GUARDIANSHIP DISASTER PLAN

 Photograph

 2 x 2

Date of Plan August 2022 Attach Here

1. Ward’s Name: McKinley Hunter Brown
2. Ward’s Case #: 22-7224-GD-3
3. Address and Phone: 1692 Lago Vista Blvd., Palm Harbor, Florida 34685
4. Aliases:
5. Identifying Factors:
6. Date of Birth: May 25, 2004
7. Eye/Hair Color:
8. Height/Weight/Sex:
9. Race/Religion:
10. Medicare Number:
11. Additional Insurance:
12. Physician’s Name and Phone:
13. Allergies:
14. Disabilities and Impairments: Intellectual Disabilities
15. Guardian’s Name: Hunter and Cheryl Brown
16. Address: 1692 Lago Vista Blvd., Palm Harbor, Florida 34685
17. Phone: (813) 714-9664 and (813) 918-1480
18. Email Address: hunterphfr@gmail.com and cmcbrown@me.com
19. Living Will: No
20. Attorney’s Name and Phone: Travis D. Finchum; (727) 443-7898
21. In case of evacuation, where will ward be relocated to? (provide address/phone number)