

MASS TORT/CLASS ACTION SUPPLEMENTAL APPLICATION

PLEASE ANSWER ALL QUESTIONS OR INDICATE "NOT APPLICABLE"

If additional space is required for any answer, please a separate sheet.

At your option, you may also attach a narrative description of your office's mass tort/class action practice.

1. Firm Name: _____

2. List all attorneys in the firm who handle mass tort or class action cases: _____

3. What types of mass tort or class action cases do you handle (details regarding issues, types of products, etc.)?
(Use extra page if needed to describe fully) _____

4. How many mass tort or class action cases does your practice currently have open? _____

5. How many mass tort or class action cases has your practice closed during the past 5 years? _____

6. For all mass tort or class action cases that are **currently open**, please provide the following information: (use extra page if needed):

Defendant Name	Allegation made	# of members	Jurisdiction Amount /remedy sought	Specify if lead/local /referral attorney

7. For all mass tort or class action cases that **closed during the past 24 months (including favorable and unfavorable judgments and those dismissed)** please provide the following information (use extra page if needed):

Defendant Name	Allegation made	# of members	Jurisdiction Amount /remedy sought	Specify if lead/local /referral attorney

8. If cases are referred to other firms, are these other firms in other jurisdictions? Yes No
 If so, where? _____

9. Do you retain a fee for such referrals? Yes No

10. Do you continue to work on the case after referral? Yes No

11. If you are not the sole attorney, do you send your clients a letter outlining the specific scope of your representation? (i.e., advising them which tasks you are or are NOT performing, etc.) Yes No
 If no, please explain why not: _____

12. Please describe how you handle class members who choose to opt out of the class to pursue an individual claim (including describing the risks involved in writing, who handles the case, is it referred elsewhere, etc.): _____

13. If there is any other information that you believe would be helpful in understanding more about your mass tort or class action cases or experience, please elaborate: _____

14. Has any claim or potential claim been made to you, your practice (past or present), any lawyer employed by your firm, or any insurance carrier regarding any mass tort or class action case that you have handled at any time? If "Yes," please attach a narrative explanation. Yes No

15. Do you have knowledge of any circumstances or events that could give rise to a potential claim arising out of any mass tort or class action cases that you, your practice (past or present), any lawyer employed by your firm has ever handled? If "Yes," please attach a narrative explanation. Yes No

* Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, may be committing a fraudulent insurance act, and may be subject to a civil penalty or fine. * not applicable in all states

Name _____

Title _____

Signature _____ Date _____