

Management Plan

Note: You can save this form on your computer at any time during completion, to do so, click on the logo representing a floppy disk on the toolbar in acrobat reader, or click in "File" then "Save as" in the acrobat reader's menu.

PUBLIC GUARDIAN'S REF

PG/

DATE OF APPOINTMENT

(As per Court Order. If you had interim financial powers, give the date of the Interim Order)

Adult

TITLE

SURNAME

FORENAME

CURRENT ADDRESS

Guardian

TITLE

SURNAME

FORENAME

EMAIL

TELEPHONE NUMBER

If more than one Financial Guardian has been appointed, please tell us who will be the primary point of contact. This will be helpful, particularly if clarification or further information is needed by this office.

ARE YOU THE PRIMARY
POINT OF CONTACT?

YES

NO

Joint Guardian (If Applicable)

TITLE:

SURNAME:

FORENAME:

EMAIL:

TELEPHONE NUMBER:

ARE YOU THE PRIMARY
POINT OF CONTACT?

YES

NO

Joint Guardian (If Applicable)

TITLE:

SURNAME:

FORENAME:

EMAIL:

TELEPHONE NUMBER:

ARE YOU THE PRIMARY
POINT OF CONTACT?

YES

NO

Section 1 - Adult's Regular Living Expenses

ITEM	AMOUNT	FREQUENCY	ANNUAL AMOUNT
Gas			
Electricity			
Telephone			
Satellite/Cable TV			
TV Licence			
Mortgage Rent (Please select)			
Insurances			
Council Tax			
Care Charges			
Loan Repayments			
Support for dependents			
Food and Household Expenses			
Clothing			
Holidays			
Other (please specify e.g. subscriptions, toiletries, hairdressing, sweets, pocket money etc.)			
TOTAL ANNUAL EXPENDITURE £			

Section 2 - Intended Use of Heritable Property

e.g. adult/adult's family/spouse will continue to live there or property to be sold or rented etc.
please give details.

Section 3 - Proposed method of Investment / Disposal of Moveable Assets

Is the moveable estate under £50,000?

Is the moveable estate over £50,000?

Is the moveable estate over £50,000, financial advice is enclosed?

Is the moveable estate over £50,000, financial advice is to follow?

In order to maintain the adult's lifestyle and expenditure as appropriate and maximise the return from their income and investments, use the space below to state what actions you propose to take. For example, with regards to the adult's bank/building society accounts do you intend to make any changes such as moving the funds from one account to another type of account or perhaps intend making no changes at all?

If the adult has other income or investments such as stocks and shares, please outline below what you propose to do. Also, if there is a shortfall between the adult's annual income and expenditure, tell us how you propose to deal with this.

Section 4 - Tax Planning Proposals

(Please note this must be in line with the wishes of the adult as far as they can be ascertained and Inland Revenue Guidelines)

Section 5 - Proposals for Provision of Gifts e.g. Birthday, Anniversary, Christmas etc.

NO OF RECIPIENTS	PURPOSE	AMOUNT	FREQUENCY	ANNUAL AMOUNT

TOTAL ANNUAL GIFTS £

Section 6 - Other Proposals

Section 7 - Proposals for Contact with Adult and/or any other relevant persons

To ensure that the adult's needs are identified and will be met the Code of Practice advises that where possible, it is good practice to meet the adult, nearest relative, primary carer, social worker, named person or any other person with an interest in the adult's affairs at least once every six months.

Signature of Financial Guardian(s)

(Please note where more than one financial guardian is appointed all require to sign and date below)

FINANCIAL GUARDIAN	<input type="text"/>	DATE	<input type="text"/>
FINANCIAL GUARDIAN	<input type="text"/>	DATE	<input type="text"/>
FINANCIAL GUARDIAN	<input type="text"/>	DATE	<input type="text"/>

THE FORM IS NOW COMPLETE, PLEASE PRINT IT AND SEND IT TO:

The Office of the Public Guardian
Hadrian House
Callendar Business Park
Callendar Road
Falkirk
FK1 1XR

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LP: LP-17 Falkirk

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