

PLAN of California Master Pooled Trust

Case Assessment and Supplemental Needs Plan

Submit to: PLAN of California Master Pooled Trust
c/o Binder & Co., Attn: Eric Binder, Trust Agent
1800 Century Park East, Suite 400, Los Angeles CA 90067
Fax: (310) 773-4699 Voice: (310) 476-6869

Beneficiary Name: _____ **Trust #:** _____
Address _____
City, State, Zip _____
Phone: _____ Fax#: _____ Email: _____

Submitted by: _____, **Primary Representative**
Address: _____
City, State, Zip: _____
Phone: _____ Fax#: _____ Email: _____

The following Supplemental Needs are desirous for the Beneficiary:

Re-occurring Expenses: (Items to be paid for on a re-occurring basis. If exact amount not known, estimate an average amount. Add additional page if necessary.)

Payee _____	Account # _____	Purpose _____	Yearly Total \$ _____
Payee _____	Account # _____	Purpose _____	Yearly Total \$ _____
Payee _____	Account # _____	Purpose _____	Yearly Total \$ _____
Payee _____	Account # _____	Purpose _____	Yearly Total \$ _____
Payee _____	Account # _____	Purpose _____	Yearly Total \$ _____

Non re-occurring Expenses: (These are items that will/may be requested at some point during the year)

Purpose _____	Yearly Total \$ _____
Purpose _____	Yearly Total \$ _____
Purpose _____	Yearly Total \$ _____
Purpose _____	Yearly Total \$ _____
Grand Total \$ _____	

Note: The Case Assessment and Supplemental Needs PLAN serves as a budget for disbursements and should be reviewed by Primary Representative on an annual basis. Disbursements from a First Party Special Needs Trust can only be made for the "sole benefit" of the grantor/beneficiary. If and when the Case Assessment and Supplemental Needs PLAN is revised, please submit it to PLAN of California Master Pooled Trust, c/o Binder & Co., 1800 Century Park East, Suite 400, Los Angeles CA 90067.

Signature of Primary Representative

Dated: _____

With a trust balance of \$ _____, at the above rate of spending a trust receiving a _____ % rate of return is expected to last _____ years. This is an estimate only and is based upon ASSUMPTIONS. There is no representation that a trust will last this long.

by: _____ Dated: _____
Binder & Co., Trust Administrative Agent for PLAN of California Master Pooled Trust
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