

CERTIFICATE OF CURRENCY ASSOCIATION LIABILITY

This certificate is provided for information purposes and is accurate based on our records at the time it is issued. We are under no obligation to inform you of any subsequent changes to the insurance contract or our records. This certificate confers no rights on the certificate holder and is not intended to amend, extend or alter the coverage provided by the policy in any way.

The Insured: DeMolay Australia Limited

Policy Number: HC-167256

Period of Insurance: 31 October 2019 to 31 October 2020
both days inclusive at 4:00pm local standard time

Business Description: Boys' Leadership and Development Programme

Indemnity Limit: \$10,000,000 In the aggregate during the Policy Period inclusive of
Defence Costs


Sub Limits:

Statutory Liability	\$1,000,000
Fidelity	\$100,000
Crisis Loss	\$50,000
Occupational Health & Safety	\$500,000
Pollution	\$500,000
Publicity	\$25,000
Taxation Disputes	\$50,000
Insolvency	\$50,000

Retroactive Date: The date when the Insured first purchased similar insurance and has had
such insurance continuously in force.

Insuring Clauses \$10,000,000 Office Bearer's Liability
\$10,000,000 Association Reimbursement
\$10,000,000 Professional Indemnity
\$10,000,000 Associations Liability
\$10,000,000 Investigations and Inquiries

Insurer: Certain Underwriters at Lloyd's

Signed: 

Hostsure Underwriting Agency Pty Ltd
ABN 44 108 154 829 AFSL 268726
On behalf of Certain Underwriters at Lloyd's

Date: 2 October 2019

Mr B Jenkinson
DeMolay Australia Ltd
7 Rolls Royce Court
Joyner QLD 4500

Renewal of Cover

TAX INVOICE

I0403091

Our Reference : AUS SBR Q3117 0318447/003

Date : 25.09.2019

Class : Association Liability

Insurer : Hostsure Underwriting Agency Pty Ltd

Policy No. : HC-167256

Period : 31.10.2019 to 31.10.2020 at 4.00pm

Premium 1,840.00

Stamp Duty 190.65

Underwriter Agency Fee 160.00

Broker Fee 72.14

Premium GST 200.00

Fee GST 7.21

GST Total 207.21

Total Amount A\$ 2,470.00

IMPORTANT NOTES

**** This policy expires at 4.00pm on the date of expiry, unless otherwise stated ****

Your Account Manager is: **Kate Batchelor**
Representative of: **Austcover Pty Ltd**
Tel (07) 3237 8636 Fax 1300 654 186 katebatchelor@austcover.com.au

Terms - Net 14 Days. Please forward your remittance to ensure cover. Claims must be notified immediately as late notification may cause denial of liability in some instances.



DEFT
PAYMENT SYSTEMS

DEFT Reference No
4005 7210 4030 911

Pay by credit card (Visa, Mastercard, Amex or Diners)
at www.deft.com.au or 1300 78 11 45



Bill Code: 20362
Reference: 4005 7210 4030 911

Austcover Direct Debit Details
Account Name: Austcover Pty Ltd Trust Account
BSB: 182-222 Account No: 204575047
Please Include Reference: I0403091

Please see attached for further payment methods.

Reference : AUS SBR Q3117 0318447/003

Invoice No : I0403091

Client Name : DeMolay Australia Ltd

Account Mgr: Kate Batchelor

Date : 25.09.2019

TOTAL PAYABLE 2,470.00

Pay Monthly by Funding with Hunter

10 Monthly Instalments of \$ 463.59

Please note the initial instalment will be \$ 523.59

and will include an application fee of \$ 60.00

Total Interest Charged: \$ 385.90

First Instalment Due Date: 31/10/19

Total Amount Payable \$ 4,695.90

To proceed with funding and to complete your application,
please visit: <https://hpf.online/692k3r2g52>

Application Reference: 40441368



PAYMENT OPTIONS

Outlined below are the instructions for various payment methods, please use the method below which is most convenient to you. We can provide another option which allows you to pay by instalments. Please contact us for a Premium Funding application if required.



DEFT
PAYMENT SYSTEMS

DEFT is a service of Macquarie Bank



Internet

Pay over the Internet from your credit card at www.deft.com.au/

Austcover Pty Ltd accepts Mastercard, Visa, American Express & Diner Club Cards.*

*Payments by credit card will attract a surcharge.



Contact your participating bank, credit union or building society to make payment directly from your cheque or savings account.

You will be required to enter the Biller Code and BPAY reference number as detailed on the front of your invoice.



Telephone

Pay by phone from your credit card.

Call 1300 78 11 45 to make a payment

Austcover Pty Ltd accepts, Mastercard, Visa, American Express & Diners Club Cards.*

The phone payment line is a 24-hour Service. Calls are charged at the cost of a local call (mobiles extra).



Mail

Detach payment slip and mail with payment to:

Austcover Pty Ltd
GPO Box 2780
Brisbane QLD 4001

Please make cheques payable to Austcover Pty Ltd

Please note that receipts will not be issued for mailed payments.

COVERAGE SUMMARY

DeMolay Australia Ltd
Association Liability

ASSOCIATION LIABILITY INSURANCE

THE INSURED:

DeMolay Australia Limited

PERIOD OF INSURANCE:

31/10/2019 to 31/10/2020
both days inclusive at 4.00pm local standard time

BUSINESS DESCRIPTION:

Principally Boy's Leadership and Development Programme

INTERESTED PARTIES:

Nil Advised

LIMIT OF INDEMNITY:

\$ 10,000,000 in the aggregate during the Policy
Period inclusive of Defense Costs

SUB LIMIT(S) OF LIABILITY:

Statutory Liability	\$	1,000,000
Fidelity	\$	100,000
Crisis Loss	\$	50,000
Occupational Health & Safety	\$	500,000
Pollution	\$	500,000
Publicity	\$	25,000
Taxation Disputes	\$	50,000
Insolvency	\$	50,000

INSURING CLAUSES:

- 1.1.1 Office Bearer's Liability
- 1.1.2 Association Reimbursement
- 1.1.3 Professional Indemnity
- 1.1.4 Associations Liability
- 1.1.5 Investigations and Inquiries

EXCESS:

- \$ 2,500 Fidelity (each and every claim)
- \$ 5,000 Employment Liability (each and every claim)
- \$ 1,000 All Other Claims (each and every claim)
- \$ Nil Insured Person (each and every claim)

CONTINUITY DATE:

31/10/2017 Excluding Known Claims & Circumstances

RETROACTIVE DATE:

The date when the Insured first purchased similar insurance
and has had such insurance continuously in force.

AUTOMATIC EXTENSIONS:

As per Policy Wording

COVERAGE SUMMARY

DeMolay Australia Ltd
Association Liability

ENDORSEMENTS:

As per Policy Wording

EXCLUSIONS:

Abuse/Molestation Exclusion

This insurance shall not indemnify the INSURED and/or INSURED PERSONS against any CLAIM or for any loss directly or indirectly arising out of, related to, or in connection with any actual or alleged sexual assault, sexual abuse or molestation of any person except as provided for under Automatic Extension 2.24 Employment Practices Liability. Exclusions as per policy

TERRITORIAL LIMITS: As per Policy Wording
JURISDICTIONAL LIMITS: As per Policy Wording
POLICY WORDING: ASL 0416 2nd ed.

INSURER:

Certain Underwriter's at Lloyds (100%)
Level 9, 1 O'Connell Street
Sydney NSW 2000

PRIVACY ACT:

We are committed to protecting your privacy. We use the information you provide to advise about and assist with your insurance needs. We provide your information to insurance companies and agents that provide insurance quotes and offer insurance terms to you or the companies that deal with your insurance claim (such as loss assessors and claims administrators). Your information may be given to an overseas insurer (like Lloyd's of London) if we are seeking insurance terms from an overseas insurer, or to reinsurers who are located overseas. We will try to tell you where those companies are located at the time of advising you. We do not trade, rent or sell your information.

If you don't provide us with full information, we can't properly advise you, seek insurance terms for you, or assist with claims and you could breach your duty of disclosure.

For more information about how to access the personal information we hold about you, how to have the information corrected and how to complain if you think we have breached the privacy laws, ask us for a copy of our Privacy Policy or visit our website.

IMPORTANT NOTICES:

- * The above is a summary only, exclusions and limitations may apply - Refer to the Insurer's Policy for full terms and conditions.
- * Please ensure that the Sums Insured shown meet your requirements.
- * Should this document show a variation from your instructions, please notify this office immediately.

Austcover Pty Ltd

ABN 46 073 425 662
GPO Box 2780
Brisbane QLD 4001

Phone: (07) 3237 8601
Fax: 1300 654 186

COVERAGE SUMMARY

DeMolay Australia Ltd
Association Liability

- * This policy does not have a Workers Compensation component. If you employ anyone in your business you are required by law to have adequate Workers Compensation cover.
- * If additional covers or policies are required, please contact us.