GeneralStar™

FINANCIAL INSTITUTION SUPPLEMENTAL APPLICATION

Administered by:
ProAccess, LLC
125 S. Wacker, Suite 300
Chicago, IL 60606

NOTE: The term "Financial Institution" includes any savings and loan association, building and loan association, bank or credit union, and includes any of their parent companies, subsidiaries, or affiliates.

APPLICANT'S INSTRUCTIONS:
This form is to be completed if Applicant firm answered Yes to Section III, Client Relations, Question 3.c. in the main application. If space is insufficient to answer any question fully, attach a separate sheet. Answer all questions completely.

APPLICANT FIRM: _____

1. Please complete the following for each "Financial Institution" for which the Applicant firm has provided any kind of legal or other service at any time within the past five (5) years:**

Name of Financial Institution	City, State of Corporate Headquarters	Client of Firm From/To Dates (mm/dd/yy to mm/dd/yy)	List All Legal Services Provided at Any Time	Involvements - Indicate Designation Code*

* **Designation Codes:**
C = Commercial Loan Due Diligence or Documentation
D = Director or Officer
E = Executive Committee Member
O = Other (write in brief description)
F = Internal Loan Committee Member
G = General Counsel
I = Investment Advisory Committee Member
L = Loan Committee Member

** If firm has had more than five (5) "Financial Institution" clients, please list all of the above information for each of those clients on a separate sheet.

2. During the past five (5) years, has the Applicant firm done either of the following:

   a. Provided any kind of legal or other service to any "Financial Institution" that has ceased operations, gone insolvent, gone into liquidation or receivership, been involved in any federally assisted sale or merger, or is now controlled or operated by the RTC, FDIC, FSLIC, or any other state or federal government agency? ☐ Yes ☐ No

   b. Been named as a defendant in any kind of civil litigation which is in any way related to any "Financial Institution?" ☐ Yes ☐ No

   If Yes, to either of the above questions, please provide complete details on a separate sheet.

The undersigned understands the information submitted herein becomes a part of the Applicant firm's Professional Liability Insurance Application and is 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	Print or Type Name and Title	Date (month-day-year)

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