



Certificate of Liability Insurance

Date Issued: 03/11/2022

Underwritten by: Philadelphia Indemnity Insurance Company · One Bala Plaza, Suite 100 · Bala Cynwyd, PA 19004 · NAIC #: 18058

Administered by: CPH & Associates · 711 S. Dearborn St. Ste 205 · Chicago, IL 60605 · P 800.875.1911 · F 312.987.0902 · info@cphins.com

DISCLAIMER: This certificate is issued as a matter of information only and confers no rights upon the certificate holder. The Certificate of Insurance does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend, or alter the coverage afforded by the policies listed thereon.

Insured: Leslie Root Policy Number: E143104

Leslie Root Counseling Suite 201 Policy Term: 05/31/2022 to 05/31/2023

edina, MN 55435

Occupation: Licensed Marriage and Family

Therapist

Covered Locations

Professional Liability: Portable coverage, not location specific

| Coverage Type (Occurrence Form) | Per Incident (Per individual claim) | Aggregate (Total amount per year) | |
|---|--|--------------------------------------|--|
| Professional Liability | \$ 1,000,000 | \$ 3,000,000 | |
| Supplemental Liability | \$ 1,000,000 | \$ 3,000,000 | |
| Licensing Board Defense | \$ 100,000 | \$ 100,000 | |
| Commercial General Liability • Fire/Water Legal Liability | N/A N/A | N/A N/A | |
| Business Personal Property | N/A | N/A | |

Comments/Special Descriptions:

Certificate Holder

PROOF OF COVERAGE

If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s). **Notice of Cancellation** will only be provided to the first named insured in accordance with policy provisions, who shall act on behalf of all additional insureds with respect to giving notice of cancellation.

Authorized Representative C. Philip Hodson

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