

Lawyers Professional Liability Insurance Policy Declarations



Insurance is provided by: American Guarantee & Liability Insurance Company
1299 Zurich Way
Schaumburg, IL 60196-1056
hereinafter the **Company**

THIS IS A CLAIMS MADE AND REPORTED POLICY. ANY CLAIM MUST BE FIRST MADE AND REPORTED TO THE COMPANY DURING THE POLICY PERIOD OR ANY EXTENDED REPORTING PERIOD, IF APPLICABLE, PURSUANT TO SUBSECTION.VII.B. THE PAYMENT OF CLAIM EXPENSES REDUCES THE LIMIT OF LIABILITY. PLEASE READ THE POLICY CAREFULLY.

Policy Number: LPL 1090624 04

Renewal of Policy Number: LPL 1090624 03

Item 1. **Named Insured** and Mailing Address:

Derek T. Conom, Attorney at Law
7500 - 212th Street SW
Suite 215
Edmonds, WA 98026

Producer Name and Mailing Address:

MCGOWAN & COMPANY, INC.
20595 LORAIN RD
FAIRVIEW PARK, OH 44126-2053

Item 2. **Policy Period:** From: 12:01 A.M. on 12/16/2022 To: 12:01 A.M. on 12/16/2023
Local time at the address shown in Item 1.

Item 3. **Limit(s) of Liability each Policy Period:**

A. **Each Claim:** \$ 1,000,000

B. **Aggregate:** \$ 1,000,000

C. **Sublimit for Claim Expenses** in connection with **Disciplinary Proceedings:** \$ 25,000

APPROVED

By Diane Baer - Risk Management at 3:20 pm, Jan 06, 2023

Item 4. **Deductible:** \$ 2,500

Item 5. **Premium:** \$ 2,264.83

Item 6. **Notice to Company:**

A. **Where to Provide Notice of Claim, Potential Claim or Disciplinary Proceedings:**

Attn: Director of Professional Programs Claims
Zurich North America
P.O. Box 968017
Schaumburg, IL 60196-8017
or
Telephone: (800) 987-3373
or
Facsimile: (877) 962-2567
or
E-mail: usz_carecenter@zurichna.com

B. **Address for All Other Notices:**

Zurich North America
1299 Zurich Way
Schaumburg, IL 60196-1056