



Knight Specialty Insurance Company

LAWYERS PROFESSIONAL LIABILITY Domestic Relations Supplement

1. Name of Applicant or Insured: _____

2. How many attorneys in the firm practice in this area? _____

3. What percentage of **your** Domestic Relations practice involves the following:
a. Divorce: _____ %
b. Juvenile/Guardianship: _____ %

4. What percentage of **your** Divorce practice involves:
a. Assets <\$1,000,000 _____ %
b. Assets \$1,000,000 - \$5,000,000 _____ %
c. Assets >\$5,000,000 _____ %

5. For any celebrity, sports, entertainment, high-profile, or high-net worth Domestic Relations clients in the past two (2) years, please provide the following:

Client	Dates of Engagement	Services Provided	Value of Case

6. Do **you** provide any of the following services (if "YES" please describe below):
a. Embryo Donation Agreements Yes ___ No ___
b. Ovum or Sperm Donation Contracts Yes ___ No ___
c. Surrogacy Contracts Yes ___ No ___

Describe:

Signature of Applicant: _____ Date: _____