



**PARVIN**

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# INVENTORY, APPRAISEMENT & LIST OF CLAIMS WORKSHEET

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Your Name: \_\_\_\_\_

Estate of: \_\_\_\_\_

Cause No. \_\_\_\_\_

Court: \_\_\_\_\_

Date of Death: \_\_\_\_\_

**Directions for completing this document:** As you were previously informed, Texas law requires that any personal representative of an Inventory, Appraisal and List of Claims of the Decedent's property within 60 days of being appointed. In order to assist you in completing the document which will be filed with the Court, we ask that you fill out this document and return it by fax to us on or before \_\_\_\_\_.  
Our fax number is 469-607-4505 and our email is [intake@parvinlaw.com](mailto:intake@parvinlaw.com). Please call us with any questions.

**COMMUNITY PROPERTY**

**VALUE**

**Directions: In this section, please list the following assets, any of which were co-owned by Husband and Wife as of the date of death of the Decedent. If the Decedent has widowed or divorced prior to death, any property is likely separate property, therefore you should proceed to the section titled "Separate Property."**

**1. REAL PROPERTY:**

Parcel #1  
Legal Description: \_\_\_\_\_  
\_\_\_\_\_  
Address: \_\_\_\_\_  
Total value of asset: \$ \_\_\_\_\_  
Less surviving spouse share: \$ \_\_\_\_\_ \$ \_\_\_\_\_

**2. HOUSEHOLD FURNISHINGS:**

Total value: \$ \_\_\_\_\_  
Less surviving spouse share: \$ \_\_\_\_\_ \$ \_\_\_\_\_

**3. MOTOR VEHICLES:**

Vehicle #1  
Description: \_\_\_\_\_  
VIN #: \_\_\_\_\_  
Total value of asset: \$ \_\_\_\_\_  
Less surviving spouse share: \$ \_\_\_\_\_ \$ \_\_\_\_\_

**4. CASH IN BANKS:**

Account #1  
Institution: \_\_\_\_\_  
Account type: \_\_\_\_\_  
Account/CD No.: \_\_\_\_\_  
Total value of asset: \$ \_\_\_\_\_  
Less surviving spouse share: \$ \_\_\_\_\_ \$ \_\_\_\_\_

**5. INSURANCE:**

Policy #1  
Insurer: \_\_\_\_\_  
Policy No.: \_\_\_\_\_  
Total value of asset: \$ \_\_\_\_\_  
Less surviving spouse share: \$ \_\_\_\_\_ \$ \_\_\_\_\_

**6. SECURITIES:**

Security #1

Description: \_\_\_\_\_

Total value of asset: \$ \_\_\_\_\_

Less surviving spouse share: \$ \_\_\_\_\_ \$ \_\_\_\_\_

**7. MISCELLANEOUS:**

Item #1

Description: \_\_\_\_\_

Total value of asset: \$ \_\_\_\_\_

Less surviving spouse share: \$ \_\_\_\_\_ \$ \_\_\_\_\_

**ADDITIONAL SPACE IF NEEDED:**

**TOTAL COMMUNITY PROPERTY** \$ \_\_\_\_\_

**SEPARATE PROPERTY**

**VALUE**

Separate property is defined as any property not community property. Typically, this would be an asset owned by the Deceased prior to marriage, or which was acquired by gift or devise to Deceased during marriage.

**1. REAL PROPERTY:**

Parcel #1

LEGAL DESCRIPTION: \_\_\_\_\_

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

Total Value: \$ \_\_\_\_\_ \$ \_\_\_\_\_

**2. HOUSEHOLD FURNISHINGS:**

Total Value: \$ \_\_\_\_\_ \$ \_\_\_\_\_

**3. MOTOR VEHICLES:**

Vehicle #1

Description: \_\_\_\_\_

VIN #: \_\_\_\_\_

Total Value: \$ \_\_\_\_\_ \$ \_\_\_\_\_

**4. CASH IN BANKS:**

Account #1

Institution: \_\_\_\_\_

Account type: \_\_\_\_\_

Account/CD No: \_\_\_\_\_

Total Value: \$ \_\_\_\_\_ \$ \_\_\_\_\_

**5. INSURANCE:**

Policy #1

Insurer: \_\_\_\_\_

Policy No.: \_\_\_\_\_

Total Value: \$ \_\_\_\_\_ \$ \_\_\_\_\_

**6. SECURITIES:**

Security #1

Description: \_\_\_\_\_

Total Value: \$ \_\_\_\_\_ \$ \_\_\_\_\_

**7. MISCELLANEOUS:**

Item #1:

Description: \_\_\_\_\_

Total Value: \$ \_\_\_\_\_

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

**ADDITIONAL SPACE IF NEEDED:**

**TOTAL SEPARATE PROPERTY**

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

**LIST OF CLAIMS OWED TO ESTATE**

The following claims are *due and owing "to" the Estate*:

Claim # 1.

Debtor: \_\_\_\_\_

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

Description of debt: \_\_\_\_\_

Type of debt: Community property

Date debt was accrued: \_\_\_\_\_

Date debt is due: \_\_\_\_\_

Interest rate: \_\_\_\_\_%

Amount due as of date of death: \$ \_\_\_\_\_

**ADDITIONAL SPACE IF NEEDED:**

**TOTAL CLAIMS OWED TO ESTATE** \$ \_\_\_\_\_