

APPROVED

By Diane Baer - Risk Management at 11:29 am, Jan 14, 2026



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

CERTIFICATE OF PROFESSIONAL LIABILITY INSURANCE					DATE: 01/12/2026
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: Rice O'Neal PLLC 100 N Howard Street Suite R Spokane, WA 98201			CERTIFICATE HOLDER: Snohomish County Office of Public Defense Attn: Kristin Crane Snohomish County Office of Public Defense Everertt, WA 98201		
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	RETROACTIVE COVERAGE DATE	LIMIT OF LIABILITY
LAWYERS PROFESSIONAL LIABILITY CLAIMS MADE	ALPS37550	04/01/2025	04/01/2026	04/01/2025	EACH CLAIM \$1,000,000 AGGREGATE \$2,000,000
DEDUCTIBLE: EACH CLAIM \$5,000 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: Notice Of Change In Item 3 Of Declarations					
LAW OFFICE LOCATED: 100 N Howard Street Suite R Spokane, WA 98201					
 P.O. Box 9169, Missoula, MT 59807-9169 (800) 367-2577 (406) 728-3113 Fax: (406) 728-7416 www.alpsinsurance.com			 AUTHORIZED REPRESENTATIVE ALPS PROPERTY & CASUALTY INSURANCE COMPANY		



Named Insured: Rice O'Neal PLLC Policy No. ALPS37550
Effective Date: 01/01/2026

NOTICE OF CHANGE IN ITEM 3 OF DECLARATIONS

As of the Addition Date shown below, Item 3 – Name of Each Insured Attorney on the Declarations is amended to add the following attorney(s):

<u>Name of Attorney</u>	<u>Addition Date</u>
Stine-Sheridan, Rachel	01/01/2026

As of the Deletion Date shown below, Item 3 – Name of Each Insured Attorney on the Declarations is amended to delete the following attorney(s):

<u>Name of Attorney</u>	<u>Deletion Date</u>
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No premium change is required.

Countersigned at Missoula, Montana

By: 

Date: 12/16/2025