

Financial App Form

Page 1

Name: Kenneth Peeble

Name of the nursing home: Houghton Rehabilitation and Nursing Center

Date Of Birth: 1952-02-29

Your Home Address

Street Address: 921 Townline Road

Address Line 2:

City: Lancaster

State/Region/Province: NY

home_postal_zipcode: 14086

Spouse

spouse info: yes

Demographics

you selected: Filed taxes in the past 4 years

Employment status: retired

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

Currently own: Yes

equity value of your home: 285000

your monthly bill: N/A

Own vehicle sell info in past 5 years

Make and Model:

Fair market Value:

Insurance Info

Name of Homeowners insurance:

Have insurance through work: Yes

Life Insurance (including through an annuity): Yes

HMO Name and ID #: IHA AA039902200

Life Insurance provider:

Financial App Form

Cash Value: 8575

Policy #:

Your Income Info Social Security

Name of payer:

Amount: 2245

Frequency:

Pension

Name of payer:

Amount: 3689

Frequency:

Pension

Name of payer:

Amount:

Frequency:

Annuity

Name of payer:

Amount: 115

Frequency:

IRA distribution

Name of payer:

Amount:

Frequency:

Stock Dividends

Name of payer:

Amount:

Frequency:

TRUST INFO

Trust name:

Garantor:

Financial App Form

Trustee:

Amount:

Spouse Income Info Social Security

Name of payer:

Amount: 969

Frequency:

Pension

Name of payer:

Amount: 380

Frequency:

Pension

Name of payer:

Amount: 143

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:

Financial App Form

Trustee:

Amount:

Your Investments Stocks

Company Name:

Approx. Value:

Bonds

Company Name:

Approx. Value:

Annuity

Company Name:

Approx. Value:

IRA

Company Name:

Approx. Value:

Spouse 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: M&T

Financial App Form

Account #: checking

\$ Amount: 2500

bank_1_date_closed:

Bank #2

Bank: M&T

Account #: savings

\$ Amount: 19000

bank_1_date_closed:

Bank #3

Bank: M&T

Account #: checking

\$ Amount: 693

bank_1_date_closed:

Spouse banking info

Bank #1

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:

Spouse Info

Financial App Form

Name: Deborah Peebles

Spouse SS#:

Spouse DOB:

Best Contact

Name: Deborah Peebles

Email: