



**Accountants PROtect<sup>SM</sup>  
Nonprofit Directors Supplemental Application**

BY COMPLETING THIS APPLICATION, THE APPLICANT IS APPLYING FOR COVERAGE WITH EITHER **COLONY INSURANCE COMPANY**, **COLONY SPECIALTY INSURANCE COMPANY** OR **PELEUS INSURANCE COMPANY**, AN AUTHORIZED SURPLUS LINES INSURER OR **ARGONAUT INSURANCE COMPANY**, A LICENSED INSURER.

**INSTRUCTIONS –**

- Answer all questions. The information provided herein is considered material to our underwriting and pricing decision for the policy or additional coverage under consideration at the time this supplemental application is submitted.
- For any information that exceeds the space provided, continue responses on your letterhead.
- This form must be completed, dated and signed by an authorized officer of the Applicant to include this completed form as part of the Application.

1. Name of Applicant:

2. Please provide the following information for each nonprofit entity for which coverage is requested. Add on a separate sheet if additional space is needed.

Name of Firm Member	Position Held at Nonprofit Entity	Name of Nonprofit Entity	Entity's Products, Services or Activities	Entity's Revenue for Last Fiscal Year

3. Does the Firm provide any professional services to any of the entities for which coverage is requested?  Yes  No  
If "Yes", describe the services and steps the Firm has taken to minimize the potential conflict of interest.

4. Within the last five (5) years has the nonprofit entity had any claims and/ or negotiated settlements concerning Directors & Officers (D&O) related issues?  Yes  No  
If "Yes", please complete a Claims Supplement for each claim.

5. Have any claims been made or are you aware of any facts, incidents, or circumstances which may result in a claim against any firm member applying for coverage while acting in the capacity of a director or officer?  Yes  No  
If "Yes", please complete a Claims Supplement for each claim.

6. Does the nonprofit entity currently carry D & O Insurance?  Yes  No  
If "Yes", please provide a copy of the current declarations page or endorsement.

**THIS SUPPLEMENTAL APPLICATION IS INCORPORATED BY REFERENCE INTO THE PRIMARY APPLICATION**

APPLICANT'S SIGNATURE	DATE