Page 1

Name: Bonnie Clark

Name of the nursing home: Gowanda Rehab and Nursing

Date Of Birth: 1939-07-11

Your Home Address

Street Address:

Address Line 2: 430 EAST AVE APT 206

City: FALCONER

State/Region/Province: NY

home_postal_zipcode: 14733

Spouse

spouse info: Never married

Demographics

you selected:

Employment status: unemployed

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

Renting: Yes

Rent:

Sold/Transferred in the past 5 years: Yes

your monthly bill:

Own vehicle sell info in past 5 years

Make and Model: Subaru Legacy

Fair market Value: 4100

Sold Property Property 1

Address: 162 Sturges Street, Jamestown, NY 14701

Fair Value: 70000

Sale Price: 70,000

Date Sold: 8/23/2021

Property 2 Address: Fair Value: Sale Price: **Date Sold: Insurance Info** Name of Homeowners insurance: Have Medicare: Yes Have Medicare Replacement (Like UHC Medicare): Yes Medicare #: Your Income Info **Social Security** Name of payer: Social security **Amount:** 1851 Frequency: Monthly Pension Name of payer: Amount: Frequency: **Pension** Name of payer: Amount: Frequency: **Annuity** Name of payer: Amount: Frequency: **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: N/A		
Approx. Value: 0		
	Bonds	
Company Name: N/A		
Approx. Value: 0		
	Annuity	
Company Name: N/A		
Approx. Value: 0		
	IRA	
Company Name: N/A		
Approx. Value: 0		
	Banking info Bank #1	
Bank: Key Bank		
Account #:		
\$ Amount:		
bank_1_date_closed:		
	Bank #2	

Bank:		
Account #:		
\$ Amount:		
bank_1_date_closed:		
	Bank #3	
Bank:		
Account #:		
\$ Amount:		
bank_1_date_closed:		
	Best Contact	
Name: Randall Clark		
Email: Rjc75k@gmail.com		