

Office of Risk Management  
State of Louisiana  
Division of Administration



JOHN BEL EDWARDS  
GOVERNOR

JAY DARDENNE  
COMMISSIONER OF ADMINISTRATION

July 1, 2019

Ms. Vy Apostolakis  
LSU Health Sciences Center  
433 Bolivar Street, 8<sup>th</sup> Floor  
New Orleans, LA 70112

Dear Ms. Apostolakis:

RE: Certificate of Insurance for  
Cyber Liability  
4489 LSUHSC – New Orleans

Attached is the original certificate of insurance showing proof of coverage for your Agency.  
Please make a copy for your files and records as necessary.

If you have any questions, please do not hesitate to call me at (225)342-8470 or send a fax to  
(225) 342-8473.

Sincerely,

A handwritten signature in blue ink that reads "Allison Schailer". The signature is fluid and cursive.

Allison Schailer  
State Risk Underwriter

Attachment

