Account Number: CA FRUG 1970 Date: 5/22/20 Initials: LPD

CERTIFICATE OF INSURANCE

ALLIED WORLD INSURANCE COMPANY C/O: American Professional Agency, Inc. 95 Broadway, Amityville, NY 11701 800-421-6694

This is to certify that the insurance policies specified below have been issued by the company indicated above to the insured named herein and that, subject to their provisions and conditions, such policies afford the coverages indicated insofar as such coverages apply to the occupation or business of the Named Insured(s) as stated.

THIS CERTIFICATE OF INSURANCE NEITHER AFFIRMATIVELY NOR NEGATIVELY AMENDS, EXTENDS OR ALTERS THE COVERAGE(S) AFFORDED BY THE POLICY(IES) LISTED ON THIS CERTIFICATE.

Name and Address of Named Insured:

FRUGE' PSYCHOLOGICAL ASSOCIATES, INC. 1300 CLAY ST. STE 600 OAKLAND CA 94612 Additional Named Insureds: SHAWN L. FRUGE, PSY.D. ALEXIS GREEN-FRUGE, PSY.D S. MCCORMICK-STEWART MA MOLLY BETTENCOURT, MA CHREE MIMMS, MA

Type of Work Covered: PROFESSIONAL PSYCHOLOGIST

Location of Operations: N/A

(If different than address listed above)

Claim History: None

Retroactive date is 05/21/2002

Coverages	Policy	Effective	Expiration	Limits of
	Number	Date	Date	Liability
PROFESSIONAL/ LIABILITY	5011-5785	5/21/20	5/21/21	1,000,000 5,000,000

NOTICE OF CANCELLATION WILL ONLY BE GIVEN TO THE FIRST NAMED INSURED, WHO SHALL ACT ON BEHALF OF ALL INSUREDS WITH RESPECT TO GIVING OR RECEIVING NOTICE OF CANCELLATION.

Comments: Defense Reimbursement Proceedings Limit is \$5,000. 1 ADDL.INS.BELOW: MAKING WAVES ACADEMY 4123 LAKE SIDE DR.

RICHMOND CA 94806

This Certificate Issued to:

Name: FRUGE' PSYCHOLOGICAL

ASSOCIATES, INC.

Address: 1300 CLAY ST. STE 600

OAKLAND CA 94612 APA 00138 00 (06/2014) Authorized Representative