Financial Disclosure

UPMC Senior Communities requires completion of this financial disclosure form upon application for admission in order to determine that potential residents have sufficient income and assets to meet our residency requirements. Financial information provided will remain confidential and will be used to determine your ability to meet your financial obligations to UPMC Senior Communities. Failure to provide the requested information could result in the denial of your application for admission.

APPLICANT PERSONAL DATA

Name:	Facility:
Proposed Move-In Date:	Unit #/Type:
Marital Status*:	Veteran Status**:

*If married, please provide location of applicant's spouse:

**If a veteran of spouse of a veteran, provide date of application for VA benefits:

APPLICANT FINANCIAL DATA

Monthly Income:	Current Assets:	Liabilities:
Social Security/SSA \$:	Cash \$	Mortgages \$
Pension \$	Retirement Accounts \$	Notes Payable \$
VA Benefit \$	Stocks/Bonds/Mut Fds \$	Personal Debt \$
Interest \$	Real Estate \$	Other \$
Annuity/Trust \$	Life Insurance \$	Total Liabilities \$
Other Income \$	Other Assets \$	
Total Income \$	Total Assets \$	Net Assets \$

SIGNATURE

I hereby affirm, that to the best of my knowledge, the information provided on this financial disclosure is accurate and complete. I understand that UPMC Senior Communities is relying on the information provided to determine my ability to meet future financial obligations, and I recognize that any material misstatements will result in the denial of my application for admission and could impact my eligibility to apply for benevolent care in the future. I further affirm that the income and assets listed will be available to meet my financial obligations to UPMC Senior Communities.

Resident Facility Representative

Responsible Party

UPMC | SENIOR COMMUNITIES