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FAMILY KIDNAP, RANSOM & EXTORTION APPLICATION

(Attach additional sheets when necessary)

1.	Name of Applicant:				
2.	Address:				
3.	Occupation:	tion:			
4.	Financial Information	on: Net Worth \$	Annua	Annual Income \$	
5.	Family members to	be covered:	Relationship to	Home Address if	
	<u>Name</u>	Age	<u>Applicant</u>	Different than Applicant	
6.	Do any of the person(s) listed in number (5) above have an individual net worth greater than US \$500,000? If so, please list:				
	<u>Occupati</u>	<u>on</u>			
7.	Detail of anticipated travel outside resident country:				
8.	Describe any previous kidnap, extortion or detention incidents, attempts or threats:				
9.	Describe any security or prevention measures taken to protect those persons in number (5) above from ar incident to which this coverage applies:				
10.	Limit of Insurance requested:				
	INDERSIGNED API EMENTS SET FORT			IER/HIS KNOWLEDGE THE	
				GNED OR US, BUT IT IS AGREED OULD A POLICY BE ISSUED.	
Signatu	ure:		Date:	Date:	

Send to: Peter@globalunderwriters.com OR Fax: 513-533-1504