☐National Union Fire Insurance Company of Pittsburgh, Pa.®

LAWYERS PROFESSIONAL LIABILITY APPLICATION

SUPPLEMENT F- SECURITIES

PART II

STATE OF FLORIDA

		Name of Issuer	Name of Issuer
1.	Date of Offering		
2.	Type of Offering		
3.	Description of Security		
4.	Type of Business		
5.	Did Firm Render Tax Option		
6.	Date of Issuer Incorporation/Formation		
7.	Dollar Size of Offering		
8.	Which Party did Firm Represent?		
9.	Months as Client		
10.	Is Firm Affiliated with Issuer?		
11.	Did/will Firm Invest in Offering? To What Extent?		
12.	Rating of Issue/Bond		
13.	Rating Service		
14.	Underwriter		
15.	Accountant		
16.	Number of States Where Offered		
17.	Market Where Traded		
18.	Responsible Lawyer		
19.	Do any Lawyers Act as Director if Officer for Issuer?		

For Type of Offering indicate: PR – Private Placement SPO – Secondary Public Offering SY – Syndication
IPO – Initial Public Offering B – Bond (Private) M – Municipal Financing

For Which Party Did Firm Represent indicate: I – Issuer L – Lender P – Purchaser O – Other (specify)
U – Underwriter IC – Insurance Company A - Auditor

_____ _____
Authorized Representative of the Firm Date:

_____ _____
Print Name Attest

_____
Title (Must be signed by the managing Partner,
managing executive, principal, business manager
or risk manager of the **Firm**)

NOTICE TO FLORIDA APPLICANTS: ANY PERSON WHO KNOWINGLY AND WITH INTENT TO INJURE, DEFRAUD, OR DECEIVE ANY INSURER FILES A STATEMENT OF CLAIM OR AN APPLICATION CONTAINING ANY FALSE, INCOMPLETE OR MISLEADING INFORMATION IS GUILTY OF A FELONY IN THE THIRD DEGREE.

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