



Outside Interest Supplemental Application

- Complete the following for each entity in which a firm member or spouse holds, an equity interest and/ or serves as a director or officer and the firm provides professional services other than Tax. Attach additional sheets if needed.

Entity Name			
Industry			
Firm Member/ Spouse Name			
Position Held by member/spouse			
Percent of Equity Interest by member/spouse			
List Firm Services provided to the entity			
Are these services provided by a firm member other than the individual listed above?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Disclosed conflict?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

The applicant understands the information submitted herein becomes a part of the applicant's application and is subject to the same representations and conditions.

Signature of Authorized Representative of the Firm

Date

Print Name

Title (must be signed by managing partner or managing executive of the Firm)

Attest _____

Producer / Agent _____

License Number _____

Address _____
