

Financial Disclosure Directions

*Based on Personal Communication with
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In creating this document, collect bank statements, accounting statements, expense reports, tax records, and any other documentation that can help provide details regarding financial interactions. Go through the checklist and for every check mark, create an itemized list of expenses that fit into that category.

Financial disclosure checklist:

1. Do you have any of the following in a format your spouse does (or did) not know about or know the extent of (please note that this list includes assets in your name or assets you create or manage in the name of other individuals, both domestic and foreign):

- | | |
|---|--|
| <input type="checkbox"/> Bank accounts (checking or savings) | <input type="checkbox"/> College savings accounts |
| <input type="checkbox"/> Foreign bank accounts (checking or savings) | <input type="checkbox"/> Property |
| <input type="checkbox"/> Investments or investment accounts (domestic or foreign) | <input type="checkbox"/> Business investments |
| <input type="checkbox"/> Retirement accounts (individual or through a company or state) | <input type="checkbox"/> Business equipment or supplies |
| <input type="checkbox"/> Pensions | <input type="checkbox"/> Alimony |
| <input type="checkbox"/> Trusts | <input type="checkbox"/> Child support |
| <input type="checkbox"/> Credit cards | <input type="checkbox"/> Lottery winnings |
| <input type="checkbox"/> Cash | <input type="checkbox"/> Gambling profits or losses |
| <input type="checkbox"/> Lines of credit | <input type="checkbox"/> Art |
| <input type="checkbox"/> Health insurance | <input type="checkbox"/> Jewelry or jewels |
| <input type="checkbox"/> Life insurance | <input type="checkbox"/> Precious metals |
| <input type="checkbox"/> Disability insurance | <input type="checkbox"/> Crypto, bitcoin, or any version of virtual currency |
| <input type="checkbox"/> Annuities | <input type="checkbox"/> Collectables (coins, baseball cards, stamps, etc.) |
| <input type="checkbox"/> Charitable donation accounts | <input type="checkbox"/> Antiques |
| | <input type="checkbox"/> Electronics |
| | <input type="checkbox"/> Other valuables |

2. As part of your acting out, did you spend money in any of the following areas:

Money paid for sexual services

- | | |
|--|--|
| <input type="checkbox"/> Prostitutes | <input type="checkbox"/> Call girls/boys/persons |
| <input type="checkbox"/> Strip clubs | <input type="checkbox"/> Escorts |
| <input type="checkbox"/> Massage parlors/masseuses | <input type="checkbox"/> Sugar babies |

Money paid to or spent on behalf of individuals you had a sexual, romantic, or supportive relationship with, including:

- | | |
|--|--|
| <input type="checkbox"/> Rent, mortgage, utilities, or living expenses | <input type="checkbox"/> Fees or memberships |
| <input type="checkbox"/> Food or supplies | <input type="checkbox"/> Clothing |
| <input type="checkbox"/> Medical care or expenses | <input type="checkbox"/> Cars |
| <input type="checkbox"/> Insurance (of any type) | <input type="checkbox"/> Electronics |
| | <input type="checkbox"/> Credit cards |

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- ☐ Credit card rewards (points, miles, hotel rooms, etc.)
 - ☐ Travel
 - ☐ Jewelry
 - ☐ Surgeries
 - ☐ Visas
 - ☐ Legal expenses
 - ☐ Money sent to or spent on their family members, friends, or connections
 - ☐ Investments in companies, businesses, or individuals on their behalf, at their suggestion, or in connection to the relationship
 - ☐ Charitable donations made on their behalf, at their suggestion, or in connection to the relationship
3. Additional areas to consider (include expenses related to one-time interactions as well as more lengthy interactions):
- ☐ Gifts given
 - ☐ Gifts bought (in person or virtually)
 - ☐ Items repurposed
 - ☐ Tributes
 - ☐ Gift cards bought and/or given
 - ☐ Tips
 - ☐ Meals
 - ☐ Drinks
 - ☐ Tables
 - ☐ Shows
 - ☐ Events
 - ☐ Sporting events
 - ☐ Lap dances
 - ☐ Strip clubs
 - ☐ Clubs
 - ☐ Medications (Viagra, morning after pill, etc.)
 - ☐ Medical tests (STD testing, pregnancy testing)
 - ☐ Medical expenses (abortions, surgeries)
 - ☐ Time taken off work (hourly rate and/or wages/bonuses lost)
 - ☐ Losses at work, including lost opportunities, financial consequences, etc.
4. Gambling expenses:
- ☐ Wins/losses at casinos
 - ☐ Lines of credit
 - ☐ Fantasy sports
 - ☐ Online betting
 - ☐ Online card games or other games
 - ☐ Card games or other games
 - ☐ Comped meals
 - ☐ Comped rooms
 - ☐ Comped services
 - ☐ Pawned items
 - ☐ Items sold to finance gambling
 - ☐ Loans (legal or illegal) to finance gambling
 - ☐ Credit cards used to finance gambling
 - ☐ Cash advances used to finance gambling

For any items checked in the each of the above lists, create an itemized list of expenditures. Create a master list with the itemized expenses, clearly summarizing the information with the total from each check mark, the total in of the four categories, and the grand total. Work with your therapist and your partner's therapist to determine what level of information your partner would like. Follow the format set up for disclosures as presented in the Coupled Recovery booklets. Presentation of this information should be part of the presentation of other formal disclosure documents and information unless otherwise requested.