

250 Yonge Street Suite 3101, P.O. Box 3 Toronto, Ontario M5B 2L7 service@lawpro.ca

lawpro.ca

t 416-598-5800 1-800-410-1013

f 416-599-8341 1-800-286-7639

# **Policy No. 2023-001**

#### \*\*\* LAWPRO Invoice \*\*\*

To:SARAH SORAYA MUNSCHInvoice Date:07 DEC 2022NISHNAWBE-ASKI LEGAL SERVICEE&O Policy Effective Date:01 JAN 2023138B MISSION ROADFORT WILLIAM FIRST NATION, ON P7J 1K7Account:A0718200

Amount Due Pay in full by cheque or pre-authorized bank account BY 06 FEB 2023: \$3,456.00 If paid AFTER 06 FEB 2023: \$3,510.00

Details: ADJUSTED BASE-RATED PREMIUM \$3,250.00 PST \$260.00 =========== Total \$3,510.00 (If paid AFTER 06 FEB 2023)

Please note that paying lump sum by credit card is NOT eligible for the discount.

(Detach and return with payment)	
Policy: 1-718200 E&O Policy Effective Date: 0	1 JAN 2023
Account: A0718200 Firm: A109202 If paid BY 06 FEB 2023:	\$3,456.00
MUNSCH, SARAH SORAYA If paid AFTER 06 FEB 2023:	\$3,510.00
Amount Enclosed:	
Pay To: Law Society of Ontario	
c/o Lawyers' Professional Indemnity Company	
250 Yonge Street	
Suite 3101, P.O. Box 3	
Toronto, ON M5B 2L7	

\* Please write your POLICY NUMBER and ACCOUNT on the front of your cheque \*



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_		DECLARATIONS	
<b>item 1.</b> LSO #	INSURED	Licensee Name	Date Issued: 12/07/2022
718200		SARAH SORAYA MUNSCH	
Address		109202 NISHNAWBE-ASKI LEGAL SERVICE 138B MISSION ROAD FORT WILLIAM FIRST NATION, C	

#### ITEM 2. NAMED INSURED

Name	Law Society of Ontario
Address	Osgoode Hall
	130 Queen Street West
	Toronto, ON M5H 2N6

# ITEM 3. POLICY PERIOD

From **January 1, 2023**, 12:01 a.m. to **December 31, 2023**, 11:59 p.m. Standard Time at the address of the NAMED INSURED.

#### ITEM 4. BASE-RATED INSURANCE PREMIUM FOR THE POLICY PERIOD

Base Premium Innocent Party Premium

TOTAL ADJUSTED BASE-RATED PREMIUM

# ITEM 5. LIMIT OF LIABILITY

\$1,000,000 per CLAIM, subject to Part IV Condition A and any POLICY endorsement(s) that apply to the INSURED.

### ITEM 6. AGGREGATE LIMIT OF LIABILITY

\$2,000,000 per POLICY PERIOD, subject to Part IV Condition B and any POLICY endorsement(s) that apply to the INSURED.

#### ITEM 7. DEDUCTIBLE

\$5,000 per CLAIM, applicable to CLAIM expenses, indemnity payments and/or costs of repairs together.

# ITEM 8. MODIFICATIONS TO COVERAGE

- Innocent Party Coverage - SUBLIMIT OF LIABILITY of \$250,000 per CLAIM and in the aggregate per POLICY PERIOD, shall apply pursuant to Endorsement No. 5.

\$3,250.00 \$0.00

\$3,250.00