

9035 Sweet Valley Dr. Valley View, OH 44125 lineweaver.net Phone: (216) 520-1711 Fax: (216) 520-1709

There is one thing certain about your monthly expenses and bills: they continue to come, even if your income ceases because of illness. Our disability worksheet may be helpful in determining your current cash flow situation. We also would urge you to call one of the professionals at Lineweaver to make sure you have the right plan for any shortfalls you might uncover. You also need to understand potential reductions in your quality of life during these stressful times.

DISABILITY INSURANCE WORKSHEET

Where Do I Stand?

What are my income sources:	<u>Answer</u>
Regular monthly gross income?	
In the case of a disability, what is my employer income continuation for:	
First 90 Days	
Next 90 Days	
Benefits after 6 Months	
What is my income from other assets?	
MY TOTAL INCOME IN THE CASE OF A DISABILTY	
What are my <u>ongoing expenses</u> :	
Total monthly expenses?	
Fixed monthly expenses (portion of total monthly expenses)?	
Variable monthly expenses (portion of total monthly expenses)?	
What are my income needs based on Quality of Life at:	
100% of Total Expenses	
80% of Total Expenses	
60% of Total Expenses	
What is my potential monthly income gap in the case of a disability?	