

PRINTERS

SUPPLEMENTAL APPLICATION

Applicant:

1. Please complete the appropriate sections indicating the approximate percentages of your total operations (based upon revenues):

- | | |
|---|--|
| a. Business and Legal Forms | <input style="width: 80%; height: 15px;" type="text"/> % |
| b. Newspapers and Magazines | <input style="width: 80%; height: 15px;" type="text"/> % |
| c. Pamphlets and Flyers | <input style="width: 80%; height: 15px;" type="text"/> % |
| d. Discounts/Rebate Coupons | <input style="width: 80%; height: 15px;" type="text"/> % |
| e. Lottery Tickets | <input style="width: 80%; height: 15px;" type="text"/> % |
| f. Books | <input style="width: 80%; height: 15px;" type="text"/> % |
| g. Yellow Page Directories | <input style="width: 80%; height: 15px;" type="text"/> % |
| h. Catalogs | <input style="width: 80%; height: 15px;" type="text"/> % |
| i. Corporate/Financial (Annual Reports, Prospectus, Stock Reports) | <input style="width: 80%; height: 15px;" type="text"/> % |
| j. Social Printing (Wedding Invitations, Calling Cards, Announcements) | <input style="width: 80%; height: 15px;" type="text"/> % |
| k. Bindery | <input style="width: 80%; height: 15px;" type="text"/> % |
| l. Other (please specify) | <input style="width: 80%; height: 15px;" type="text"/> % |

2. Does the applicant's activities involve the distribution and/or redemption of coupons, rebates or other promotional game/lottery tickets? YES NO

If YES, please provide details including specific contracts:

3. Does the applicant's activities involve design of logos or trademarks? YES NO

a. Number of trademarks developed per year:

b. Description of legal, review, procedures for trademarks/copyrights

4. Does the applicant require clients to approve proof copies before printing? YES NO

a. If YES, is approval given in writing? YES NO



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

Name of applicant:

Signature of person authorized to execute on behalf of the applicant:

Date:

A copy of this application should be retained for your records.