

## LAWYERS PROFESSIONAL LIABILITY FINANCIAL INSTITUTION SUPPLEMENT

| Fu | Name of Applicant Firm:                                                                                                                                                                                                                                                                                                          |      |
|----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|
|    | Complete this supplement for EACH Financial Institution that has been a client of the firm within the last three years.                                                                                                                                                                                                          |      |
| 1. | Name of Financial Institution:                                                                                                                                                                                                                                                                                                   |      |
| 2. | Type (check one): 🔲 Bank 🔲 Savings & Loan 🗌 Savings Bank 🔲 Other (Please describe)                                                                                                                                                                                                                                               |      |
| 3. | Location:                                                                                                                                                                                                                                                                                                                        |      |
| 4. | Name(s) of attorneys representing this financial Institution:                                                                                                                                                                                                                                                                    |      |
|    | Date(s) of representation:                                                                                                                                                                                                                                                                                                       |      |
| 5. | Has this Financial Institution:                                                                                                                                                                                                                                                                                                  |      |
|    | <ul> <li>Failed, merged or been sold at regulatory direction?</li> <li>If yes, explain:</li> <li>Operated or is operating under some form of Regulatory Agreement?</li> <li>Yes</li> <li>No</li> <li>If yes, explain:</li> </ul>                                                                                                 |      |
|    | Been involved in subprime lending or loans to subprime borrowers? Yes No                                                                                                                                                                                                                                                         |      |
| 6. | Check all professional services you render(ed) for this Financial Institution:         General Counsel       Foreclosure Work         Regulatory Counsel       Collections/Bankruptcy         Securities Counsel       Residential Real Estate         Fidelity Bond Claims       Loan Documentation         Other:       Other: |      |
| 7. | With regard to this Financial Institution, has any attorney or former attorney:                                                                                                                                                                                                                                                  |      |
|    | a. Had loan commitments?                                                                                                                                                                                                                                                                                                         | ] No |
|    | b. Held any equity interest?                                                                                                                                                                                                                                                                                                     | ] No |
|    | c. Been a member of any internal committees of the above institution?                                                                                                                                                                                                                                                            | ] No |
|    | d. Date(s) of affiliation:                                                                                                                                                                                                                                                                                                       |      |
| 8. | Is any litigation threatened or pending against any Director, Officer or other member of this Financial<br>Institution?<br>If yes, explain:                                                                                                                                                                                      | ] No |
|    |                                                                                                                                                                                                                                                                                                                                  |      |
|    | Signature of Officer or Partner of Firm       Print name of Officer or       Date         Partner       Partner       Partner                                                                                                                                                                                                    |      |