

URGENT: NOTICE OF EXPIRATION / POLICY LAPSE WARNING

Date: [Insert Date]

To: [Insert Director/Officer Name or Company Name]

Address: [Insert Address]

Attn: Board of Directors / Chief Executive Officer

RE: Directors and Officers (D&O) Liability Insurance Policy #[Insert Policy Number]

Dear [Insert Contact Name],

Our records indicate that your Directors and Officers (D&O) Liability Insurance policy is scheduled to expire on **[Insert Expiration Date]**.

As of today, we have not received the required renewal application or the premium payment necessary to maintain your coverage. If these items are not received by [Insert Time] on the expiration date, your coverage will lapse.

A lapse in D&O coverage may result in the following risks:

- Loss of personal asset protection for directors and officers.
- Loss of "Full Prior Acts" coverage, meaning claims arising from past decisions may no longer be covered.
- Requirement of a new application with higher premiums and stricter underwriting terms.
- Potential breach of contractual obligations or corporate bylaws.

To ensure uninterrupted protection, please contact us immediately at [Insert Phone Number] or [Insert Email Address] to finalize your renewal.

If you have already sent the payment or renewal paperwork, please disregard this notice.

Sincerely,

[Insert Name/Signature]

[Insert Title]

[Insert Agency/Company Name]