



Declarations Insert

In consideration of the required premium, this policy is effective for the policy period beginning and ending at 12:01 a.m. at the insured address below and subject to the limit of liability for each coverage stated below and subject to all provisions of the policy form, all endorsement, and your application. This Declarations Insert attaches to and becomes part of Policy Form TDIC 2200-0108AS.

Policy Number	Policy Period Effective Date	Policy Period Expiration Date
CA022589-6-01	07/01/2011	07/01/2012

Insured	Class Description
RONALD O. DAVIES, DDS [REDACTED] LAGUNA HILLS, CA 92653	60 DENTIST ANESTHESIOLOGISTS USING ANY ANESTHETIC OR MODALITY OF ADMINISTRATION WHEN THE INSURED DOES NOT PERFORM THE DENTAL OPERATIVE PROCEDURE. ANESTHESIA CAN BE PROVIDED TO ONLY ONE PATIENT AT A TIME.

Dental Specialty	Component	Territory
DENTAL ANESTHESIOLOGY	ORANGE COUNTY	A

Limits of Liability	Coverage	Retroactive Date
\$3,000,000 Each Claim	Coverage A - Professional Liability Claims-Made Form	07/01/1988
\$3,000,000 Each Occurrence	Coverage B - Dental Business Liability Occurrence Form	Not Applicable
\$3,000,000 Aggregate Limit for All Claims Under Coverages A, B & D combined		
\$100,000 Aggregate	Coverage C - Employment Benefits Liability Claims-Made Form	07/01/1988
N/A Aggregate Defense Costs reduce Limits	Coverage D - Employment Practices Liability Claims-Made Form - 20% co-payment	
\$60,000 Aggregate	Coverage E - Medical Waste Legal Defense Claims-Made Form - 20% co-payment	Not Applicable
\$100,000 Aggregate	Coverage F - Regulatory Authority Legal Defense Claims-Made Form	07/01/1988
\$5,106.00 Policy Premium		

Discounts: (1) Risk Management	Expires 07/01/2013	(2) Part-time 20 Hours	(3) None
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NOTICES

Endorsements made a part of this policy:			
TDIC2044-0108AS	TDIC2122-0108AS	TDIC2500-0108CA	TDIC2026-0108AS

For questions regarding your insurance call: 1-800-733-0633 or 916-443-0471

05/06/2011
 Date issued

TDIC1111-0108AS


 Robert F Spinelli
 Chief Financial Officer