### Page 1

Name: Beverly Piechowicz

Name of the nursing home: URNC

Date Of Birth: 1928-12-11

What is your Medicaid ID #: DX99484J

#### **Your Home Address**

Street Address: 9623 Maynard Dr

**Address Line 2:** 

City: Marcy

State/Region/Province: New York

home\_postal\_zipcode: 13403

### **Spouse**

spouse info: Never married

### **Demographics**

you selected:

**Employment status:** 

# Real Estate and Vechicles your home info within the past 5 years

Currently own: Yes

equity value of your home: 68,000

your monthly bill: 162.95

#### **Insurance Info**

Name of Homeowners insurance:

Have Medicare: Yes

Have Medicare Replacement (Like UHC Medicare): Yes

Life Insurance (including through an annuity): Yes

Medicare #: 8WQ8V56HU65

Life Insurance provider: SBLI USA Life Insurance Company, Inc

**Cash Value: 960.98** 

B. P # 000004007
Policy #: 330001207
Your Income Info Social Security
Name of payer:
Amount: 1507
Frequency: monthly
Pension
Name of payer: Aetna Life Ins Co Large Case Pensions
<b>Amount:</b> 950.52
Frequency: annually
Pension
Name of payer: Manufacturers and Traders Trust Co
<b>Amount:</b> 73.39
Frequency: annually
Annuity
Name of payer: TIAA
<b>Amount:</b> 1413.66
Frequency: annually
IRA distribution
Name of payer:
Amount:
Frequency:
Stock Dividends
Name of payer:
Amount:
Frequency:
TRUST INFO
Trust name:
Garantor:
Trustee:

Amount:
Your Investments Stocks
Company Name:
Approx. Value:
Bonds
Company Name:
Approx. Value:
Annuity
Company Name:
Approx. Value:
IRA
Company Name:
Approx. Value:
Banking info Bank #1
Bank: First Source FCU
Account #: XXX61
<b>\$ Amount:</b> 2074.43
bank_1_date_closed:
Bank #2
Bank: M&T Bank
Account #: 554003013
<b>\$ Amount:</b> 6209.48
bank_1_date_closed:
Bank #3
Bank: M&T Bank
Account #: 15004218817334
<b>\$ Amount:</b> 1624.20
bank_1_date_closed:

# Funeral Info Irrevocable prepaid burial setup

**Funeral Home** 

Name: Heintz Funeral Service, Inc

**Price:** 11595

**Best Contact** 

Name: Mari Brear

Email: marielaine2000@yahoo.com