



**HEALTH CARE PROTECTION PROGRAM**  
*Risk Management*

**CERTIFICATE OF COVERAGE**

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**CERTIFICATE NO.:** 20173704

This certificate is issued as a matter of information only and confers no rights upon the certificate holder other than those provided in the coverage. This certificate does not amend, extend or alter the coverage described herein.

**THIS IS TO CERTIFY TO:** Office of the Seniors Advocate's Long Term Care

This is to certify that coverage described herein have been issued to the covered entity named herein for the coverage period indicated.

**COVERED ENTITY:** Providence Health Care Society (PHC)

**ACTIVITY:** whereby PHC volunteers will be providing services on behalf of PHC for the Office of the Seniors Advocate's Long Term Care sector survey

**COVERAGE:** Commercial General Liability

**LIMITS OF LIABILITY:** \$2,000,000.00

**EXPIRY:** Continuous until cancelled

**DATE:** June 8, 2016

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Laura Hughes  
AUTHORIZED REPRESENTATIVE