

PROPERTY LIST

NAME: _____ DATE: _____

IA	VIRGINIA REAL ESTATE OWNED				<i>Co-owned?</i>		Office only
					Spouse	other	
	a. Description (address) Value (assessed)						
	b. Description (address) Value (assessed)						
IB	NON-VIRGINIA REAL ESTATE OWNED						
	a. Description (address) Value (assessed)						
IC	MONEY AND DEPOSITS	<i>Location (Bank/CU Name)</i>	<i>Account #</i>	<i>Amount</i>	<i>Co-owned?</i>		Office only
					Spouse	other	
	a. Cash						
	b. Checking Accounts						
	c. Savings Accounts						
	d. Money market						
	e. Certificates of Deposit						
	f. Other deposit accounts						

2A	PERSONAL PROPERTY	<i>Description</i>	<i>Location</i>	<i>Value</i>	<i>Co-owned?</i>		Office only	
					Spouse	other		
a.	Vehicles (cars, trucks, boats, trailers)							
b.	Antiques, Art, Guns & Collections (coin, stamp, etc.)							
c.	Furs & Jewelry							
d.	Household Furnishings							
2B	LIFE INSURANCE Company	<i>Beneficiary</i>	<i>Policy #</i>	<i>Amount</i>	<i>Policy Owner</i>	Office only		
2C	MISCELLANEOUS							
a.	Business ownership?	<input type="checkbox"/> NO	<input type="checkbox"/> YES (explain)					
b.	Interest in estate/trust of another	<input type="checkbox"/> NO	<input type="checkbox"/> YES (explain)					
c.	Receiving Trust Income?	<input type="checkbox"/> NO	<input type="checkbox"/> YES (explain)					
d.	Annuity?	<input type="checkbox"/> NO	<input type="checkbox"/> YES (explain)					
e.	Stocks, Mutual Funds, Brokerage?	<input type="checkbox"/> NO	<input type="checkbox"/> YES (explain)					
f.	IRA?	<input type="checkbox"/> NO	<input type="checkbox"/> YES (explain)					