() Allied World Insu	* •	
() Darwin National A() Allied World Spec	eialty Insurance Company	
95 Broadw	Professional Agency, Inc. vay c, NY 11701	
Name:		
Date:		
Account #:		
To Who it May Conce	ern:	
I wish to increase my	Limits of Liability on my	Professional Liability Insurance
Policy #	from \$	to \$
For your underwriting	g purposes:	
	MIGHT REASONABLY	WARE OF ANY ACT, ERROR OR BE EXPECTED TO GIVE RISE TO A
Signature of Named I	nsured	
Date		