



# AREA OF PRACTICE SUPPLEMENT

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APPLICANT: \_\_\_\_\_

**I. ENTERTAINMENT:** Please complete if the firm lists any percentage of their gross revenues.  N/A

1. Complete for all entertainment clients (e.g. athletes, authors, performers, public figures, etc.) in the past 2 years:

Client's Name	Field of Entertainment	Types and Dates of Services Provided	Still a Client?
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

2. In the past 2 years, has the law firm or any member of the law firm for whom coverage is sought:

- a. entered into a business relationship with any of the law firm's entertainment clients other than the providing of legal services?  Yes  No
- b. been granted the authority to write checks for any of the entertainment clients?  Yes  No
- c. provided investment advice or made investments for any of the entertainment clients?  Yes  No
- d. served as the trustee of the entertainment client's trust?  Yes  No
- e. negotiated personal appearances or product endorsements for clients?  Yes  No

3. Does the law firm or any related or controlled entity, or any attorney for whom coverage is sought, serve as a manager or as a talent agent?  Yes  No

4. Does the law firm or any member for whom coverage is sought ever accept:

- a. percentages of deals as compensation for legal fees?  Yes  No
- b. compensation in kind (e.g. copyrights) in return for legal services?  Yes  No

*If "Yes" to any part of Questions 2, 3 or 4 above, please attach details.*

**II. ENVIRONMENTAL:** Please complete if the firm lists any percentage of their gross revenues.  N/A

1. Complete for all attorneys handling Environmental matters:

Attorney	Years of Environmental Experience	% of Time Devoted to Environmental Practice

2. a. In the past 2 years, how many environmental opinion letters has the law firm issued? \_\_\_\_\_
- b. How many of these were included in any securities (exempt or non-exempt) registration statement, prospectus, or offering circular? \_\_\_\_\_
3. In the past 2 years, have any former or current clients been involved in any way in any of the following:
- a. polluted or contaminated properties in which the cleanup cost could exceed \$1,000,000?  Yes  No
  - b. a property that was or is on the National Priority List (NPL), or was or is on any state priority list?  Yes  No
  - c. client was named as a Responsible Party (RP), or Potentially Responsible Party (PRP) to a polluted or contaminated site?  Yes  No
  - d. client was involved in the sale, purchase, or lease of any property having known pollution, contamination, or other environmental problems?  Yes  No

*If "Yes" to any part of Question 3., provide attach details, including dates, a general description of the matter, current status, and a description of the legal services provided to this client.*

**III. INTELLECTUAL PROPERTY:** Please complete if the firm lists any percentage of their gross revenues.  N/A

1. Complete for all attorneys handling Intellectual Property matters:

Attorney	Area of Concentration (e.g. copyright, patent)	Years of IP Experience	CLE Credits in IP in the past 2 years

2. Provide a breakdown of your practice based on gross revenues by showing the percentages for the following:

Practice	%	Practice	%
Domestic Patent Prosecution		Intellectual Property Litigation	
Foreign Patent Prosecution		Trademark/copyright Prosecution & Licensing – Foreign	
Patent Infringement Opinions		Trademark/copyright Prosecution & Licensing – Domestic	
Patentability Searches/Opinion		Other (please specify):	

3. Does the law firm refer clients to other law firms or act as co-counsel with other firms regarding intellectual property law matters?  Yes  No
4. Does the law firm or any member of the law firm:
- a. Have a business relationship with any of the law firm's intellectual property clients other than the rendering of legal services?  Yes  No
  - b. Accept a percentage of the dollar value of a transaction in lieu of legal fees?  Yes  No
  - c. Accept compensation in kind (e.g. royalties, share of a client's corporation, copyrights, etc.) in return for legal services?  Yes  No

*If "Yes" to any part of Question 4., please attach details.*

**IV. PLAINTIFF:** Please complete if the firm lists any percentage of their gross revenues.

N/A

1. Break down the firm's plaintiff practice according to the following:

Specialty	%	Specialty	%
Admiralty	%	Motor Vehicle	%
Aviation	%	Non-Medical Professional Negligence	%
Asbestos	%	Personal Injury	%
Class Action*	%	Product Liability	%
Construction Defect	%	Property Damage	%
Legal Malpractice	%	Workers Compensation	%
Mass & Toxic Tort	%	Other (please specify):	%
Medical Malpractice	%		

**\*For any Class Action, please attach details on each matter, including whether the firm acted as local or lead counsel, size of class, nature of the case and current status/resolution.**

1. Total number of personal injury cases during the last 12 months: \_\_\_\_\_
2. Average number of cases each attorney handles per year: \_\_\_\_\_
3. Average dollar value of cases in the past 2 years: \$ \_\_\_\_\_
4. Maximum dollar value of any one case in the past 2 years: \$ \_\_\_\_\_
5. Percentage of cases referred by other law firms: \_\_\_\_\_%
6. Percentage of cases the law firm refers to other law firms and retains a portion of the fees: \_\_\_\_\_%
7. Are written referral agreements used in all cases which are referred to the law firm?  Yes  No
8. Are written referral agreements used and certificates of insurance obtained in all cases referred to other law firms?  Yes  No
9. Does the law firm accept cases within 6 months of the Statute of Limitations?  Yes  No

**V. SECURITIES:** Please complete if the firm lists any percentage of their gross revenues.

N/A

1. Complete for all attorneys handling securities matters:

Attorney Name	Billable Hours: Past 12 Months	Billable Hours: Prior 12 Months	Years of Securities Experience

2. Please provide the following information for each securities filing, including those that were withdrawn, unsuccessful, exempt and any anticipated within the next 90 days.

Date Offering Began	Name of Issuer	Type of Offering (1)*	Nature of Client's Business	Dollar Amount of Offering	Description of Security	Registered or Exempt Offering	Opinion Rendered ? Y/N	Applicant Lawyer For? (2)*
				\$				
				\$				
				\$				
				\$				
<u>*(1) Key</u> <b>B</b> – Bond (Private) <b>GBO</b> – Government Bond Offer <b>LP</b> – Limited Partnership			<b>PR</b> – Private Placement <b>IPO</b> – Initial Public Offer <b>SPO</b> – Secondary Public Offer <b>SY</b> - Syndication		<u>*(2) Key</u> <b>A</b> - Auditor <b>I</b> - Issuer <b>L</b> - Lender		<b>P</b> - Purchaser <b>U</b> - Underwriter <b>O</b> - Other	

*If "Yes" to any part of Question 11., please attach details.*

**VI. TAX OPINIONS:** Please complete if the firm lists any percentage of their gross revenues.  N/A

1. Complete for all attorneys handling tax opinion matters:

Attorney Name	Billable Hours: Recent 12 Months	Billable Hours: Prior 12 Months	Years of Tax Experience

2. With respect to taxation work undertaken in the past 2 years, indicate what percentage of the gross revenues from taxation were derived from the following:

- |                                                     |         |
|-----------------------------------------------------|---------|
| a. Investment counselor services                    | _____ % |
| b. Opinions on tax shelters                         | _____ % |
| c. Opinions involving private placement memorandums | _____ % |
| d. Personal tax returns                             | _____ % |
| e. General Corporate                                | _____ % |
| f. §1031 Tax Exchanges                              | _____ % |
| g. All other tax related work                       | _____ % |

With respect to each of the answers provided to question 2 above, please provide on a separate sheet a narrative description of the services provide.

3. In the past 2 years has your firm helped create or write an opinion supporting a transaction whose primary purpose was to reduce federal taxes, where the tax saved or to be saved was \$1 million or more?

Yes  No

*If "Yes", please provide the following:*

Type of Transaction	Any in Past Two Years?	# of Transactions	Aggregate Amount of Tax Saving
Use of grantor trusts to realize capital gains	<input type="checkbox"/> Yes <input type="checkbox"/> No		\$
Currency trades and currency option trades to generate losses	<input type="checkbox"/> Yes <input type="checkbox"/> No		\$
Devices to delay taxes on stock option gains	<input type="checkbox"/> Yes <input type="checkbox"/> No		\$
Devices to offset gains from the sale of a business or other assets	<input type="checkbox"/> Yes <input type="checkbox"/> No		\$
Use of "split dollar" or "split premium" insurance	<input type="checkbox"/> Yes <input type="checkbox"/> No		\$
"Potentially abusive tax shelters" as that term is defined by the IRS?	<input type="checkbox"/> Yes <input type="checkbox"/> No		\$
Any other devices sometimes referred to as "tax shelters" (Please attach details on separate sheet)	<input type="checkbox"/> Yes <input type="checkbox"/> No		\$

4. During the past 5 years, has the IRS challenged any transactions where your firm participated in or opined on the transaction?  Yes  No

*If "Yes", please provide the following:*

Type of Transaction	Amount in Dispute	Status or Ultimate Disposition Challenge
	\$	
	\$	

5. During the past 5 years, has your firm been served by the IRS with an administrative summons or been the subject of any other federal, state or local government proceeding?  Yes  No

*If "Yes", what was the status or ultimate disposition?* \_\_\_\_\_

\_\_\_\_\_

**NOTICE:**

**Applicant understands that the information submitted herein becomes part of the Applicant's Lawyers Professional Liability Insurance Application or Renewal Application and is subject to the same representations, notices and conditions.**

**This application must be signed and dated by an Owner, Partner or Principal as duly authorized on behalf of the Applicant.**

\_\_\_\_\_  
Signature of Owner, Partner or Principal

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Licensed Agent

\_\_\_\_\_  
License Number