

CERTIFICATE OF INSURANCE

Certificate Holder:

Todd Mark Schafer DPM
3200 E. Guasti Rd
Suite 100
Ontario, CA 91761


AUTHORIZED REPRESENTATIVE

THIS CERTIFICATE ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICY BELOW.

ISSUE DATE:	01/02/2023
INSURED:	Todd Mark Schafer, DPM Todd Schafer DPM A Professional Corp 3200 E. Guasti Rd Suite 100 Ontario, CA 91761

POLICYHOLDER (if different than the Insured):

COMPANY AFFORDING COVERAGE:	ProAssurance Insurance Company of America 3000 Meridian Boulevard Suite 400 Franklin, TN 37067
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THIS IS TO CERTIFY THAT THE POLICY OF INSURANCE LISTED BELOW HAS BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED:

TYPE OF INSURANCE:	Professional Liability - Claims-Made	
INSURED'S PROFESSION:	Podiatric	
POLICY TYPE:	Healthcare Professional	
POLICY NUMBER:	1PD0044908	
EFFECTIVE DATE:	01/01/2023	RETROACTIVE DATE: 12/29/2010
EXPIRATION DATE:	01/01/2024	EXCLUSIONS: Surgical Procedures
PRIMARY LIMITS OF LIABILITY:	\$1,000,000/ \$3,000,000	Non-Surgical