

**St. Paul Fire and Marine Insurance Company
Saint Paul, Minnesota**

Your Name (legal name of the law firm or individual applying for this insurance):

1. Within the past five years, how many environmental opinion letters have you issued? _____
 How many of these were included in any securities (exempt or nonexempt) registration statement, prospectus,
 or offering circular? _____

2. Within the past five years, have any of your former or current clients been involved in any way in any of the
 following? If yes, on a separate sheet provided details, including dates, description of the situation, and
 description of the situation, and description of the legal services you provided to such client.
 - a. Polluted or contaminated properties where the clean-up costs did or could exceed \$1,000,000? Yes No
 - b. Property that was or is on the National Priority List or any similar state priority list? Yes No
 - c. Client was named as a Responsible Party or Potentially Responsible Party to a polluted or contaminate
 site? Yes No
 - d. Client was involved in the sale, purchase, or lease of any property having known pollution, contamination,
 or other environmental problems? Yes No
 - e. Client was involved in any way with any "Brownfield"? Yes No

YOUR SIGNATURE AND AUTHORIZATION

The undersigned authorized representative of the firm, or individual if this application is for an individual, agrees to all to the following:

- The statements and representations made in this supplement are true and complete and will be deemed material to the acceptance of the risk assumed by The St. Paul in the event an insurance policy is issued.
- If the information supplied in this supplement changes between the date of the application and the effective date of any insurance policy issued by The St. Paul in response to this application, you will immediately notify us of such changes, and we may withdraw or modify any outstanding quotation or agreement to bind coverage.
- The St. Paul is authorized to make an investigation and inquiry in connection with this supplement.
- The St. Paul is not bound or obligated to issue any insurance policy or to provide the insurance requested in this supplement.

Signature (Partner, Member, Officer, Shareholder)	Title	Date
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Important note. This supplement to your application is not a representation that coverage does or does not exist for any particular claim or loss, or type of claim or loss, under any insurance policy issued by The St. Paul. Whether coverage exists or does not exist for any particular claim or loss under any such policy depends on the facts and circumstances involved in the claim or loss and all applicable wording of the policy actually issued.