



Certificate of Liability Insurance

Date issued: 03/18/2023

Underwritten by: Phiadelphia Indermity Insulance Company - One Bala Plaza, Subs 100 - Bala Cymwyd. PA 19004 - NAIC e. 18058 Administered by: CPH & Assectates - 711 S. Dearborn St. Ste 205 - Chicago. IL 60605 - P 800 875 1911 - F 312 987 0902 - wio@cpters.com

DISCLAMER THE DE constitute a contract between the asumy previous), authorized repr and or aller the covers licate is issued as a matter of extormation only and corders no rights upon the certificate notice. The Certificate of insurance does not age afforced by the policies listed thereon ertative or producer, and the conflicate holder, nor does a alternatively or negatively amend.

Insured: BARBARA VIZCAINO

HOMESTEAD, FL 33033

Policy Number: AR264405

Policy Term: 03/18/2023 to 03/18/2024

Occupation: Nurse Aide/Assistant

Covered Locations

Professional Liability: Portable coverage, not location specific

Commercial General Liability - Fire/Water Legal Liability Business Personal Property	Licensing Board Defense	Supplemental Liability	Professional Liability	Coverage Type (Occurrence Form)
				Per incident (Per individual claim)
NA NA	\$ 35,000	\$ 6,000,000	\$ 6,000,000	(Total amount per year)

omments/Special Descriptions

Cartificate Holder

PROOF OF COVERAGE