: \_\_\_\_\_

County of location: \_\_\_\_\_

Legal description: \_\_\_\_\_

Name of producer/operator: \_\_\_\_\_

Current value (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

2.2. Name of mineral interest/lease/well: \_\_\_\_\_  
\_\_\_\_\_

Type of interest: \_\_\_\_\_

County of location: \_\_\_\_\_

Legal description: \_\_\_\_\_

Name of producer/operator: \_\_\_\_\_

Current value (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

2.3. Name of mineral interest/lease/well: \_\_\_\_\_  
\_\_\_\_\_

Type of interest: \_\_\_\_\_

County of location: \_\_\_\_\_

Legal description: \_\_\_\_\_

Name of producer/operator: \_\_\_\_\_

Current value (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

**3. 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)

3.1. Cash on hand: \_\_\_\_\_

3.2. Traveler's checks: \_\_\_\_\_

3.3. Money orders: \_\_\_\_\_

3.4. Name of financial institution: \_\_\_\_\_

Account name: \_\_\_\_\_

Account number: \_\_\_\_\_

Type of account: (checking/savings/money market/certificate of deposit) \_\_\_\_\_

Name(s) on withdrawal cards: \_\_\_\_\_

Current account balance (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

3.5. Name of financial institution: \_\_\_\_\_

Account name: \_\_\_\_\_

Account number: \_\_\_\_\_

Type of account: (checking/savings/money market/certificate of deposit) \_\_\_\_\_

Name(s) on withdrawal cards: \_\_\_\_\_

Current account balance (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

3.6. Name of financial institution: \_\_\_\_\_

Account name: \_\_\_\_\_

Account number: \_\_\_\_\_

Type of account: (checking/savings/money market/certificate of deposit) \_\_\_\_\_

Name(s) on withdrawal cards: \_\_\_\_\_

Current account balance (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

3.7. Name of financial institution: \_\_\_\_\_

Account name: \_\_\_\_\_

Account number: \_\_\_\_\_

Type of account: (checking/savings/money market/certificate of deposit) \_\_\_\_\_

Name(s) on withdrawal cards: \_\_\_\_\_

Current account balance (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

**4. Brokerage/Mutual Fund Accounts**

4.1. Name of brokerage firm/mutual fund: \_\_\_\_\_  
\_\_\_\_\_

Address of brokerage firm/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 \_\_\_\_\_):

\_\_\_\_\_

4.2. Name of brokerage firm/mutual fund: \_\_\_\_\_

\_\_\_\_\_

Address of brokerage firm/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 \_\_\_\_\_):

\_\_\_\_\_

4.3. Name of brokerage firm/mutual fund: \_\_\_\_\_

\_\_\_\_\_

Address of brokerage firm/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 \_\_\_\_\_):

\_\_\_\_\_

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

5.1. Name of security: \_\_\_\_\_

Number of shares: \_\_\_\_\_

Type of security: [common stock/preferred stock/bond/other security]: \_\_\_\_\_

Certificate numbers: \_\_\_\_\_

In possession of: \_\_\_\_\_

Name of exchange on which listed: \_\_\_\_\_

Pledged as collateral? [Yes/No]

Current market value (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

5.2. Name of security: \_\_\_\_\_

Number of shares: \_\_\_\_\_

Type of security: [common stock/preferred stock/bond/other security]: \_\_\_\_\_

Certificate numbers: \_\_\_\_\_

In possession of: \_\_\_\_\_

Name of exchange on which listed: \_\_\_\_\_

Pledged as collateral? [Yes/No]

Current market value (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

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

6.1. 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: \$ \_\_\_\_\_

Current net market value (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

6.2. 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: \$ \_\_\_\_\_

Current net market value (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

## 7. Bonuses

7.1. Name of company: \_\_\_\_\_

Date bonus expected to be paid: \_\_\_\_\_

Anticipated amount of bonus: \$ \_\_\_\_\_

7.2. Name of company: \_\_\_\_\_



Date bonus expected to be paid: \_\_\_\_\_

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)

8.1. Name of business: \_\_\_\_\_

Address: \_\_\_\_\_

Type of business organization: \_\_\_\_\_

Percentage of ownership: \_\_\_\_\_

Number of shares owned (if applicable): \_\_\_\_\_

Value (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

Balance of accounts receivable if on cash accounting basis: \$ \_\_\_\_\_

Balance of liabilities if on cash accounting basis:  
<\$ \_\_\_\_\_ >

**9. Retirement Benefits**

9.A. *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))

9.A.1. Exact name of plan: \_\_\_\_\_

Name and address of plan administrator: \_\_\_\_\_

Employee: \_\_\_\_\_

Employer: \_\_\_\_\_

Starting date of creditable service: \_\_\_\_\_

Percentage employee is vested: \_\_\_\_\_

Account name: \_\_\_\_\_

Account number: \_\_\_\_\_

Account balance as of date of marriage: \$ \_\_\_\_\_

Payee of survivor benefits: \_\_\_\_\_

Designated beneficiary: \_\_\_\_\_

Current account balance (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

Balance of loan against plan: \$ \_\_\_\_\_

9.A.2. Exact name of plan: \_\_\_\_\_

Name and address of plan administrator: \_\_\_\_\_

Employee: \_\_\_\_\_

Employer: \_\_\_\_\_

Starting date of creditable service: \_\_\_\_\_

Percentage employee is vested: \_\_\_\_\_

Account name: \_\_\_\_\_

Account number: \_\_\_\_\_

Account balance as of date of marriage: \$ \_\_\_\_\_

Payee of survivor benefits: \_\_\_\_\_

Designated beneficiary: \_\_\_\_\_

Current account balance (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

Balance of loan against plan: \$ \_\_\_\_\_

9.B. *Defined Benefit Plan* (any plan that is not a defined contribution plan and that usually

involves payment of benefits according to a formula)

9.B.1. Exact name of plan: \_\_\_\_\_

Name and address of plan administrator: \_\_\_\_\_

Employee: \_\_\_\_\_

Employer: \_\_\_\_\_

Starting date of creditable service: \_\_\_\_\_

Percentage employee is vested: \_\_\_\_\_

Designated beneficiary: \_\_\_\_\_

Payee of survivor benefits: \_\_\_\_\_

Description of benefits: \_\_\_\_\_

9.B.2. Exact name of plan: \_\_\_\_\_

Name and address of plan administrator: \_\_\_\_\_

Employee: \_\_\_\_\_

Employer: \_\_\_\_\_

Starting date of creditable service: \_\_\_\_\_

Percentage employee is vested: \_\_\_\_\_

Designated beneficiary: \_\_\_\_\_

Payee of survivor benefits: \_\_\_\_\_

Description of benefits: \_\_\_\_\_

9.C. *IRA/SEP*

9.C.1. Name of financial institution: \_\_\_\_\_

Account name: \_\_\_\_\_

Account number: \_\_\_\_\_

Payee of survivor benefits: \_\_\_\_\_

Designated beneficiary: \_\_\_\_\_

Current account balance (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

9.C.2. Name of financial institution: \_\_\_\_\_

Account name: \_\_\_\_\_

Account number: \_\_\_\_\_

Payee of survivor benefits: \_\_\_\_\_

Designated beneficiary: \_\_\_\_\_

Current account balance (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

9.D. *Military Benefits*

9.D.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: \$ \_\_\_\_\_

9.D.2. 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: \$ \_\_\_\_\_

9.E. *Nonqualified Plans*

9.E.1. Name of financial institution: \_\_\_\_\_

Account name: \_\_\_\_\_

Account number: \_\_\_\_\_

Account balance as of date of marriage: \$ \_\_\_\_\_

Payee of survivor benefits: \_\_\_\_\_

Designated beneficiary: \_\_\_\_\_

9.E.2. Name of financial institution: \_\_\_\_\_

Account name: \_\_\_\_\_

Account number: \_\_\_\_\_

Account balance as of date of marriage: \$ \_\_\_\_\_

Payee of survivor benefits: \_\_\_\_\_

Designated beneficiary: \_\_\_\_\_

9.F. *Government Benefits* (civil service, teacher, railroad, state and local)

9.F.1. Name of plan: \_\_\_\_\_

Account name: \_\_\_\_\_

Account number: \_\_\_\_\_

Account balance as of date of marriage: \$ \_\_\_\_\_

Payee of survivor benefits: \_\_\_\_\_

Designated beneficiary: \_\_\_\_\_

9.F.2. Name of plan: \_\_\_\_\_

Account name: \_\_\_\_\_

Account number: \_\_\_\_\_

Account balance as of date of marriage: \_\_\_\_\_

Payee of survivor benefits: \_\_\_\_\_

Designated beneficiary: \_\_\_\_\_

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

Description of Asset	Value
_____	_____
_____	_____
_____	_____

**11. Insurance and Annuities**

11.A. *Life Insurance*

11.A.1. Name of insurance company: \_\_\_\_\_

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: \$ \_\_\_\_\_

11.A.2. Name of insurance company: \_\_\_\_\_

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: \$ \_\_\_\_\_

*11.B. Annuities*

11.B.1. Name of company: \_\_\_\_\_

Policy number: \_\_\_\_\_

Name of annuitant: \_\_\_\_\_

Name of owner: \_\_\_\_\_

Type of annuity: \_\_\_\_\_

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: \$ \_\_\_\_\_

11.B.2.

Name of company: \_\_\_\_\_

Policy number: \_\_\_\_\_

Name of annuitant: \_\_\_\_\_

Name of owner: \_\_\_\_\_

Type of annuity: \_\_\_\_\_

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: \$ \_\_\_\_\_

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

12.1. Year: \_\_\_\_\_

Make: \_\_\_\_\_

Model: \_\_\_\_\_

Name on certificate of title: \_\_\_\_\_

In possession of: \_\_\_\_\_

Vehicle identification number: \_\_\_\_\_

Name of creditor if loan against vehicle: \_\_\_\_\_

Current balance (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

Current net equity in vehicle: \$ \_\_\_\_\_

12.2. Year: \_\_\_\_\_

Make: \_\_\_\_\_

Model: \_\_\_\_\_

Name on certificate of title: \_\_\_\_\_

In possession of: \_\_\_\_\_

Vehicle identification number: \_\_\_\_\_

Name of creditor if loan against vehicle: \_\_\_\_\_

Current balance (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

Current net equity in vehicle: \$ \_\_\_\_\_

12.3. Year: \_\_\_\_\_

Make: \_\_\_\_\_

Model: \_\_\_\_\_

Name on certificate of title: \_\_\_\_\_

In possession of: \_\_\_\_\_

Vehicle identification number: \_\_\_\_\_

Name of creditor if loan against vehicle: \_\_\_\_\_

Current balance (as of \_\_\_\_\_):

\$ \_\_\_\_\_

Current net equity in vehicle: \$ \_\_\_\_\_

12.4.

Year: \_\_\_\_\_

Make: \_\_\_\_\_

Model: \_\_\_\_\_

Name on certificate of title: \_\_\_\_\_

In possession of: \_\_\_\_\_

Vehicle identification number: \_\_\_\_\_

Name of creditor if loan against vehicle: \_\_\_\_\_

Current balance (as of \_\_\_\_\_):

\$ \_\_\_\_\_

Current net equity in vehicle: \$ \_\_\_\_\_

**13. Money Owed to Me** (include any expected federal or state income tax refund but do not include receivables connected with a business)

13.1.

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 \_\_\_\_\_):

\$ \_\_\_\_\_

13.2. 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 \_\_\_\_\_):

\$ \_\_\_\_\_

**14. Household Furniture, Furnishings, and Fixtures** (attach separate sheet by room if necessary):

14.1.

Description of Asset

Value

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**15. Electronics and Computers** (attach separate sheet if necessary):

15.1.

Description of Asset

Value

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**16. Antiques, Artwork, and Collections** (include any works of art, such as paintings, tapestry, rugs, and coin or stamp collections) (attach separate sheet if necessary):

16.1.

Description of Asset

Value

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**17. Miscellaneous Sporting Goods and Firearms** (attach separate sheet if necessary):

17.1.

Description of Asset	Value
_____	_____
_____	_____
_____	_____

**18. Jewelry and Other Personal Items** (attach separate sheet if necessary):

18.1.

Description of Asset	Value
_____	_____
_____	_____
_____	_____

**19. Livestock** (include cattle, horses, and so forth) (attach separate sheet if necessary):

19.1.

Description of Asset	Value
_____	_____
_____	_____
_____	_____

**20. Club Memberships**

20.1. Name of club: \_\_\_\_\_

Name membership held in: \_\_\_\_\_

Account number: \_\_\_\_\_

Current value (as of \_\_\_\_\_):  
\$ \_\_\_\_\_

Method of valuation: \_\_\_\_\_

20.2. Name of club: \_\_\_\_\_  
 Name membership held in: \_\_\_\_\_  
 Account number: \_\_\_\_\_  
 Current value (as of \_\_\_\_\_):  
 \$ \_\_\_\_\_  
 Method of valuation: \_\_\_\_\_

**21. Travel Award Benefits** (include frequent-flyer mileage accounts)

21.1. Name of airline: \_\_\_\_\_  
 Account number: \_\_\_\_\_  
 Current number of miles (as of \_\_\_\_\_):  
 \_\_\_\_\_  
 Current value (if any): \$ \_\_\_\_\_

21.2. Name of airline: \_\_\_\_\_  
 Account number: \_\_\_\_\_  
 Current number of miles (as of \_\_\_\_\_):  
 \_\_\_\_\_  
 Value (if any): \$ \_\_\_\_\_

**22. Miscellaneous Assets** (include 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 inventory, estimated tax payments, tax overpayments, loss carry-forward deductions, lottery tickets/winnings, stadium bonds, stadium seat licenses, seat options, and season tickets) (attach separate sheet if necessary):

22.1.

Description of Asset	Value
_____	_____

\_\_\_\_\_  
\_\_\_\_\_

**23. Safe-Deposit Boxes**

23.1. Name of financial institution or other depository:

\_\_\_\_\_

Box number: \_\_\_\_\_

Names of persons with access to contents: \_\_\_\_\_

\_\_\_\_\_

Items in safe-deposit box: \_\_\_\_\_

\_\_\_\_\_

23.2. Name of financial institution or other depository:

\_\_\_\_\_

Box number: \_\_\_\_\_

Names of persons with access to contents: \_\_\_\_\_

\_\_\_\_\_

Items in safe-deposit box: \_\_\_\_\_

\_\_\_\_\_

23.3. Name of financial institution or other depository:

\_\_\_\_\_

Box number: \_\_\_\_\_

Names of persons with access to contents: \_\_\_\_\_

\_\_\_\_\_

Items in safe-deposit box: \_\_\_\_\_

\_\_\_\_\_

**24. Storage Facilities**

24.1. Name and location: \_\_\_\_\_

\_\_\_\_\_

Unit number: \_\_\_\_\_

Terms and length of lease: \_\_\_\_\_  
\_\_\_\_\_

Names of persons with access to contents: \_\_\_\_\_  
\_\_\_\_\_

Items in storage unit: \_\_\_\_\_  
\_\_\_\_\_

24.2. Name and location: \_\_\_\_\_  
\_\_\_\_\_

Unit number: \_\_\_\_\_

Terms and length of lease: \_\_\_\_\_  
\_\_\_\_\_

Names of persons with access to contents: \_\_\_\_\_  
\_\_\_\_\_

Items in storage unit: \_\_\_\_\_  
\_\_\_\_\_

24.3. Name and location: \_\_\_\_\_  
\_\_\_\_\_

Unit number: \_\_\_\_\_

Terms and length of lease: \_\_\_\_\_  
\_\_\_\_\_

Names of persons with access to contents: \_\_\_\_\_  
\_\_\_\_\_

Items in storage unit: \_\_\_\_\_  
\_\_\_\_\_

**25. Contingent Assets** (e.g., lawsuits by either party against third party)

25.1. Nature of claim: \_\_\_\_\_

Amount of claim: \$ \_\_\_\_\_

25.2. Nature of claim: \_\_\_\_\_  
Amount of claim: \$ \_\_\_\_\_

**26. Liabilities**

26.A. *Credit Cards and Charge Accounts*

26.A.1. Name of creditor: \_\_\_\_\_  
Account number: \_\_\_\_\_  
Name(s) on account: \_\_\_\_\_  
Current balance (as of \_\_\_\_\_):  
<\$ \_\_\_\_\_>  
Balance as of \_\_\_\_\_ [date of separation]:  
<\$ \_\_\_\_\_>

26.A.2. Name of creditor: \_\_\_\_\_  
Account number: \_\_\_\_\_  
Name(s) on account: \_\_\_\_\_  
Current balance (as of \_\_\_\_\_):  
<\$ \_\_\_\_\_>  
Balance as of \_\_\_\_\_ [date of separation]:  
<\$ \_\_\_\_\_>

26.A.3. Name of creditor: \_\_\_\_\_  
Account number: \_\_\_\_\_  
Name(s) on account: \_\_\_\_\_  
Current balance (as of \_\_\_\_\_):  
<\$ \_\_\_\_\_>  
Balance as of \_\_\_\_\_ [date of separation]:  
<\$ \_\_\_\_\_>



26.A.4. Name of creditor: \_\_\_\_\_  
Account number: \_\_\_\_\_  
Name(s) on account: \_\_\_\_\_  
Current balance (as of \_\_\_\_\_):  
<\$ \_\_\_\_\_>  
Balance as of \_\_\_\_\_ [date of separation]:  
<\$ \_\_\_\_\_>

26.A.5. Name of creditor: \_\_\_\_\_  
Account number: \_\_\_\_\_  
Name(s) on account: \_\_\_\_\_  
Current balance (as of \_\_\_\_\_):  
<\$ \_\_\_\_\_>  
Balance as of \_\_\_\_\_ [date of separation]:  
<\$ \_\_\_\_\_>

26.B. *Federal, State, and Local Tax Liability*

26.B.1. Amount owed in any previous tax year:  
<\$ \_\_\_\_\_>  
[describe liability, e.g., federal income tax/property taxes]  
Amount owed for current year \_\_\_\_\_:  
<\$ \_\_\_\_\_>

26.B.1. Amount owed in any previous tax year:  
<\$ \_\_\_\_\_>  
[describe liability, e.g., federal income tax/property taxes]  
Amount owed for current year \_\_\_\_\_:  
<\$ \_\_\_\_\_>

26.C. *Attorney's Fees in This Case*

26.C.1. Husband (as of \_\_\_\_\_):  
<\$ \_\_\_\_\_>

26.C.2. Wife (as of \_\_\_\_\_):  
<\$ \_\_\_\_\_>

26.D. *Other Professional Fees in This Case*

26.D.1. Husband (as of \_\_\_\_\_):  
<\$ \_\_\_\_\_>

26.D.2. Wife (as of \_\_\_\_\_):  
<\$ \_\_\_\_\_>

26.E. *Other Liabilities Not Otherwise Listed in This Inventory* (e.g., loans, margin accounts, if not previously disclosed)

26.E.1. Name of creditor: \_\_\_\_\_  
Account number: \_\_\_\_\_  
Party incurring liability: \_\_\_\_\_  
Is loan evidenced in writing? [Yes/No]  
Current balance (as of \_\_\_\_\_):  
<\$ \_\_\_\_\_>  
Security, if any: \_\_\_\_\_

26.E.2. Name of creditor: \_\_\_\_\_  
Account number: \_\_\_\_\_  
Party incurring liability: \_\_\_\_\_  
Is loan evidenced in writing? [Yes/No]  
Current balance (as of \_\_\_\_\_):  
<\$ \_\_\_\_\_>  
Security, if any: \_\_\_\_\_

26.E.3. Name of creditor: \_\_\_\_\_  
Account number: \_\_\_\_\_

Party incurring liability: \_\_\_\_\_

Is loan evidenced in writing? [Yes/No]

Current balance (as of \_\_\_\_\_):  
<\$ \_\_\_\_\_ >

Security, if any: \_\_\_\_\_

26.F. *Pledges* (include charitable, church and school related)

26.F.1. Name and address of recipient: \_\_\_\_\_  
\_\_\_\_\_

Date of pledge: \_\_\_\_\_

Total amount of pledge: < \_\_\_\_\_ >

Is pledge payable in installments? [Yes/No]

Date each installment payment is due: \_\_\_\_\_

Amount of each installment: \_\_\_\_\_

26.G. *Contingent Liabilities* (e.g., lawsuit against either party, guaranty either party may have signed)

26.G.1. Name of creditor: \_\_\_\_\_

Name of person primarily liable: \_\_\_\_\_

Amount of contingent liability: <\$ \_\_\_\_\_ >

Nature of contingency: \_\_\_\_\_

26.G.2. Name of creditor: \_\_\_\_\_

Name of person primarily liable: \_\_\_\_\_

Amount of contingent liability: <\$ \_\_\_\_\_ >

Nature of contingency: \_\_\_\_\_