



Certificate of Liability Insurance

Date Issued: 08/09/2022

Underwritten by: Philadelphia Indemnity Insurance Company · One Bala Plaza, Suite 100 · Bala Cynwyd, PA 19004 · NAIC #: 18058
Administered by: CPH & Associates · 711 S. Dearborn St. Ste 205 · Chicago, IL 60605 · P 800.875.1911 · F 312.987.0902 · info@cphins.com

DISCLAIMER: This certificate is issued as a matter of information only and confers no rights upon the certificate holder. The Certificate of Insurance does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend, or alter the coverage afforded by the policies listed thereon.

Insured: Sherry Burke
4969 Bayleaf Ct
Martinez, CA 94553

Policy Number: E217117
Policy Term: 09/03/2022 to 09/03/2023
Occupation: Licensed Educational Psychologist

Covered Locations

Professional Liability: Portable coverage, not location specific

General Liability Insured Location(s):
1936 Carlotta Drive, Concord, CA 94591

Coverage Type (Occurrence Form)	Per Incident (Per individual claim)	Aggregate (Total amount per year)
Professional Liability	\$ 1,000,000	\$ 5,000,000
Supplemental Liability	\$ 1,000,000	\$ 5,000,000
Licensing Board Defense	\$ 35,000	\$ 35,000
Commercial General Liability	1,000,000	3,000,000
▫ Fire/Water Legal Liability	\$ 250,000	\$ 250,000
Business Personal Property	N/A	N/A
Cyber Liability (Claims Made Form) Retroactive Date: 09/03/2022	\$ 15,000	\$ 15,000

Comments/Special Descriptions:

Certificate Holder

Mt. Diablo Unified School District
1936 Carlotta Drive
Concord, CA 94519

Certificate Holder has been added as an additional insured

If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s). **Notice of Cancellation** will only be provided to the first named insured in accordance with policy provisions, who shall act on behalf of all additional insureds with respect to giving notice of cancellation.

Authorized Representative
C. Philip Hodson

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY

GENERAL PURPOSE ENDORSEMENT

This endorsement modifies insurance provided under the following:

**ALLIED HEALTHCARE PROVIDERS PROFESSIONAL AND
SUPPLEMENTAL LIABILITY POLICY**

This information is completed only when this endorsement is issued subsequent to preparation of the policy:

POLICY CHANGES ARE INDICATED BY AN "X":

- NAMED INSURED amended to read as shown below.
- Address of NAMED INSURED is amended to read as shown below .
- Policy Period amended to read as shown below.
- Limit(s) of Liability is/are amended to read as shown below.
- Deductible is amended as shown below.
- Premium is amended as shown below.
- Retroactive Date is amended as shown below.
- Endorsement(s) is/are amended as shown below

In consideration of the premium paid, it is hereby understood and agreed that the following endorsement is added to the policy:

Endorsement change(s):

Additional Insured coverage is added per form(s) PI-PHCP-05 (03/01).

Added Additional Insured(s):

- Mt. Diablo Unified School District

Policy Change(s) effective as of date shown below.

All other terms and conditions of this Policy remain unchanged.

Policy #: E217117
Effective on or after: 09/03/2022
Issued to: Sherry Burke
Expiration date: 09/03/2023

Endorsement #: 1
Additional Premium: \$27.00

THIS ENDORSEMENT CHANGED THE POLICY. PLEASE READ IT CAREFULLY.

Additional Insured Endorsement

This endorsement modifies insurance provided under the following:

**ALLIED HEALTHCARE PROVIDERS PROFESSIONAL
AND SUPPLEMENTAL LIABILITY INSURANCE POLICY**

In consideration of the premium paid, this policy is amended as follows:

Mt. Diablo Unified School District is hereby added as an Additional Insured, solely for **Damages** arising out of a **Professional Incident** covered under this policy. The **Professional Incident** must arise out of services provided by the **Insured**, under contract with **Mt. Diablo Unified School District**.

Additional Insured Name and Mailing Address:
Mt. Diablo Unified School District

1936 Carlotta Drive
Concord, CA, 94519

All other terms and conditions of this policy remain unchanged.

Policy #: E217117
Effective on or after: 09/03/2022
Issued to: Sherry Burke
Expiration date: 09/03/2023



Tel: 1-800-841-3000

Declarations Page

This is a description of your coverage.
Please retain for your records.

GEICO General Insurance Company
P.O. Box 509090
San Diego, CA 92150-9090

Policy Number: 4157-18-95-09
Coverage Period:

09-02-22 through 03-02-23
12:01 a.m. standard time at the address of the named insured.

Date Issued: July 30, 2022

SHERRY J BURKE AND JOHN W
MIGGINS
4969 BAYLEAF CT
MARTINEZ CA 94553-4361

Email Address: Log in to **geico.com** to update

<u>Named Insured</u>	<u>Additional Drivers</u>
Sherry Jo Burke	None
John Wesley Miggins II	

<u>Vehicles</u>	<u>VIN</u>	<u>Vehicle Location</u>	<u>Finance Company/ Lienholder</u>
1 2015 Lexs Nx	JTJYWRBZ3F2005978	MARTINEZ CA 94553-4361	
2 2019 Lexs Ux	JTHU9JBH6K2014460	MARTINEZ CA 94553-4361	

<u>Coverages*</u>	<u>Limits and/or Deductibles</u>	<u>Vehicle 1</u>	<u>Vehicle 2</u>
Bodily Injury Liability Each Person/Each Occurrence State Minimum \$15,000/\$30,000	\$500,000/\$500,000	\$77.40	\$92.70
Property Damage Liability State Minimum \$5,000	\$100,000	\$92.00	\$92.90
Medical Payments	\$1,000	\$3.80	\$5.20
Uninsured & Underinsured Motorists Each Person/Each Occurrence	\$100,000/\$300,000	\$40.40	\$48.00
Comprehensive (Excluding Collision)	\$500 Ded	\$32.10	\$51.70
Collision	\$500 Ded/Waiver	\$166.30	\$248.70
Emergency Road Service	Full	\$9.80	\$6.50
Rental Reimbursement	\$50 Per Day \$1,500 Max	\$24.50	\$24.50
Mechanical Breakdown	\$250 Ded	-	\$33.50

<u>Coverages*</u>	<u>Limits and/or Deductibles</u>	<u>Vehicle 1</u>	<u>Vehicle 2</u>
Six Month Premium Per Vehicle		\$446.30	\$603.70
Total Six Month Premium			\$1,050.00

*Coverage applies where a premium or \$0.00 is shown for a vehicle.

If you elect to pay your premium in installments, you may be subject to an additional fee for each installment. The fee amount will be shown on your billing statements and is subject to change.

Discounts

- California Good Driver (All Vehicles)
- Subclass Factor (All Vehicles)
- Multi-Car (All Vehicles)
- California Persistency (All Vehicles)
- Passive Restraint/Air Bag (All Vehicles)
- Defensive Driver (Veh 1)
- Anti-Theft Device (Veh 2)

Group Insurance Plan: Professional Group Insurance Plan

Contract Type: A30CA

Contract Amendments: ALL VEHICLES - A30CA A54CA

Unit Endorsements: A115(VEH 1,2); A431(VEH 1,2); A428(VEH 1,2); A180(VEH 2)

Class: A -N -39MF - T (VEH 1); A -M -54MM - 1 (VEH 2)

Important Policy Information

- No coverage is provided in Mexico.
- Reminder - Physical damage coverage will not cover loss for custom options on an owned automobile, including equipment, furnishings or finishings including paint, if the existence of those options has not been previously reported to us. This reminder does NOT apply in VIRGINIA, however, in Virginia coverage is limited for custom furnishings or equipment on pick-up trucks and vans but you may purchase coverage for this equipment. Please call us at 1-800-841-3000 or visit us at geico.com if you have any questions.
- Congratulations! Your policy qualifies for the Professional Group Insurance Plan and includes a savings of \$283.10.
- A credit or discount has been applied to this policy: Defensive Driver.
- As your vehicle ages, the Multi-Risk Coverage you carry becomes nearly impossible to replace. Renew your policy today and enjoy continuous coverage against costly mechanical breakdowns.

Important Policy Information

- For your protection, California law requires the following to appear on this form: "Any person who knowingly presents false or fraudulent information to obtain or amend insurance coverage or to make a claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison."
- In California, you have the right to designate one person to receive notices from GEICO if your policy is about to cancel or expire for non-payment. Your designee will not have any rights or benefits under your policy other than the right to receive the notice or make a payment. You can change or remove the designee at any time. If you would like to add, change or remove a designee from your policy, simply log into your account at geico.com or call us at 1-800-841-3000.
- Claims incurred while an insured vehicle is being used to carry passengers for hire may not be covered by this contract. Please review the contract for a full list of exclusions and contact us if you plan to use any of your insured vehicles for this purpose.
- The mailing address on your policy was updated.
- A Defensive Driver or Mature Driver Improvement Credit or Discount no longer applies to your 2019 LEXS.
- Please verify that the coverages you requested are accurately reflected on your Declarations Page. Visit geico.com to review additional coverages and/or limits available to you.
- In accordance with Section 1872.87 of the California Insurance Code, in addition to your premium, a \$0.88 charge per vehicle is assessed to fund auto insurance fraud reduction initiatives. This charge is applied once per policy term per vehicle.
- The estimated annual mileage figures applicable to the vehicles on your policy for the current and upcoming policy periods are:

Vehicle	Current Mileage	Upcoming Mileage
2015 Lexs Nx	12,000	12,000
2019 Lexs Ux	19,000	19,000

