

ADVERTISING AGENCY/PUBLIC RELATIONS

SUPPLEMENTAL APPLICATION

1) Estimated gross annual billings for current fiscal period \_\_\_\_\_ and approximate percentage in the following media:

Radio \_\_\_\_\_ TV \_\_\_\_\_ Newspaper \_\_\_\_\_

Outdoor \_\_\_\_\_ Magazines \_\_\_\_\_ Other (specify) \_\_\_\_\_

List major clients:

2) Please complete the appropriate sections indicating the approximate percentages of your total operations:

- |   |       |   |
|---|-------|---|
| A) Public relations consultant                                | _____ | % |
| B) Mail order or catalogue sales firm                         | _____ | % |
| C) Publishing   | _____ | % |
| D) Broadcasting   | _____ | % |
| E) Production of films, radio or television programs          | _____ | % |
| F) Photo service  | _____ | % |
| G) Package design/logos/trademarks/other corporate identities | _____ | % |

If involved in the section G) above, please provide the following:

(a) Number of trademarks developed per year: \_\_\_\_\_

(b) Description of legal review procedures for trademarks/  
copyrights:

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**Page 2**

- 3) Does applicant's activities involve set up and/or management of promotional games, contests, lotteries, sweepstakes, or other games of chance? ( ) YES ( ) NO**

**If YES, provide details including specific contracts and approximate percentage of your total operation:\_\_\_\_\_**

\_\_\_\_\_  
\_\_\_\_\_

**It is understood and agreed that this supplemental application shall become a part of the application for Professional Liability Errors & Omissions Insurance.**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Name of Applicant**

\_\_\_\_\_  
**Signature of person authorized  
to execute on behalf of the  
Applicant**