

Client Name: _____

Decree Information Sheet

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. Home Owned:

Street address: _____

County of location: _____

Legal description: _____

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 _____

Original balance of lien: \$ _____ date of lien _____

b. Second lien (pools, etc.)

Name of second lienholder: _____

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

Original balance of lien: \$ _____ date of lien _____

c. Third lien (decrees)

Name of third lienholder: _____

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

Original balance of lien: \$ _____ date of lien _____

Current net equity in property: \$ _____

Date property was acquired: _____

Amount of purchase price: \$ _____

Exact name on title: _____

Comments: _____

3. Other Real Estate:

Street address: _____

County of location: _____

Legal description: _____

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 _____

Original balance of lien: \$ _____ date of lien _____

b. Second lien (pools, etc.)

Name of second lienholder: _____

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

Original balance of lien: \$ _____ date of lien _____

c. Third lien (decrees)

Name of third lienholder: _____

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

Original balance of lien: \$ _____ date of lien _____

Current net equity in property: \$ _____

Date property was acquired: _____

Amount of purchase price: \$ _____

Exact name on title: _____

Comments: _____

2. Mineral Interests

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

Type of interest: _____

County of location: _____

Legal description: _____

Name of producer or operator: _____

Current value: \$ _____

(If more, please attach sheet with same information for others)

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.)

1. Checking Accounts:

a. Name of financial institution: _____

Account number: _____

Account name: _____

Type of account: _____

Current balance: \$ _____ as of _____

b. Name of financial institution: _____

Account number: _____

Account name: _____

Type of account: _____

Current balance: \$ _____ as of _____

(If more, please attach sheet with same information for others)

2. Savings Accounts:

a. Name of financial institution: _____

Account number: _____

Account name: _____

Type of account: _____

Current balance: \$ _____ as of _____

(If more, please attach sheet with same information for others)

3. Certificates of Deposit:

a. Name of financial institution: _____

C.D. in the name of: _____

Amount of C.D.: \$ _____ Interest rate: _____

When purchased: _____ When due: _____

(If more, please attach sheet with same information for others)

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: _____

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: \$ _____

(If more, please attach sheet with same information for others)

5. Publicly Traded Stocks, Bonds, and Other Securities

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

1. Stocks:

a. Name of security: _____

Number of shares: _____

Type of security (common stock, preferred stock, bond, or other description):

Certificate numbers: _____

In possession of: _____

Current market value: \$ _____ as of _____

2. Bonds:

a. Name of issuer: _____

Address: _____

Serial number of bond: _____ Denomination: _____

Date acquired: _____

Cost: \$ _____ Value: \$ _____ as of _____

Registered owner: _____

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: _____

(If more, please attach sheet with same information for others)

7. 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): _____
Type of business: _____
Date business began: _____
Value of interest: \$ _____ as of _____
Is there a written organizational agreement? _____
Comments: _____

9. Retirement Benefits

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

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

Current loan balance: \$ _____ as of _____

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: _____

Designated beneficiary: _____

Payee of survivor benefits: _____

Description of benefits: _____

Current balance: \$ _____ as of _____

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

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 _____

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: _____

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

Percentage of plan that is community: _____ %

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 _____

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: \$ _____

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.)

1. Husband:

a. Description of assets: _____

Value : \$ _____

2. Wife:

a. Description of assets: _____

Value: \$ _____

11. Insurance and Annuities

1. Life Insurance:

a. 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, if any: \$ _____

2. Annuities:

a. 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, if any: \$ _____

Value of community interest: \$ _____ as of _____

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: _____

4. Medical Savings Accounts:

a. Institution holding account: _____

Account number: _____

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.)

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 _____

Who should be awarded the vehicle in the divorce? _____

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 _____

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

If yes, state:

Exact name of creditor: _____

Current balance: \$ _____ as of _____

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: \$ _____

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: \$ _____

(If more, please attach sheet with same information for others)

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

1. In Possession of Husband:

| Description | Source | Value |
|-------------|--------|-------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |

2. In Possession of Wife:

| Description | Source | Value |
|-------------|--------|-------|
|-------------|--------|-------|

16. Antiques, Artwork, and Collections

1. In Possession of Husband:

| Description | Source | Value |
|-------------|--------|-------|
| <hr/> | <hr/> | <hr/> |
| <hr/> | <hr/> | <hr/> |

2. In Possession of Wife:

| Description | Source | Value |
|-------------|--------|-------|
| <hr/> | <hr/> | <hr/> |
| <hr/> | <hr/> | <hr/> |

17. Miscellaneous Sporting Goods and Firearms

1. In Possession of Husband:

| Description | Source | Value |
|-------------|--------|-------|
| <hr/> | <hr/> | <hr/> |
| <hr/> | <hr/> | <hr/> |

2. In Possession of Wife:

| Description | Source | Value |
|-------------|--------|-------|
| <hr/> | <hr/> | <hr/> |
| <hr/> | <hr/> | <hr/> |

18. Jewelry and Other Personal Items

(List major items and state value.)

1. In Possession of Husband:

| Description | Source | Value |
|-------------|--------|-------|
| <hr/> | <hr/> | <hr/> |
| <hr/> | <hr/> | <hr/> |

2. In Possession of Wife:

| Description | Source | Value |
|-------------|--------|-------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |

19. Livestock

(Include cattle, horses, and so forth.)

1. In Possession of Husband:

| Description | Source | Value |
|-------------|--------|-------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |

2. In Possession of Wife:

| Description | Source | Value |
|-------------|--------|-------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |

20. 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, travel benefits, club memberships..)

1. In Possession of Husband:

| Description | Source | Value |
|-------------|--------|-------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |

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: _____
(If more, please attach sheet with same information for others)

24. Storage Facilities

- a. Name of facility: _____
Address of facility: _____
Unit number: _____
Length of lease: _____
Names of persons who have access to contents: _____

Items in storage unit: _____
(If more, please attach sheet with same information for others)

25. Community Claim for Reimbursement

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

1. Reimbursement Claim against Husband's Separate Estate:

Description of basis of claim: _____

Amount claimed: \$ _____

2. Reimbursement Claim against Wife's Separate Estate:

Description of basis of claim: _____

Amount claimed: \$ _____

26. Economic Contribution Claim of Community Estate

1. Economic Contribution Claim against Husband's Separate Estate:

Description of basis of claim: _____

Amount claimed: \$ _____

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: _____

Amount of claim: \$ _____

Legal representative: _____

Address: _____

Cause number: _____

Court where case is pending: _____

Name of opposing attorney: _____

Address: _____

28. Community Liabilities

1. Credit Cards and Charge Accounts:

a. Name of creditor: _____

Account number: _____

Name(s) on account: _____

Current balance: \$ _____ as of _____

Who will be responsible after divorce? _____

b. Name of creditor: _____

Account number: _____

Name(s) on account: _____

Current balance: \$ _____ as of _____

Who will be responsible after divorce? _____

c. Name of creditor: _____

Account number: _____

Name(s) on account: _____

Current balance: \$ _____ as of _____

Who will be responsible after divorce? _____

d. Name of creditor: _____

Account number: _____

Name(s) on account: _____

Current balance: \$ _____ as of _____

Who will be responsible after divorce? _____

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: \$ _____

3. Attorney's Fees in This Case:

a. Husband: \$ _____ as of _____

b. Wife: \$ _____ as of _____

4. Other Professional Fees in This Case:

a. Husband: \$ _____ as of _____

b. Wife: \$ _____ as of _____

5. Other Liabilities Not Otherwise Listed in This Document:

Name of creditor: _____

Name on account: _____

Account number: _____

Is loan evidenced in writing? _____

Margin account balances: _____

Party incurring liability: _____

Party actually signing: _____

Current balance: \$ _____ as of _____

Security, if any: _____

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: \$ _____

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:

Description of basis of claim: _____

Amount claimed: \$ _____

29. Separate Assets of Husband

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 _____

2. Husband's Separate Reimbursement Claim against Community Estate:

Description of basis of claim: _____

Amount claimed: \$ _____

3. Husband's Separate Reimbursement Claim against Wife's Separate Estate:

Description of basis of claim: _____

Amount claimed: \$ _____

4. Husband's Separate Economic Contribution Claim against Community Estate:

Description of basis of claim: _____

Amount claimed: \$ _____

5. Husband's Separate Economic Contribution Claim against Wife's Separate Estate:

Description of basis of claim: _____

Amount claimed: \$ _____

30. Liabilities of Husband's Separate Estate

1. Liabilities:

a. Description of liability: _____

Date of liability: _____

How liability acquired: _____

Amount of liability: \$ _____ as of _____

2. Wife's Separate Reimbursement Claim against Husband's Separate Estate:

Description of basis of claim: _____

Amount claimed: \$ _____

3. Community Reimbursement Claim against Husband's Separate Estate:

Description of basis of claim: _____

Amount claimed: \$ _____

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

Description of basis of claim: _____

Amount claimed: \$ _____

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

Description of basis of claim: _____

Amount claimed: \$ _____

31. Separate Assets of Wife

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 _____

2. Wife's Separate Reimbursement Claim against Community Estate:

Description of basis of claim: _____

Amount claimed: \$ _____

3. Wife's Separate Reimbursement Claim against Husband's Separate Estate:

Description of basis of claim: _____

Amount claimed: \$ _____

4. Wife's Separate Economic Contribution Claim against Community Estate:

Description of basis of claim: _____

Amount claimed: \$ _____

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

1. Liabilities:

Description of liability: _____

Date of liability: _____

How liability acquired: _____

Amount of liability: \$ _____ as of _____

2. Husband's Separate Reimbursement Claim against Wife's Separate Estate:

Description of basis of claim: _____

Amount claimed: \$ _____

3. Community Reimbursement Claim against Wife's Separate Estate:

Description of basis of claim: _____

Amount claimed: \$ _____

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

Description of basis of claim: _____

Amount claimed: \$ _____

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

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: _____

2. 529 Plans:

a. Institution or entity administering the plan: _____

Designated beneficiary: _____

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

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

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 _____

INFORMATION REGARDING CHILDREN

Name: _____

Sex (M/F): ___ Date of birth: _____ Age: _____

Place of birth: _____

Social Security number: _____

Driver's license number: _____

Name: _____

Sex (M/F): ___ Date of birth: _____ Age: _____

Place of birth: _____

Social Security number: _____

Driver's license number: _____ :

Name: _____

Sex (M/F): ___ Date of birth: _____ Age: _____

Place of birth: _____

Social Security number: _____

Driver's license number: _____

Is private health insurance in effect for the children? _____

If so, please give the following information.

Name of insurance company: _____

Policy number: _____

Party responsible for premium: _____

Monthly cost of premium: _____

Is the insurance coverage provided through a parent's employment? _____

If so, which parent? _____

If private health insurance is not in effect for the children, please answer the following questions.

Are the children receiving Medicaid benefits under chapter 32, Human Resources

Code? _____

Are the children receiving health benefits coverage under the Children's Health Insurance Program

under chapter 62, Health and Safety Code? _____

If so, what is the cost of the premium? _____

Does the mother have access to private health insurance at reasonable cost to her?

Does the father have access to private health insurance at reasonable cost to him?

Has anyone applied for Medicaid benefits for the children or for coverage for the children under the Children's Health Insurance Program? _____

If so, who applied? _____

What is the status of the application? _____

Who will have custody of the children? _____

Will there be a geographical residency restriction? _____

If so, what is the restriction? _____

Possession and Access:

Will the parties use the Standard Possession Order? _____

Will the parties use the Expanded Standard Possession Order? _____

Any custom possession orders: _____

Child Support:

Who will pay: _____

Amount to be paid: _____

Child Support will be paid: Weekly____ Bi-Weekly____ Semi- Monthly____ Monthly____

Child Support will begin on: _____

Obligor's Employer: _____

