

## APPLICATION FOR LAWYERS PROFESSIONAL LIABILITY INSURANCE

## EQUITY / OUTSIDE INTEREST / GROSS BILLINGS SUPPLEMENT

Firm Name:	
Policy Number:	
Effective Date:	

Name of Client	Name of Attorney	Position Held	Nature of business	Current Client?	Nature of Services Rendered	Ownership Interest	Gross Billings
				yes no		%	%
				yes no		%	%
				yes no		%	%
				yes no		%	%
				yes no		%	%