## Ferris Hills and Clark Meadows

Independent and Enriched Senior Living

## FINANCIAL PROFILE

All information will be held confidential.

- 1. Full Name (Mr,/Mrs,/Ms.): \_\_\_\_\_
- 2. Address: \_\_\_\_\_
- 3. Telephone: ( )\_\_\_\_\_

Please print clearly. Complete by individual and note joint holdings.

ASSETS	1 <sup>st</sup> PERSON		2 <sup>nd</sup> PERSON			
		Is the asset security for a loan?			Is the asset security for a loan?	
		Yes	No		Yes	No
Cash (Savings & Checking)	\$			\$		
CDs, Money Markets, etc.	\$			\$		
Stocks & Bonds	\$			\$		
IRAs, Annuities, etc.	\$			\$		
House	\$			\$		
Other Real Estate	\$			\$		
Trust Fund (indicate % beneficial int.)	\$			\$		
Cash Surrender Value of Life Insurance	\$			\$		
Other Assets (please describe):	\$			\$		
TOTAL ASSETS	\$			\$		

LIABILITIES	1 <sup>st</sup> PERSON	2 <sup>nd</sup> PERSON
Mortgage on Residence	\$	\$
Mortgage(s) on Other Real Estate	\$	\$
Other Bank Loans	\$	\$
Loans Against Cash Surrender Value of Life	\$	\$
Insurance		
Other Liabilities	\$	\$
(Notes Payable, etc.)		
TOTAL LIABILITIES	\$	\$

Have You Guaranteed Any Debt Owed By Another? Yes No If so, please describe below:						
Guarantor(s)	Debtor	Relationship	Amount of Debt Guaranteed			

REGULAR MONTHLY INCOME	1 <sup>st</sup> PERSON	2 <sup>nd</sup> PERSON
Social Security	\$	\$
Pension *	\$	\$
Dividends	\$	\$
Interest	\$	\$
Mortgage/Rental Income	\$	\$
IRA Income	\$	\$
Trust Income	\$	\$
Other Monthly Income	\$	\$
TOTAL REGULAR MONTHLY INCOME	\$	\$

\*With regard to monthly pension income reflected, will the monthly payment continue in the same amount for the life of the other person listed (generally, the surviving spouse)? Yes \_\_\_\_\_ No \_\_\_\_\_ If not, what will the monthly payment be after the death of the recipient listed? \$\_\_\_\_\_/month.

I hereby declare that all statements made herein are true according to my best knowledge and belief. In witness whereof, I have hereunto set my hand to this application this \_\_\_\_\_\_ day of \_\_\_\_\_\_, \_\_\_\_.

Signature of 1st Person

Signature of 2nd Person

1 Ferris Hills ~ Canandaigua, New York 14424 (585) 393-0410 ~ Fax (585) 393-0452

THE COMPLETE OFFERING TERMS ARE IN AN OFFERING PLAN AVAILABLE FROM SPONSOR

