

14001 University Avenue, Clive, Iowa 50325-8258 Toll-Free 800-864-8026 Toll-Free FAX 800-600-8170

Certificate of Insurance

514410 TEXAS DEPT. OF INSURANCI AUSTIN, TEXAS A P P R O V E D FEB 2 4 2015

Professional Solutions Insurance Company Occurrence Professional Liability Policy No.

This professional liability policy of insurance covers the Insured identified below for the policy period indicated. Notwithstanding any requirement, term, or condition of any contract or other document with respect to which this verification may be issued or may pertain, the insurance afforded by the policy described herein is subject to all the terms, exclusions and conditions of the policy.

| Named Insured: | John Doe, DDS |
|---------------------------|---|
| Insured Practice Address: | Hometown, USA 54321 |
| Insured: | John Doe, DDS |
| Limits of Liability: | \$1,100,000 Per Claim \$3,000,000 Policy Aggregate |
| Policy Term: | From 7/24/2014 to 7/24/2015 |
| Original Effective Date: | 7/24/2014 |
| Cyber Limits: | \$50,000 Each Claim \$50,000 Annual Aggregate |

The policy also covers the following types of employed ancillary providers for duties performed while working under the supervision of the Named Insured: Dental Hygienists, Dental Assistants and other ancillary providers as reviewed and approved by Professional Solutions Insurance Company.

This Certificate of Insurance is provided on behalf of the Insured and is for information purposes only and extends no rights to anyone other than the Insured. This Certificate of Insurance does not affirmatively or negatively amend, extend, or alter the coverage afforded by the Policy.

Dated at Clive, IA this day of: 7/22/2014

PROFESSIONAL SOLUTIONS INSURANCE CO.

Agent 923 - Joe Pal 14001 University Ave Clive, IA 50325

Authorized Representative