PALADIN FINANCIAL CONSULTANCY

Paladin Financial Consultancy
Financial Checklist

Name of Deputy/Trustee or Attorney:

Name of client(s):

Date of birth:

Gender: M

Martial Status:

Benefit Check Requested?	Yes	☐	No	☐	N/A	☐
Funding Applications made?	Yes	☐	No	☐	N/A	☐
Will up to date?	Yes	☐	No	☐	N/A	☐
Funeral Plan in place?	Yes	☐	No	☐	N/A	☐

Background, objectives and any important information to be aware of:

Client's living arrangements: (Does the client own their own home or rental property?)

Assets: Please fill in the below or attach a budget.

Current Account:	
Cash ISA:	
Investment Portfolios:	
Stocks and Shares ISA:	
Investment Bonds:	
Pension: (If yes specify if it is money purchase or defined benefit)	
Unit Trust/OEICs	
Property/Other:	

Income: Please fill in the below or attach a budget.

Income Type (PIP, ESA, etc.	Amount	Frequency? 4wks/pm/pa

One off cash inflow: Expected income in the future (House Sale, Settlement or Inheritance)

Amount:	Month and year of expectancy	Tax Free? Yes or No

Expenditure: Please fill in the below or attach a budget.

Type	Amount	Frequency? pm/pa
Travel		
Health		
Living		
Household		
Leisure		
Holidays		
Dependants		
Financial		
Loans		
Care Costs		
Other		
Professional Fees (i.e Deputy Fees)		

One-off Planned Expenditure: (House Purchase/Adaptations/Gifts)

Amount:	
Description/Info:	

Other Useful Information:

If available, please also send the following:

- 2 Items of ID for the Client.
- Copy of LPA/Trust/Deputyship Order.
- Details of medical conditions/care report.