

**FINANCIAL AFFIDAVIT**

**Verification of ALL financial information is required for admission  
Use additional sheets as necessary**

Veteran's Name: \_\_\_\_\_

I (or as financial legal representative for applicant) hereby  
declare that my total income and assets are as follows:

**Per Month Incomes:**

**Veterans Affairs Compensation/Pension...** \$ \_\_\_\_\_

**Social Security/Railroad Retirement (Gross)** \$ \_\_\_\_\_

Medicare Part B Deduction..... \$ \_\_\_\_\_

Medicare Part D Deduction..... \$ \_\_\_\_\_

Medicare Part D Company: \_\_\_\_\_

Net..... \$ \_\_\_\_\_

**Military Retirement (Gross)**..... \$ \_\_\_\_\_

Any Deduction..... \$ \_\_\_\_\_

Net..... \$ \_\_\_\_\_

**IPERS (Gross)**..... \$ \_\_\_\_\_

Any Deduction..... \$ \_\_\_\_\_

Net..... \$ \_\_\_\_\_

**Civil Service Annuity (Gross)**..... \$ \_\_\_\_\_

Any Deduction..... \$ \_\_\_\_\_

Net..... \$ \_\_\_\_\_

**Company Retirement Pension(s)**..... \$ \_\_\_\_\_

Any Deduction..... \$ \_\_\_\_\_

Net..... \$ \_\_\_\_\_

Name of Pension: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**Long-Term Care/Nursing Home Insurance**

Daily amount: \$ \_\_\_\_\_

Name of Company: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**Sale/Rent of Real Estate**..... \$ \_\_\_\_\_

**Dividends/Interest/Annuities**..... \$ \_\_\_\_\_

**Wages, Farm and/or Other Business**

**Income**..... \$ \_\_\_\_\_

Please list source: \_\_\_\_\_

\_\_\_\_\_

**TOTAL**..... \$ \_\_\_\_\_

Spouse's Name: \_\_\_\_\_

I (or as financial legal representative for spouse) hereby  
declare that my total income and assets are as follows:

**Per Month Incomes:**

**Veterans Affairs Compensation/Pension...** \$ \_\_\_\_\_

**Social Security/Railroad Retirement (Gross)** \$ \_\_\_\_\_

Medicare Part B Deduction..... \$ \_\_\_\_\_

Medicare Part D Deduction..... \$ \_\_\_\_\_

Medicare Part D Company: \_\_\_\_\_

Net..... \$ \_\_\_\_\_

**Military Retirement (Gross)**..... \$ \_\_\_\_\_

Any Deduction..... \$ \_\_\_\_\_

Net..... \$ \_\_\_\_\_

**IPERS (Gross)**..... \$ \_\_\_\_\_

Any Deduction..... \$ \_\_\_\_\_

Net..... \$ \_\_\_\_\_

**Civil Service Annuity (Gross)**..... \$ \_\_\_\_\_

Any Deduction..... \$ \_\_\_\_\_

Net..... \$ \_\_\_\_\_

**Company Retirement Pension(s)**..... \$ \_\_\_\_\_

Any Deduction..... \$ \_\_\_\_\_

Net..... \$ \_\_\_\_\_

Name of Pension: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**Long-Term Care/Nursing Home Insurance**

Daily Amount: \$ \_\_\_\_\_

Name of Company: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**Sale/Rent of Real Estate**..... \$ \_\_\_\_\_

**Dividends/Interest/Annuities**..... \$ \_\_\_\_\_

**Wages, Farm and/or Other Business**

**Income**..... \$ \_\_\_\_\_

Please list source: \_\_\_\_\_

\_\_\_\_\_

**TOTAL**..... \$ \_\_\_\_\_

Veteran's Name: \_\_\_\_\_

Spouse's Name: \_\_\_\_\_

**ASSETS**

**ASSETS**

**Do you own or have any interest in real estate?** \_\_\_\_\_

**Do you own or have any interest in real estate?** \_\_\_\_\_

Address of property(ies):  
\_\_\_\_\_

Address of property(ies):  
\_\_\_\_\_

Value: \$ \_\_\_\_\_

Value: \$ \_\_\_\_\_

Is this your homestead? \_\_\_\_\_

Is this your homestead? \_\_\_\_\_

**Cash on hand**..... \$ \_\_\_\_\_

**Cash on hand**..... \$ \_\_\_\_\_

**Cash in bank/savings & loan institutions/credit unions:**

**Cash in bank/savings & loan institutions/credit unions:**

Checking..... \$ \_\_\_\_\_

Checking..... \$ \_\_\_\_\_

Savings..... \$ \_\_\_\_\_

Savings..... \$ \_\_\_\_\_

CD's..... \$ \_\_\_\_\_

CD's..... \$ \_\_\_\_\_

Name(s) on account and bank name and address for all accounts:

Name(s) on account and bank name and address for all accounts:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Do you have a burial trust agreement?** \_\_\_\_\_  
If yes, please provide a copy.

**Do you have a burial trust agreement?** \_\_\_\_\_  
If yes, please provide a copy.

**How many cemetery plots do you own?** \_\_\_\_\_

**How many cemetery plots do you own?** \_\_\_\_\_

**IRA's/401K**..... \$ \_\_\_\_\_

**IRA's/401K**..... \$ \_\_\_\_\_

**Other assets (stocks, bonds, etc.)**..... \$ \_\_\_\_\_

**Other assets (stocks, bonds, etc.)**..... \$ \_\_\_\_\_

**Do you have interest in a trust fund?** \_\_\_\_\_

**Do you have interest in a trust fund?** \_\_\_\_\_

**Life Insurance**

**Life Insurance**

Face Value..... \$ \_\_\_\_\_

Face Value..... \$ \_\_\_\_\_

Cash Value..... \$ \_\_\_\_\_

Cash Value..... \$ \_\_\_\_\_

Company Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Phone Number: \_\_\_\_\_

*Attach additional sheets as necessary and list all assets owned individually and jointly, regardless of whose name the account(s) is titled in. If married, both veteran and spouse must provide the above financial information whether or not both are admitting. I understand that, by order of the Iowa Commission of Veterans Affairs, failure to disclose my full income and assets and those of my spouse may be cause for discharge from the Iowa Veterans Home.*

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
Signature of applicant or legal financial representative

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
Signature of spouse or legal financial representative