

# Financial App Form

## Page 1

**Name:** Denise Timms

**Name of the nursing home:** Utica Rehabilitation and Nursing

**Date Of Birth:** 1960-03-29

### Your Home Address

**Street Address:** 517 Giles Rd

**Address Line 2:**

**City:** West Edmeston

**State/Region/Province:** ny

**home\_postal\_zipcode:** 13485

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### Spouse

**spouse info:** Never married

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### Demographics

**you selected:** Filed taxes in the past 4 years

**Employment status:** retired

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

**Currently own:** Yes

**equity value of your home:** \$300,000

**your monthly bill:** N/A

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### Own vehicle sell info in past 5 years

**Make and Model:** 2015 Toyota Tacoma

**Fair market Value:** 10,000

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### Insurance Info

**Name of Homeowners insurance:** Preferred Mutual

**Life Insurance (including through an annuity):** Yes

**Life Insurance provider:** Prudential

**Cash Value:** 400,000

**Policy #:**

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## Your Income Info Social Security

**Name of payer:** Social Security Administration

**Amount:** 2300

**Frequency:** Monthly

## Pension

**Name of payer:** New York State And Local Retirement System

**Amount:** 2000

**Frequency:** Monthly

## 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:**

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## Your Investments Stocks

**Company Name:**

**Approx. Value:**

## Bonds

**Company Name:**

**Approx. Value:**

## Annuity

**Company Name:**

**Approx. Value:**

## IRA

**Company Name:**

**Approx. Value:**

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## Banking info Bank #1

**Bank:** NBT Bank

**Account #:**

**\$ Amount:** \$2200

**bank\_1\_date\_closed:**

## Bank #2

**Bank:** NBT Bank

**Account #:**

**\$ Amount:** \$684

**bank\_1\_date\_closed:**

## Bank #3

**Bank:**

**Account #:**

**\$ Amount:**

**bank\_1\_date\_closed:**

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## Best Contact

# Financial App Form

**Name:** Denise Timms

**Email:** DJCAP329@aol.com

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