

ENTERTAINMENT AND INVESTMENT COUNSELING /
MONEY MANAGEMENT
SUPPLEMENTAL APPLICATION

**INTERSTATE
INSURANCE
GROUP**

Name of Firm: _____

1. Provide a brief description of the nature and scope of your representation.

2. List all entertainment and sports clients who are public figures (Attach a supplemental sheet if necessary).

3. Does your firm have the authority to write or sign checks for any of your entertainment, sports or investment clients? If Yes, explain. Yes No

4. Does any member of your firm:

(a) Receive commissions, fees, reciprocity, or revenue for sale, promotion or recommendation of investments or tax shelters? Yes No

(b) Organize, arrange or procure investments, real estate or tax shelters? Yes No

(c) Participate in the management of any investment partnership, limited partnership or other investment venture? Yes No

(d) Make recommendations as to the sale or purchase of specific stocks, bonds or other securities? Yes No

If Yes to any of the above, please provide details below (nature of services, number of clients, types of investments, etc.)

5. Does your firm receive any compensation from lenders for arranging financing? If Yes, explain. Yes No

6. Does your firm have the authority to write or sign checks for any of your entertainment, sports or investment clients? If Yes, explain. Yes No

7. Does your firm or any related or controlled entity represent both a performer and any company with which the performer has an agreement, relationship or contract? Yes No

If Yes, identify the performer and the nature and scope of the contract or relationship between the performer and the company by attachment.

I understand the information submitted herein becomes a part of my Professional Liability Insurance Application and subject to the same warranty and conditions.

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing any false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act.

Signature of Owner, Officer, or Partner

Date