



P.O. Box 9169, Missoula, MT 59807-9169
 (406) 728-3113 * (800) 367-2577 * Fax: (406) 728-7416

Certificate of Professional Liability Insurance Date: 6/4/2024

This certificate is issued as a matter of information only and confers no rights upon the certificate holder. This certificate does not amend, extend or alter the coverage afforded by the policy listed below.

Named Insured: Luat Su Son, P.S. 1229 Madison Street Suite 1410 Seattle, WA 98104	Certificate Holder: Luat Su Son, PS Attn: Sonny Nguyen MS: 1229 Madison St Suite 1410 seattle, WA 98104
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If the described policy is cancelled before its expiration date ALPS will endeavor to mail ten days written notice to the certificate holder named above, but failure to do so shall impose no obligation or liability of any kind upon ALPS, its agents or representatives coverages.

The policy of insurance listed below has been issued to the insured named above for the policy period indicated. Notwithstanding any requirement, term or condition of any contract or other document with respect to which this certificate may be issued or may pertain, the insurance afforded by the policy described herein is subject to all the terms, exclusions and conditions of such policy. Aggregate limits shown may have been reduced by paid claims.

Type of Insurance:	Policy Number	Effective Date	Expiration Date	Loss Inclusion Date	Limit of Liability
Lawyers Professional Liability Claims Made	ALPS29886- 2	05/31/2024	05/31/2025	05/31/2022	Each Claim: 1000000 Aggregate: 1000000

Deductible:
 Each Claim 10000

The deductible shall be subtracted from the claim expense allowance and then the total limit of liability resulting from each claim reported to the company during the policy period, subject to an annual aggregate deductible equal to twice the deductible amount listed in the declarations.

ENDORSEMENTS LISTED ON THE DECLARATION AT INCEPTION:
 Excluded Entity(s)

APPROVED
 By Diane Baer - Risk Management at 2:41 pm, Dec 19, 2024

Law office located:
 1229 Madison Street Suite 1410
 Seattle ,WA 98104



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LPL-CERT NS (06/13)

Authorized representative
 ALPS PROPERTY & CASUALTY INSURANCE COMPANY



Cover Sheet

ALPS Corporation

To:	Luat Su Son, PS
Attn:	Sonny Nguyen
Re:	Certificate of Insurance
Date:	6/4/2024
Pages:	2

Dear Sonny Nguyen:

This is a Certificate of Insurance for Luat Su Son, P.S..

Thank you,

ALPS Corporation
111 North Higgins Ave, Suite 600
P.O. Box 9169
Missoula, Montana 59807
Phone: (800) 367-2577
Fax: (406) 728-7416