



Law Firm Name: _____

1. Name of Potential/Actual Claimants: _____

2. Name of Lawyer(s) involved in the Incident/Claim: _____

3. Are there other Defendants? ☐ Yes ☐ No

If yes, please list other Defendants: _____

4. Indicate the status: ☐ Incident Only ☐ Open/Pending ☐ Closed/Settled

5. If closed, what were the following amounts paid: \$ _____ loss/indemnity

\$ _____ defense costs

\$ _____ deductible

6. Indicate whether the payment above was as a result of a(n): ☐ judgment ☐ arbitration award ☐ settlement

7. If pending, indicate the following amounts: \$ _____ Claimant's demand

\$ _____ Reserve amounts established

\$ _____ Settlement offer

8. Provide the following dates: Alleged act or omission occurred: _____

Law firm received notice of the incident/claim: _____

Incident/claim was reported to the law firm's insurer: _____

Incident/claim was closed/resolved: _____

9. Name of the insurer defending the incident/claim: _____

10. Alleged act or omission upon which the incident/claim is based: _____

If additional space is needed, please attach further explanation.

11. Law firm's description of events leading to the incident/claim: _____

If additional space is needed, please attach further explanation.

12. Was this incident/claim asserted in a cross-claim or countersuit in an action to collect fees? ☐ Yes ☐ No

13. As a result of this incident/claim, please describe the procedural or policy changes implemented in order to reduce the possibility of a similar occurrence. **(If additional space is needed, please attach further explanation.)**

For residents of all states except CO: 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 or knowingly helps with intent to defraud, commits a fraudulent insurance act, which may be a crime and may subject the person to criminal and civil penalties.

Colorado: 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 from insurance proceeds shall be reported to the Colorado Division of Insurance within the Department of Regulatory Agencies.

Professional liability insurance offered through Attorney Shield is underwritten by Professional Solutions Insurance Company (doing business in California as PSIC Insurance Company).

Signature/Title of Law Firm Representative _____

Date _____

Soliciting Agent _____

Agency Name _____

