

**HIRSCH & EHLENBERGER, P.C. FINANCIAL SUMMARY FORM**

**FINANCIAL SUMMARY OF:** \_\_\_\_\_  
 (Full Name)

**DATE:** \_\_\_\_ / \_\_\_\_ /20\_\_\_\_

**I. FINANCIAL ACCOUNTS**

A. Accounts. Provide the following information as to all bank accounts (checking/savings) savings and loan accounts, credit union accounts, money market accounts, mutual funds, investment accounts (**not including IRA's and other retirement accounts**), stocks, bonds or certificates of deposit established in your name or your spouse's name individually, and/or in either of your names jointly with any other person(s):

Institution/Account #	Type of Account	How Titled	Balance/Value as of Date of Separation	Present Balance/Value

B. Monies for Children. Include 529s, prepaid tuition programs and other accounts:

Institution/Account	Type of Account	Beneficiary	Owner/Custodian	Present Balance

C. Monies Owed to You or Your Spouse. As to any outstanding notes, accounts receivable, or other debts owed to you or your spouse individually, and/or to either of you and any other person(s) jointly, provide the following information:

By Whom Owed	To Whom Owed	Terms of Payment	Date Due	Principal Due

**II. PENSION, RETIREMENT, AND PROFIT-SHARING PLAN INFORMATION**

A. Through Employment. As to each and every pension which you or your spouse are entitled to receive by virtue of past or current employment, please state the following:

	PLAN NO. 1	PLAN NO. 2	PLAN NO. 3	PLAN NO. 4
1. Plan Name				
2. Participant				
3. Employer				
4. Years in Plan				
5. Dates of Service				
6. Vest or Non-Vested				
7. If Retired a. Gross amount received annually: b. Net amount received monthly:				
8. If Not Retired: a. year of anticipated retirement: b. amount of expected gross annual retirement pay c. Other available payment options:				
9. PRESENT VALUE				

B. IRA, Keogh, 401(k), Profit Sharing Plans and Other Retirement Accounts. As to Individual Retirement Account (IRA), 401(k), Keogh, profit sharing plans and other retirement accounts in the name of you and/or your spouse, state the following:

YOU	PLAN NO. 1	PLAN NO. 2	PLAN NO. 3	PLAN NO. 4
1. Type of Plan				
2. Current Balance				
3. Amount you expect to be added to plan over next year				

<b>SPOUSE</b>	<b>PLAN NO. 1</b>	<b>PLAN NO. 2</b>	<b>PLAN NO. 3</b>	<b>PLAN NO. 4</b>
1. Type of Plan				
2. Current Balance				
3. Amount you expect to be added to plan over next year				

### **III. FINANCIAL INTERESTS**

A. Intangibles: State the following as to any other intangible personal property (such as franchises, patents, trademarks, copyrights, and other royalty rights) owned by you or your spouse individually, or jointly by either of you and any other person(s) or entity:

<b>NAME OF PROPERTY</b>	<b>OWNER(S)</b>	<b>COST</b>	<b>ESTIMATED VALUE</b>

B. Stock Options/Units: Describe fully any stock options, restricted stock units, performance stock units or similar you are entitled to including but not limited to:

<b>Employee/ Participant</b>	<b>Issuing Company</b>	<b>Type of Investment</b>	<b># of Shares Granted</b>	<b>Date Granted</b>	<b>Date Vested</b>	<b>Exercise Price</b>	<b>Current Value</b>

**IV. REAL ESTATE**

As to any real estate titled in your or your spouse's name individually, or by either of you jointly with any other person(s), provide the following information:

	PARCEL #1	PARCEL #2	PARCEL #3
1. Address			
2. Nature/Type			
3. How Titled			
4. Year Purchased			
5. Purchase Price			
6. Cost of Additions			
7. Amount of Down Payment			
8. Source of Down Payment			
9. Current Value			
10. Mortgage Owed			
11. Equity			

**V. TANGIBLE PERSONAL PROPERTY**

A. Vehicles. Provide the following information regarding any automobiles, boats, airplanes or other vehicles which are titled in your name and/or your spouse's name individually, or which are titled in either of your names jointly with any other person(s):

DESCRIPTION YEAR MODEL	HOW TITLED	AMT. OWING ON VEHICLE	ESTIMATED VALUE

B. Property Held in Trust. If any person, firm, or other entity holds any property for your benefit, describe in full including name and address of holder and description and value of property so held.

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C. Property in Safe Deposit Boxes or Stored. If there are any safe deposit boxes, vaults, safes, or other places of deposit or safekeeping in which you have had any money, documents, or other items of personal property during the past two years, please state location and describe all items (tangible or intangible) previously or presently so deposited.

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**VI. BUSINESS INTERESTS**

Businesses. Provide the following information as to any proprietorships, partnerships (general or limited), corporations, joint ventures, and other business entities owned by you and/or your spouse individually, or jointly by either of you and any other person(s):

Description	Owner	% of Interest	Amount Invested	Estimated Value

**VII. SEPARATE PROPERTY**

A. Property Inherited During Marriage. (Include date and source of inheritance, by whom inherited, original and present values, and present status):

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B. Property Acquired During Marriage by Gift from Third Party Other than Spouse. (Include date and source of gift, recipient, original and present values, and present status; you need not include gifts of minimal value, or Christmas or birthday gifts, unless you believe for some reason your spouse will make a claim to them):

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C. Property Brought to Marriage. (Include date and source, original and present values, disposition and present status; you need not include purely personal items, such as jewelry, or household furniture and effects, unless you believe for some reason your spouse will make a claim to them):

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D. Property Acquired After Separation: (Include date acquired, source and value).

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**VIII. LIABILITIES**

Provide the following information as to current credit cards, personal charge accounts, and loans and notes payable, including those in your or your spouse's name alone, or in either of your names jointly with any other person(s):

Creditor	Reason Debt Incurred	Account Number	Person(s) Liable	Balance Owed on Date Separated	Present Balance

**IX. INSURANCE**

A. Life Insurance Policies.

Institution/Account#	Type	Insured	Loans	Beneficiary	Face Value	Cash Value	Term Expires

B. Health Insurance.

Do you provide health insurance? Yes or No. If not, who does?| \_\_\_\_\_

Company	Type of Coverage	Policy Number	Individuals Covered

**X. TAXES**

A. Have you and your spouse filed joint tax returns? If yes, list the years: \_\_\_\_\_

B. Have you and your spouse filed married-filing-separate tax returns? If yes, list the years: \_\_\_\_\_

C. Are you and/or your spouse current on your taxes?

If not, provide the following information:

1. Taxing Authority: \_\_\_\_\_
2. Year(s): \_\_\_\_\_
3. Amount Owed: \_\_\_\_\_

**XI. YOUR EMPLOYMENT INFORMATION**

By whom are you employed, and for each employment provide the following information:

- A. Employer: \_\_\_\_\_
- B. Inclusive Dates: \_\_\_\_\_
- C. Position/Title: \_\_\_\_\_
- D. Annual Salary: \_\_\_\_\_
  
- E. **FRINGE BENEFITS:** (Describe each applicable benefit)
  - 1. Company Car: \_\_\_\_\_
  - 2. Medical Insurance: \_\_\_\_\_
  - 3. Medical/Dental Reimbursement: \_\_\_\_\_
  - 4. Life Insurance: \_\_\_\_\_
  - 5. Stock Options: \_\_\_\_\_
  - 6. Other (specify): \_\_\_\_\_
  
- F. Last Year's Total Gross Income: \$ \_\_\_\_\_  
This Year's Total Gross Income: \$ \_\_\_\_\_

**XII. SPOUSE'S EMPLOYMENT INFORMATION**

By whom is your spouse employed, and for each employment provide the following information:

- A. Employer: \_\_\_\_\_
- B. Inclusive Dates: \_\_\_\_\_
- C. Position/Title: \_\_\_\_\_
- D. Annual Salary: \_\_\_\_\_
  
- E. **FRINGE BENEFITS:** (Describe each applicable benefit)
  - 1. Company Car: \_\_\_\_\_
  - 2. Medical Insurance: \_\_\_\_\_
  - 3. Medical/Dental Reimbursement: \_\_\_\_\_
  - 4. Life Insurance: \_\_\_\_\_
  - 5. Stock Options: \_\_\_\_\_
  - 6. Other (specify): \_\_\_\_\_
  
- F. Last Year's Total Gross Income: \$ \_\_\_\_\_  
This Year's Total Gross Income: \$ \_\_\_\_\_



**XIII. MISCELLANEOUS**

Please set forth below information as to other assets, liabilities, and/or other financial matters, including but not limited to information regarding any judgments you have been awarded (amount, reason, and date) as well as any pending litigation you are involved in.

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## Requested Documents

Please provide the following documents:

1. Please provide the last 12 months of statements for each checking, savings, money market, investment, and/or brokerage account listed on the Financial Summary;
2. Please provide the last 12 months of statements for each retirement account (including 401(k)s, IRAs, *etc.*) listed on the Financial Summary;
3. Please provide documentation of each *defined benefit* pension plan, such as military pension, government pension or other such pension or annuity which may pay, or is now paying, an annuity benefit upon retirement, to which you are or may be entitled to receive benefits by reason of past or current employment or otherwise;
4. Please provide any documentation you have reflecting the surrender/cash value of any life insurance policies listed on the listed on the Financial Summary;
5. Please provide your last three (3) pay statements/paystubs from each employer;
6. Please provide your W-2(s) and 1099(s) for tax year 2019; and
7. Please provide a copy of your tax returns for the last three (3) years.