

Patent Supplement

Use letterhead if space is insufficient to answer any question.

Firm: _____ Policy No.: _____

1. Identify the number of lawyers of the Firm who represent client interests before the Patent and Trademark Office (USPTO). _____
2. Identify the number of patent agents who represent clients before the USPTO. _____
3. Do all patent lawyers and patent agents in the Firm have 4 or more years of experience? Yes No
If **no**, identify these patent lawyers and patent agents, and summarize their experience.

4. Provide information on the experience of each patent lawyer and patent agent.

5. How many patent applications were filed by the Firm and lawyers of the Firm? _____
For new policies, provide this information for the period of the past **3 years**.
For renewals, provide this information for the past **12 months**.
6. Does the Firm assume responsibility for the payment of maintenance fees, taxes or annuities for any of your patent clients? Yes No
If **yes**, how does it monitor? _____
7. Does the Firm prohibit the acceptance of an equity interest or other financial interest in the client? Yes No
If **no**, identify these clients and provide details. _____
8. Does the Firm employ the services of entities or individuals other than the Firm or lawyers of the Firm to perform searches? Yes No
If **yes**, identify the firms and individuals, and indicate for each whether they maintain errors and omissions insurance coverage.

9. Is it the policy of the Firm to memorialize the results of searches in a written opinion letter? Yes No
If **no**, please explain. _____
10. What percentage of the Firm's patent clients are startups? _____%
11. What is the range of sales of the companies for which the Firm prosecutes applications? \$_____ to \$_____

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12. Which of your patent clients are the following? (Total must equal 100%.)

____% Individuals

____% Partnerships

____% Closely Held Corporations

____% Publicly Traded Companies

13. Estimate the duration of the attorney-client relationship for the Firm's patent clients. (Total must equal 100%.)

____% less than one year

____% one to three years

____% more than three years

14. Does the Firm or any lawyer of the Firm do foreign patent filings?

Yes No

If **yes**,

a. How many? _____

b. Are the Firm's clients notified of the limited time for these filings and the additional requirements necessary to complete the filings?

Yes No

If **no**, please explain. _____

c. Are clients required to sign a statement when declining to file a patent both domestically and internationally?

Yes No

If **no**, please explain. _____

I/We affirm that after an inquiry of all lawyers of the Firm, the information contained herein is true and complete to the best of my/our knowledge and that it shall be the basis of the policy of insurance and deemed incorporated therein.

Signature of Owner, Partner, or Officer (Lawyer Only) _____ Date _____

Print Name _____ Title _____