



CorePointe Insurance  
Company  
800 Superior Ave E., 21<sup>st</sup> Floor  
Cleveland, Ohio 44114

**LAWYERS PROFESSIONAL LIABILITY**  
**INTELLECTUAL PROPERTY SUPPLEMENT**

1. Full Name of Applicant Firm:

2. Provide a description of your intellectual property work:

3. Please indicate the number of years of experience you have in intellectual property work, describe any education or additional professional qualifications you have in this area:

4.a. Please indicate percentage of your time devoted to each area of practice below:

		%		%
	Intellectual Property Litigation		Trademark Registration/Licensing	
	Patent Opinions		Patent Searches and Filings	
	Domestic Patent Prosecution		Patent Infringement Consultation	
	Foreign Patent Prosecution		Other: (describe):	

4.b. Please indicate percentage of your time devoted to each client type below:

	Artists		Industrial	
	Biotechnical		Mechanical	
	Chemical		Musicians/Composers	
	Information Technology		Pharmaceutical	
	Electric		Publishing	
	Entertainment		Other (describe):	

5. Is the calendar or docketing system you use designed specifically for IP matters?  Yes  No

6. Does the calendar or docketing system you use employ more than one control?  Yes  No

7. Do you advise your clients of all deadlines and time limitations?  Yes  No

8. Do you ever represent your above clients in other personal or business matters?  Yes  No

9. Do you engage the services of third parties to carry out patent searches? If yes, explain:

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Signature of Officer or Partner of Firm

Print name of Officer or Partner

Date