



CONFIDENTIAL FINANCIAL STATEMENT
CEDAR CREST, INC.

For purposes of applying for admission to Cedar Crest, I am providing the following complete and accurate description of my financial condition.

Applicant: _____ Male Female Date of Birth: _____
 Co-Applicant: _____ Male Female Date of Birth: _____
 Address: _____ Phone: _____
 City/State/Zip: _____
 Contact Person: _____ Relationship: _____
 Address: _____ Home Phone: () _____
 Work Phone: () _____ Cell Phone: () _____

Is the Applicant married? Yes No If married, the total income and assets of both spouses must be listed.

Do you have long-term care insurance? Yes No Name of Insurance Co.: _____
 Primary Insurance: _____ Secondary Insurance: _____

Monthly Income	Applicant (per month)	Co-Applicant/Spouse (per month)
Social Security		
Veterans Benefits		
SSI (supplement security income)		
Alimony		
Unemployment Compensation		
Pension		
Retirement Plans		
Disability Plans		
Income from Stocks and Bonds		
Rental Income Paid to You		
Annuities		
Trust Fund		
Interest Income from Savings		
Other: Description _____		

Total Monthly Income		

Assets	Mark If Applicable ¹	Who owns (resident, community, spouse, joint). If joint, identify co-owner. (Please use additional pages as necessary.)	Amount
Life Insurance Cash Value Company Name _____ _____ Date Issued _____			
Checking Account/Name of Bank _____ Interest Bearing Yes/No			
Savings Account/Name of Bank _____			
Annuities			
Cash on Hand			
Stocks: Description _____ _____			
Bonds: Description _____ _____			
Certificates of Deposit			
Money Owed to You			
Real Estate Owned: Description _____ _____			
Land Contract			
Farm Equipment			
Livestock			
Vehicles			
Other: Description _____ _____			

¹ All boxes should be completed. If a box is inapplicable, N/A should be inserted in the box.

