

**Certificate of Insurance**

---

**INDEMNITY YEAR 2019 - 2020  
EVIDENCE OF SOLICITORS'  
COMPULSORY PROFESSIONAL  
INDEMNITY INSURANCE**

---

**Name of Participating Insurer**  
Travelers Insurance Company Limited

**Name of Insured Firm of Solicitors**  
Jayne Willetts & Co Solicitors Limited

**Principal Address of Firm**  
The Barn  
Woodman Lane, Clent  
DY9 9PX

**Period of Insurance**  
1st October 2019 to 30th September 2020 both dates inclusive

**Policy Number**  
UC SOL 3952975

**100% of Compulsory Cover Underwritten by Participating Insurer**

**SIGNED**



**NAME**

Jonathan Davies

**FOR AND ON BEHALF OF** Travelers Insurance Company Limited

**DATE**

6 August 2019