LAWYERS PROFESSIONAL LIABILITY POLICY
DECLARATIONS

Agency:	Branch:	Policy Number:
700324	912	287147596

Insurance is provided by Continental Casualty Company,
333 S. Wabash Ave. Chicago, IL 60604
A Stock Insurance Company.

1A. NAMED INSURED AND MAILING ADDRESS:
Dewrell Sacks, LLP
2296 Henderson Mill Road, Suite 403
Atlanta, GA 30345

NOTICE TO POLICYHOLDERS:
This is a Claims Made and Reported policy. It applies only to those claims that are both first made against the insured and reported in writing to the Company during the policy period. Please review the policy carefully and discuss this coverage with your insurance agent or broker.

1B. PREDECESSOR FIRM(S): See Declarations Addendum

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2. POLICY PERIOD:
Inception: 07/01/2007 Expiration: 07/01/2008
at 12:01 A.M. Standard Time at the address shown above

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3. LIMITS OF LIABILITY: *Inclusive of Claims Expenses*

	Each Claim:	$1,000,000
	Aggregate:	$1,000,000
Death or Disability and Non-Practicing Extended Reporting Period Limit of Liability:	Each Claim:	$1,000,000
	Aggregate:	$1,000,000

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4. DEDUCTIBLES: *Inclusive of Claims Expenses*
Aggregate: $5,000

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5. POLICY PREMIUM:

Total Policy Premium:	$9,775.00
Includes CNA Risk Management Seminar Credit of	$ 0.00

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6. FORMS AND ENDORSEMENTS ATTACHED AT INCEPTION:
G-118011-A (Ed. 07/2001), G-118012-A (Ed. 03/1999), G-118016-A (Ed. 09/1996), G-118024-A (Ed. 09/1996), G-118029-A (Ed. 09/1996), G-118039-A10 (Ed. 06/2001), G-118045-A99 (Ed. 01/1999), G-118062-A10 (Ed. 06/2001), G-145126-A (Ed. 08/2003), G-145184-A (Ed. 06/2003)

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7. WHO TO CONTACT:

To report a claim:
CNA Insurance Companies
333 S. Wabash, 39 South
Chicago, IL 60685
Att: Regional Director, GSL Lawyers Claims
Phone 312-822-1151 Fax 312-817-0528

Countersignature	Date	Authorized Representative	Date