Firm

Computer-Related Services Supplement S-3.4

1. Please indicate the percentage of total sales generated by the following types of services provided or performed by the Firm or a subsidiary or related entity for the current and previous year:

|  |  |  |
| --- | --- | --- |
| Type of Services | Current Year | Previous Year |
| Software Installation | % | % |
| Client Training | % | % |
| Hardware Sales | % | % |
| **Computer-Related Consulting Services:** |  |  |
| Diagnostic Services | % | % |
| System Testing | % | % |
| Writing and/or Analyzing of Computer Code | % | % |
| Custom Programming or Software Development:            Applications            Operating Systems            Network or Communications |  |  |
| % | % |
| % | % |
| % | % |
| System Security and/or Firewalls | % | % |
| Packaged Software Development: |  |  |
|           Applications | % | % |
|           Operating Systems | % | % |
|           Network or Communications | % | % |
| Computer Integrated Systems Design/Analysis | % | % |
| Website Development or Hosting | % | % |
| Other (describe): | % | % |
| **Total** | 100% | 100% |

**Respond to questions number 2-13 only if computer-related consulting services (as identified above) are provided.**

2. Do you anticipate any changes in the nature of services described above in the next 12 months?  Yes  No

If “Yes”, please describe:

3. What are the total fees earned from computer-related services last year? $

4. For what client industries do you perform computer-related services?

5. During the past three years has the Firm or a subsidiary or related entity generated receipts in any of the following end-use applications listed below? If “Yes”, indicate which applications apply and provide a description of services provided.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| CAD, CAM, CAP | Yes | No | Production Applications | Yes | No |
| Conversion or Creation of Enterprise Wide Systems | Yes | No | Financial Analysis | Yes | No |
| Credit Card Processing | Yes | No | Funds Transfer | Yes | No |
| Data Security/Verification | Yes | No | Systems Testing | Yes | No |
| Expert Systems | Yes | No | None of Those Listed Above | Yes | No |

Description of services:

6. Are you involved in product or system design or development?  Yes  No

If “Yes”,

a. Are development methodologies required to be in writing?  Yes  No

b. Is there documentation of all system designs and changes?  Yes  No

c. Is there retention of documentation records for the life of the systems or products?  Yes  No

d. Do you use a third party to escrow source codes?  Yes  No

1. Which of the following testing procedures do you have in place? (Check all that apply):

|  |  |  |
| --- | --- | --- |
| Component Testing | System Testing | Pre-Release Virus Testing |
| Integration Testing | Acceptance/Final Testing | Other (Please describe): |

1. Are interim changes documented with customer sign-off?  Yes  No
2. Is a final test run made with customer sign-off?  Yes  No

7. Do you have a written procedure in place for resolving disputes with customers?  Yes  No

8. Do you maintain a log of customer complaints?  Yes  No

9. Do you require the use of a written engagement letter or contract with new clients of the Firm?  Yes  No

If “Yes”, please attach a copy of such standard contract.

10. Does legal counsel review all contracts, warranties, brochures and product literature?  Yes  No

1. Are the services provided under the name of a subsidiary or related entity?  Yes  No

If “Yes”, please complete **Separate Entity Supplement S-2.2**.

1. How many years have computer-related services been offered?
2. Complete the following table summarizing the Firm’s practitioners’ expertise in the area of computer-related services.

|  |  |  |
| --- | --- | --- |
| Individual(s) | Number of Years Computer- Related Services Experience | Number of Hours Computer-Related Services CPE in Past 3 Years |
|  |  |  |
|  |  |  |
|  |  |  |

I recognize that information submitted on this supplement becomes a part of my application for coverage and is therefore subject to all of the representations and conditions of that application.

Completion of this supplement does not guarantee that coverage will be automatically granted. Any coverage will be subject to underwriting review.

Signature Date

|  |
| --- |
| **ALABAMA, ARKANSAS, DISTRICT OF COLUMBIA, LOUISIANA, RHODE ISLAND, WEST VIRGINIA APPLICANTS: ANY PERSON WHO KNOWINGLY PRESENTS A FALSE OR FRAUDULENT CLAIM FOR PAYMENT OF A LOSS OR BENEFIT OR KNOWINGLY PRESENTS FALSE INFORMATION IN AN APPLICATION FOR INSURANCE IS GUILTY OF A CRIME AND MAY BE SUBJECT TO FINES AND CONFINEMENT IN PRISON.**  **CALIFORNIA APPLICANTS: FOR YOUR PROTECTION CALIFORNIA LAW REQUIRES THE FOLLOWING TO APPEAR ON THIS FORM: Any person who knowingly presents false or fraudulent information to obtain or amend insurance coverage or to make a claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.**  **COLORADO APPLICANTS: IT IS UNLAWFUL TO KNOWINGLY PROVIDE FALSE, INCOMPLETE, OR MISLEADING FACTS OR INFORMATION TO AN INSURANCE COMPANY FOR THE PURPOSE OF DEFRAUDING OR ATTEMPTING TO DEFRAUD THE COMPANY. PENALTIES MAY INCLUDE IMPRISONMENT, FINES, DENIAL OF INSURANCE AND CIVIL DAMAGES. ANY INSURANCE COMPANY OR AGENT OF AN INSURANCE COMPANY WHO KNOWINGLY PROVIDES FALSE, INCOMPLETE, OR MISLEADING FACTS OR INFORMATION TO A POLICYHOLDER OR CLAIMANT FOR THE PURPOSE OF DEFRAUDING OR ATTEMPTING TO DEFRAUD THE POLICYHOLDER OR CLAIMANT WITH REGARD TO A SETTLEMENT OR AWARD PAYABLE FOR INSURANCE PROCEEDS SHALL BE REPORTED TO THE COLORADO DIVISION OF INSURANCE WITHIN THE DEPARTMENT OF REGULATORY AGENCIES.**  **FLORIDA APPLICANTS: ANY PERSON WHO KNOWINGLY AND WITH INTENT TO INJURE, DEFRAUD, OR DECEIVE ANY INSURER FILES A STATEMENT OF CLAIM CONTAINING ANY FALSE, INCOMPLETE, OR MISLEADING INFORMATION IS GUILTY OF A FELONY OF THE THIRD DEGREE.**  **kansas applicants: any person who, knowingly and with intent to defraud, presents, causes to be presented or prepares with knowledge or belief that it will be presented to or by an insurer, purported insurer, broker or any agent thereof, any written, ELECTRONIC, ELECTRONIC IMPULSE, FACSIMILE, MAGNETIC, ORAL, OR TELEPHONIC COMMUNICATION OR statement as part of, or in support of, an application for the issuance of, or the rating of an insurance policy for personal or commercial insurance, or a claim for payment or other benefit pursuant to an insurance policy for commercial or personal insurance which such person knows to contain materially false information concerning any fact material thereto; or conceals, for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act and may be subject to criminal and/or civil fines or penalties.**  **KENTUCKY APPLICANTS: ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION FOR INSURANCE CONTAINING ANY MATERIALLY FALSE INFORMATION OR CONCEALS, FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME.**  **MAINE, TENNESSEE, VIRGINIA, WASHINGTON APPLICANTS: IT IS A CRIME TO KNOWINGLY PROVIDE FALSE, INCOMPLETE OR MISLEADING INFORMATION TO AN INSURANCE COMPANY FOR THE PURPOSE OF DEFRAUDING THE COMPANY. PENALTIES INCLUDE IMPRISONMENT, FINES AND DENIAL OF INSURANCE BENEFITS.**  **MARYLAND** **APPLICANTS: ANY PERSON WHO KNOWINGLY OR WILLFULLY PRESENTS A FALSE OR FRAUDULENT CLAIM FOR PAYMENT OF A LOSS OR BENEFIT OR WHO KNOWINGLY OR WILLFULLY PRESENTS FALSE INFORMATION IN AN APPLICATION FOR INSURANCE IS GUILTY OF A CRIME AND MAY BE SUBJECT TO FINES AND CONFINEMENT IN PRISON.**  **Minnesota APPLICANTS: A person who files a claim with intent to defraud or helps commit a fraud against an insurer is guilty of a crime.**  **NEW JERSEY APPLICANTS: ANY PERSON WHO INCLUDES ANY FALSE OR MISLEADING INFORMATION ON AN APPLICATION FOR AN INSURANCE POLICY IS SUBJECT TO CRIMINAL AND CIVIL PENALTIES.**  **NEW MEXICO APPLICANTS: ANY PERSON WHO KNOWINGLY PRESENTS A FALSE OR FRAUDULENT CLAIM FOR PAYMENT OF A LOSS OR BENEFIT OR KNOWINGLY PRESENTS FALSE INFORMATION IN AN APPLICATION FOR INSURANCE IS GUILTY OF A CRIME AND MAY BE SUBJECT TO CIVIL FINES AND CRIMINAL PENALTIES.**  **OHIO APPLICANTS: ANY PERSON WHO, WITH INTENT TO DEFRAUD OR KNOWING THAT HE IS FACILITATING A FRAUD AGAINST AN INSURER, SUBMITS AN APPLICATION OR FILES A CLAIM CONTAINING A FALSE OR DECEPTIVE STATEMENT IS GUILTY OF INSURANCE FRAUD.** |
| **OKLAHOMA APPLICANTS: WARNING: ANY PERSON WHO KNOWINGLY, AND WITH INTENT TO INJURE, DEFRAUD OR DECEIVE ANY INSURER MAKES ANY CLAIM FOR THE PROCEEDS OF AN INSURANCE POLICY CONTAINING ANY FALSE, INCOMPLETE OR MISLEADING INFORMATION IS GUILTY OF A FELONY.**  **OREGON APPLICANTS: ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION FOR INSURANCE CONTAINING ANY MATERIALLY FALSE INFORMATION OR CONCEALS, FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO MAY BE COMMITTING A FRAUDULENT INSURANCE ACT, WHICH MAY BE A CRIME AND MAY SUBJECT THE PERSON TO PENALTIES.**  **PENNSYLVANIA APPLICANTS: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties.**  **VERMONT APPLICANTS: ANY PERSON WHO KNOWINGLY PRESENTS A FALSE STATEMENT IN AN APPLICATION FOR INSURANCE MAY BE GUILTY OF A CRIMINAL OFFENSE AND SUBJECT TO PENALTIES UNDER STATE LAW.** |