

APPLICATION FOR LAWYERS PROFESSIONAL LIABILITY INSURANCE CLIENT INFORMATION SUPPLEMENT

Policy Number:			Effective Date (m/d/yyyy):						
Nature of Client's Business	Specific Legal Services Rendered for Client *** See NOTE below	Is this a Current Client? Date of First Affiliation	% of Ownership Interest	Name of Attorney(s) rendering legal services, having ownership interest or holding an officer position	Officer Position Held	% of Firm's Total Gross Billings from Client – If over 25%, answer Question 1 below	Publi Trade If Yes, a Questi	icly ed? inswe ion 2	
		Yes □ No □					Yes □	No [
		/							
		Yes □ No □					Yes □	No [
		/							
		Yes □ No □					Yes 🗆	No [
		/							
		Yes □ No □					Yes 🗖	No [
		Yes □ No □					Yes □	No [
		/							
s of the firm's confl	ict of interest system.	Outline the impact t	the loss of this client	would have on the fir	m. Explain if the gro	ess billings were the r		: large	
	Nature of Client's Business	Nature of Client's Business Rendered for Client *** See NOTE below cumenting legal services rendered, refers of the firm's conflict of interest system.	Nature of Client's Business Specific Legal Services Rendered for Client *** See NOTE below Yes No Personal No Pe	Nature of Client's Services Rendered for Client *** See NOTE below Yes No Yes Yes Yes No Yes	Nature of Client's Business Specific Legal Services Rendered for Client *** See NOTE below See NOTE below See Note of First Affiliation See Note of See Note	Nature of Client's Business Specific Legal Services Rendered for Client *** See NOTE below No Date of First Affiliation Yes No Date	Nature of Client's Business Specific Legal Services Rendered for Client ** See NOTE below	Nature of Client's Business Specific Legal Services Rendered for Client *** See NOTE below	

Financial/Investment Services or Tax Work? Yes

No

If yes, explain steps taken to insure compliance via attachment.