Arthur J. Gallagher & Co (Aus) Limited

ABN 34 005 543 920 AFSL 238312



Level 16/100 Arthur St, North Sydney NSW 2060

PO Box 1898

NORTH SYDNEY NSW 2059

26 September 2025

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Confirmation of Insurance

In connection with this insurance, we act as insurance broker on behalf of the below named Insured.

Unless otherwise indicated below this Confirmation is issued as a matter of information only and confers no rights upon the holder. We confirm the below named insurers have been instructed to arrange cover as follows:

CLASS OF INSURANCE	Business Travel		
INSURER	Chubb Insurance Australia Limited		
POLICY NO	01PP534804		
PERIOD OF COVER	From: To:	30 September 2025 at 4:00pm Local St 30 September 2026 at 4:00pm Local St	
INSURED	Anglican Diocese of Grafton		
BUSINESS DESCRIPTION	All activities of the Insured and including inter alia: Churches, Ministries, Chaplaincies, Missions and Educational facilities and all other activities incidental thereto.		
COVERED PERSONS	organisatio	ed Person travelling on authorised busine on covered by the Policyholder, inc ying Dependent Child(ren).	
SCOPE OF COVER	Cover under the Policy applies whilst a Covered Person is on a Journey.		
JOURNEY DEFINITION	Journey means a Declared Trip undertaken on the business of the Policyholder and/or authorised by the Policyholder provided such travel involves a destination fifty (50) kilometres or more from the Covered Persons normal place of business or residence. Cover shall commence from the time a Covered Person leaves their normal place of residence or place of business, whichever is left last and continue on a fulltime twenty-four (24) hour basis until the Covered Person returns to their normal place of residence or place of business, whichever occurs first. The maximum duration of any one (1) trip is the lesser of the original itinerary of the Declared Trip or one hundred & eighty (180) days, unless agreed by Us.		
LIMITS OF LIABILITY	Section 1:	Personal Accident & Sickness	
	A. Acciden	tal death & capital benefits	5 x Salary up to \$500,000
	Partner) B. Weekly C. Weekly D. Injury re	Death (Accompanying Spouse / Injury 100% of salary Sickness 100% of salary sulting in fractured bones	\$250,000 up to \$600 per week for 156 weeks up to \$600 per week for 156 weeks \$3,000
AGGREGATE LIMITS OF LIABILITY	E. Loss of	teeth/dental procedures	- per tooth \$250 - lump sum \$2,000.
	Non-sched	eriod of Insurance (A) uled Flights (B)) event with respect to War / C)	\$5,000,000 \$1,000,000 \$ 500,000
	Any one (1) Period of Insurance with War / Civil War (D)	\$1,000,000

Any one (1) occurrence - Kidnap and Ransom / Extortion Cover (E)

TERRITORY

Worldwide.

IMPORTANT NOTICE

1. Subject at all times to the policy's more detailed terms, conditions, definitions and exclusions. Nothing herein shall be construed to alter in any way the scope of the contract between insurer(s) and the insured.

\$1,000,000

2. Should the abovementioned contract of insurance be cancelled, assigned or changed during the above policy period in such a manner as to affect this document, no obligation to inform the holder is accepted by Arthur J Gallagher.

Signed by and on behalf of Arthur J. Gallagher

David Smith

Account Manager, Corporate NSW

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