

TRUSTEES SUPPLEMENTAL APPLICATION

- 1) Please attach the following:
A) The Trust Document; B) Resumes of all Trustees;
C) Most recent audited Financial Statements of the Trust.
- 2) Is there any commingling of the Trust's funds with any other funds? () YES () NO. If YES, please attach full details.
- 3) Are the Trustees beneficiaries of the Trust? () YES () NO. If YES, please attach full details.
- 4) Do the Trustees have discretionary authority in investment of Trust's funds? () YES () NO. If YES, please attach full details.
- 5) Is an independent Investment Counselor used? () YES () NO. If YES, what is his/her name? _____
- 6) Is an independent Certified Public Accountant used to prepare and file the Trust's financial statements and tax forms? () YES () NO. If YES, what is his/her name? _____
- 7) Do any of the Trustees have a current loan, or have they ever had a loan, from the Trust? () YES () NO. If YES, please attach full details.
- 8) If applicable, in what year is the Trust to be dissolved? _____
- 9) What is the Asset Value of the Trust in question? \$ _____
- 10) What type of Trust is being Administered?
 _____Beneficiary _____Liquidating _____Bankruptcy

It is understood and agreed that this supplemental application shall become 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