



Professional Liability - Supplemental
Cyber Loss & Liability Insurance Policy

**CANCELLATION ENDORSEMENT - SUPPLEMENTAL
CYBER LOSS & LIABILITY INSURANCE COVERAGE PART**

In consideration of a return premium stated below it is agreed that the Professional Liability Supplemental Cyber Loss & Liability Insurance Policy Coverage Part (form CYL 4000) is cancelled effective _____ at 12:01 AM Standard Time at the address of the **Named Insured**.

Supplemental Cyber Return Premium: \$ _____
Supplemental Cyber Return Taxes / Surcharges (if applicable): \$ _____

Total Return Premium: \$ _____

Reason for cancellation:

X

Other than as stated above, nothing herein contained shall be held to vary, alter, waive or extend any of the terms, conditions, provisions, agreements or limitations of the Policy to which this endorsement is attached.

Insured:

Policy Period:

Policy Number:

Endorsement Effective Date:

Endorsement:
