

# 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  
9000 Sunset Blvd, Suite 1250, West Hollywood CA 90069  
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 \$ _____
<b>Grand Total \$ _____</b>	

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. 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., 9000 Sunset Blvd, Ste 1015, West Hollywood CA 90069

\_\_\_\_\_  
Signature of Primary Representative

Dated: \_\_\_\_\_

Signature of Primary Representative

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With a trust balance of \$ \_\_\_\_\_, at the above rate of spending in 2007, 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  
9000 Sunset Blvd. Ste 1015, West Hollywood CA 90069 – Fax (310) 773-4699 – Voice (310) 476-6869

Effective: January 1, 2011