

DECLARATIONS
ACCOUNTANTS PROFESSIONAL LIABILITY POLICY
FLORIDA

PRODUCER BRANCH PREFIX POLICY NUMBER

003613 970 APL 625798658

INSURANCE IS PROVIDED BY
CONTINENTAL CASUALTY COMPANY
151 N. Franklin Street, CHICAGO, IL 60606
A STOCK INSURANCE COMPANY
REFERRED TO IN THIS POLICY AS WE, US, OR OUR.

1. Named Insured and Mailing Address

Timur Knyazev, CPA
866 Palmetto Pointe Cir
Cape Coral, FL 33991-3607

IF YOU HAVE ANY QUESTIONS REGARDING YOUR POLICY
PLEASE CONTACT US AT THE ADDRESS ABOVE OR CALL
1-800-262-8060.

* * * * NOTICE * * * * *

THIS IS A CLAIMS-MADE AND REPORTED POLICY AND COVERS
ONLY CLAIMS FIRST MADE AGAINST AN INSURED AND REPORTED
IN WRITING TO THE COMPANY DURING THE POLICY PERIOD.
PLEASE READ THIS POLICY CAREFULLY AND DISCUSS THE
COVERAGE WITH YOUR INSURANCE AGENT.

2. POLICY PERIOD: FROM: 9/28/25 TO: 9/28/26 at 12:01 A.M.
Standard time at your address shown above.

3. PRIOR ACTS DATE: 9/28/17 at 12:01 A.M.

4. DEDUCTIBLE: Per Claim Deductible _____ or Aggregate Deductible \$0

5. LIMITS OF LIABILITY: (INCLUDES CLAIM EXPENSES UNLESS AMENDED BY ENDORSEMENT)

\$1,000,000 PER CLAIM
\$2,000,000 AGGREGATE

6. FOR NON-RENEWAL: 45 days notice will be given you in accordance with policy conditions.

7. PRINTED ENDORSEMENTS ATTACHED AT POLICY ISSUANCE INCLUDE:

G-127136-A(1/16) Policy CNA87510XX CPA NetProtect Endorsement
G-127137-A09(7/12) Declarations Page
G-127157-A(6/97) Nuclear Energy & Pollution Excl
G-127164-A09(6/97) Amend Termination Provisions - FL
G-19104-BC(5/95) Policyholder Notice
G-127165-A09(9/12) Amend Endorsement - FL
G-141584-A(6/03) Policyholder Notice
CNA87547XXC Sole Own/Disability Ext Clms Rptg Per
CNA90673XX-(11/17) Amend Limits of Liability Endorsement
G-127152-AC(5/06) Claim Expenses Outside Limits