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**Certificate of Insurance**

Professional Solutions Insurance Company  
Occurrence Professional Liability Policy No. DPL027973

**TEXAS DEPT. OF INSURANCE  
AUSTIN, TEXAS  
APPROVED  
FEB 24 2015**

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: 3796 Satellite Blvd  
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.

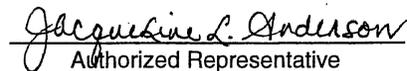
**This Certificate of Insurance is provided on behalf of the Insured and is for information purposes only and extends no rights to anyone other than the Insured. This Certificate of Insurance does not affirmatively or negatively amend, extend, or alter the coverage afforded by the Policy.**

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