

Policy Number: _____	Endorsement Number: _____
Endorsement Effective: _____	Form Number: _____
Date Issued: _____	Premium Adjustment: _____

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

LIMIT OF LIABILITY ENDORSEMENT

This endorsement modifies insurance under the following:

LAWYERS PROFESSIONAL LIABILITY

In consideration of the premium paid, it is understood and agreed that the **LIMIT OF LIABILITY** referred in Item 4 of the declarations page are amended as follows:

A) With respect to any claim made during the policy period arising out of an ACT or PERSONAL INJURY prior to _____ but after _____:

\$ each claim
\$ aggregate

B) With respect to any claim made during the policy period arising out of an ACT or PERSONAL INJURY happening on or subsequent to _____:

\$ each claim
\$ aggregate

All other terms and conditions of this policy remain unchanged.

This endorsement is a part of your policy and takes effect on the effective date of your policy, unless another effective date is shown below.

Countersigned by _____
Authorized Representative