

Declarations Page

NOTICE: THIS POLICY IS A CLAIMS-MADE POLICY. PLEASE READ THE POLICY CAREFULLY.

Policy Number

LHC H242938 05

THE HANOVER INSURANCE COMPANY

440 Lincoln Street
Worcester, MA 01653
(A Stock Insurance Company, herein called the **Company**)

Issue Date 05/01/2025

Item 1. NAMED INSURED AND ADDRESS

Kevin L Rush, Attorney at Law
934 Church Street
Flint, MI 48502

Item 2. POLICY PERIOD

Inception Date: 05/01/2025

Expiration Date: 05/01/2026

(12:01 AM standard time at the address shown in Item 1.)

Item 3. LIMIT OF LIABILITY

a. \$1,000,000 for each **Claim**; not to exceed
b. \$2,000,000 for all **Claims** in the Aggregate

Item 4. SUBLIMITS OF LIABILITY

Privacy and Security Liability Coverage

a. \$1,000,000 for each **Claim**; not to exceed
b. \$1,000,000 for all **Claims** in the Aggregate

Item 5. DEDUCTIBLE

a. \$2,500 each **Claim**
b. N/A for all **Claims** in the Aggregate

Item 6. SUPPLEMENTAL COVERAGE LIMIT AND DEDUCTIBLE

	LIMIT	DEDUCTIBLE
Disciplinary Proceedings	\$25,000 per Insured / \$25,000 for all Insureds	\$0
Subpoena Assistance	\$1,000,000 / \$2,000,000 in the Aggregate	\$2,500
Crisis Event	\$25,000 per Event / \$25,000 in the Aggregate	\$2,500
Nonprofit Directors and Officers	\$25,000 in the Aggregate	\$0
Loss of Earnings	\$500 per Day \$20,000 per Insured \$50,000 in the Aggregate	Not Applicable

Item 7. RETROACTIVE DATE

05/01/2020

Item 8. PREMIUM FOR THE POLICY PERIOD

Total Premium:

\$2,831.00

\$2,831.00

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Item 9. ENDORSEMENTS EFFECTIVE AT INCEPTION: See Schedule of Forms attached.

Item 10. NOTICE TO INSURER

Report a claim to the **Company** as required by Section G. Duties in the Event of Claim(s), Potential Claim(s), or Supplemental Coverage Matter(s) to:

The Hanover Insurance Company
440 Lincoln Street
Worcester, MA 01653

National Claims Telephone Number: 1-800-628-0250, extension 8556281

Facsimile: 508-926-4789

Email: lawyerclaim@hanover.com

Agent on behalf of: ECC INSURANCE BROKERS LLC
ONE TOWER LANE STE 2850
OAKBROOK TERRACE, IL 60181
1304139

We have caused this Policy to be signed by our President and Secretary and countersigned where required by a duly authorized agent of the Company.



John C. Roche, President



Charles F. Cronin, Secretary

Coverage: Lawyers Advantage Professional Liability

Endorsement Number: 4

Issued To: Kevin L Rush, Attorney at Law

Policy Number: LHC-H242938-05

Issued By: The Hanover Insurance Company

Effective Date: 05/01/2025

LIMITED ADDITIONAL INSURED

In consideration of the premium charged it is agreed that:

Section D. Definitions is amended to include:

Limited Additional Insured means a person or entity to which this **Policy** applies only with respect to a **Claim** only alleging vicarious liability imposed due to a **Wrongful Act** by an **Insured**. No coverage is afforded to the **Limited Additional Insured** for any **Claim** alleging, or in any way involving, any independent negligent act, error, omission of, or misstatement of the **Limited Additional Insured**.

It is hereby understood and agreed that Genesee County , is a **Limited Additional Insured**.

All other terms and conditions remain unchanged. The title and any headings in this endorsement are solely for convenience and form no part of the terms and conditions of coverage.