

# Miscellaneous Advantage

## Professional Liability Insurance

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**NOTICE: THIS POLICY IS A CLAIMS-MADE POLICY. PLEASE READ THE POLICY CAREFULLY.**

#### RISK PURCHASING GROUP NOTICE

**This Miscellaneous Professional Liability Risk Purchasing Group Policy is not protected by an insurance insolvency guaranty fund in this state, and the insurer or Risk Purchasing Group may not be subject to all the insurance laws and rules of this state.**

#### IMPORTANT NOTICE REGARDING RISK PURCHASING GROUPS

**Disclosure Pursuant to Federal Law Regarding Purchasing Groups [15 U.S.C. SEC. 3901, et seq] the is a “Purchasing Group”, as defined under Federal law, formed to purchase liability insurance on a group basis for its Members to cover the similar or related liability exposure(s) to which the Members of the Purchasing Group are exposed by virtue of their related, similar, or common businesses or services. Members do not share limits and each member is provided with its own policy and/or evidence of insurance.**

**Policy Number**

**THE HANOVER INSURANCE COMPANY**

(A Stock Insurance Company, herein called the **Insurer**)

**Issue Date**

**Item 1. NAMED INSURED AND ADDRESS**

**Item 2. POLICY PERIOD**

Inception Date:

Expiration Date:

(12:01 AM standard time at the address shown in Item 1.)

**Item 3. LIMIT OF LIABILITY**

- a. for each **Claim**; not to exceed
- b. for all **Claims** in the Aggregate

**Item 4. SUBLIMITS OF LIABILITY**

Privacy and Security  
Liability Coverage

- a. for each **Claim**; not to exceed
- b. for all **Claims** in the Aggregate

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**Item 5. DEDUCTIBLE**

- a. each **Claim**
- b. for all **Claims** in the Aggregate

**Item 6. SUPPLEMENTAL COVERAGE LIMIT AND DEDUCTIBLE**

	<b>LIMIT</b>	<b>DEDUCTIBLE</b>
Disciplinary Proceedings Coverage	per <b>Insured</b> / for all <b>Insureds</b> in the Aggregate	
Subpoena Assistance		
Crisis Event Expense	per Event / in the Aggregate	
Reputation Protection Expense	in the Aggregate	
Withheld Client Fee Assistance	in the Aggregate	
Nonprofit Directors and Officers Expense	in the Aggregate	

**Item 7. PROFESSIONAL SERVICES**

**Item 8. RETROACTIVE DATE**

**Item 9. PREMIUM FOR THE POLICY PERIOD**

**Total Premium:**

**Item 10. ENDORSEMENTS EFFECTIVE AT INCEPTION:** See Schedule of Forms attached.

**Item 11. NOTICE TO INSURER**

Report a claim to the Company as required by Section G. Duties in the Event of Claim(s) or Potential Claim(s) to:

**National Claims Telephone Number:**

**Facsimile:**

**Email:**

**For Online Reporting:**

Agent on behalf of:

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We have caused this Policy to be signed by our President and Secretary and countersigned where required by a duly authorized agent of the Company.



John C. Roche, President



Charles F. Cronin, Secretary