

ENTERTAINMENT LAW SUPPLEMENT

1. Please indicate the approximate percentage of the firm's practice devoted to the following types of clients:

Actors/Actresses	_____ %	Cable Television Companies	_____ %
Singers	_____ %	Video Cassette Companies	_____ %
Motion Picture Production Companies	_____ %	Book Publishing	_____ %
		Composers	_____ %
		Choreographers	_____ %
Television Production Companies	_____ %		
Theatre	_____ %		
Producers:			
Theatre	_____ %	Models	_____ %
Motion Picture	_____ %	Dancers	_____ %
Television	_____ %	Agents/Business Managers	_____ %
Directors:			
Theatre	_____ %	Other Television Personalities	_____ %
Motion Picture	_____ %	Other	_____ %
Television	_____ %		

2. Please provide a list by separate attachment of all clients.

3. In representing these clients, does your firm perform any of the following functions? **Please give a brief narrative after each question answered yes.**

a) Assist clients in finding work or act as agent? [] Yes [] No. _____

b) 1) Advise clients in regards to their investments and tax consequences? [] Yes [] No. _____

2) If yes, does your firm or any member have authority to write/sign checks for any client?
 [] Yes [] No. _____

c) Receive a commission or a percentage from your clients' investments? [] Yes [] No. _____

d) 1) Negotiate financing? [] Yes [] No. _____
 Negotiate financing at plays, musicals, motion pictures or any other production? [] Yes [] No.

2) If yes, whom do you represent, and describe types of transactions (i.e., limited partnerships, syndications, etc.) _____

e) Perform services for or in conjunction with mergers or acquisitions? [] Yes [] No. _____

f) Perform lobbying and/or monitor pending federal and state legislation on behalf of clients? [] Yes [] No.

4) Indicate the approximate percentage of gross billable dollars derived from:

Contract Negotiation _____%

Litigation:

Plaintiff _____%

Defense _____%

Divorce & Custody _____%

Criminal _____%

Tax Planning/
Investment Counseling _____%

I/We understand that the information submitted herein becomes part of my/our professional liability application and is subject to the same representations and conditions.

Name of Applicant

Title (Officer, partner, etc.)

Signature of Applicant*

Date

MUST BE SIGNED BY A MEMBER OF THE FIRM'S MANAGEMENT COMMITTEE OR GOVERNING BODY.