

PROFESSIONAL DOULAS
PROFESSIONAL LIABILITY & COMMERCIAL GENERAL LIABILITY INSURANCE PROGRAM
CERTIFICATE OF INSURANCE

Certificate No.:

Item 1. Master Policy Period: From September 1, 2024 to October 1, 2025
12:01 a.m. standard time at the address stated in Item 2.

Item 2. Name and Address of the Named Insured:

Item 2a. Personal Corporation:

Item 3. Policy Period: From to October 1, 2025
12:01 a.m. standard time at the address stated in Item 2.

Item 4. Limits of Liability:

Professional Liability: \$ per **Claim**
for Coverages A and B (including **Claim Expenses**)
\$ Aggregate Limit of Liability each **Policy Period**
for Coverages A and B (including **Claim Expenses**)

Privacy and Security Breach Expense Coverage: \$ Sublimited Coverage A, Consulting Services
\$25,000 Aggregate Limit of Liability
Coverages B – E

Commercial General Liability:

Form Number	Form Name	Deductible	Limits of Insurance
TGLE.001 (05/17)	Each Occurrence Limit		\$
	Personal and Advertising Injury Limit		\$
	Medical Payments Limit ~ any one person		\$5,000.00
	General Aggregate Limit		\$
	Tenants' Legal Liability Limit	\$1,000.00	\$500,000.00
	Products Completed Operations Aggregate Limit		\$
	Coverage A Per Occurrence Deductible	\$1,000.00	Property Damage
		\$1,000.00	Bodily Injury

Item 5. Deductible:

For Professional Liability: \$1,000.00 per **Claim**
For Privacy Breach: \$1,000.00 each Privacy Breach

Item 6. Professional Capacity:

Additional Modalities: Doula


Item 7. Minimum Retained Premium: 100%

Item 8. Premium:

Modality Premium: \$
Total Premium: \$

This Certificate of Insurance is subject to all of the terms, conditions, limitations and exclusions contained in Master Policy Numbers NPL1004273 and NPC1000201 issued on behalf of the **Sponsoring Entity**.

In witness whereof, the **Insurer** has caused this Certificate of Insurance to be signed by its authorized representative.



Authorized Representative

This policy contains a clause that may limit the amount payable