

TRAVEL INSURANCE CERTIFICATE OF INSURANCE

effected through Arch Underwriting at Lloyd's (Australia) Pty Ltd
("Service Company Coverholder")

THIS CERTIFICATE OF INSURANCE confirms that in return for payment of the Premium shown in the Schedule, Certain Underwriters at Lloyd's have agreed to insure you, in accordance with the policy wording attached to this Certificate.

You or your representative can obtain further details of the syndicate numbers and the proportions of this Insurance for which each of the Underwriters at Lloyd's is liable by requesting them from the Service Company Coverholder shown above. In the event of loss, each Underwriter (and their Executors and Administrators) is only liable for their own share of the loss.

In accepting this Insurance, the Underwriters have relied on the information and statements that you have provided on the Proposal Form (the date of which is stated below). You should read this Certificate carefully and if it is not correct contact the Service Company Coverholder or your broker. It is an important document and you should keep it in a safe place with all other papers relating to this Insurance.

SCHEDULE

POLICY NUMBER:	P0092899CT2024AU0
POLICY HOLDER:	<p>The ReddiFund Mutual Benefit Fund Discretionary Trust (HDT) and members of the HDT.</p> <p>Members of the HDT and other bodies/persons affiliated and admitted to the scheme. This includes the financial members of the CFMEU WA as admitted to the scheme.</p> <p>including subsidiary or controlled companies now or previously existing or hereafter formed or acquired, including mortgagees, lessors and other interested parties for their respective rights and interests.</p>
ADDRESS OF POLICY HOLDER:	Unit 1, 2 Saltpray Close, South Australia 5000
TYPE OF INSURANCE:	Travel
POLICY WORDING:	Business Travel Policy Wording and Product Disclosure Statement (PDS) - ARCHPDSBT2023V5
INSURANCE PERIOD:	31 August 2024 4:00pm to 31 August 2025 4:00pm local time at the address of the POLICY HOLDER
COVERED PERSONS:	Category 1: All members of the POLICY HOLDER including any ACCOMPANYING SPOUSE or PARTNER and DEPENDENT CHILDREN .
OPERATIVE PERIOD OF COVER:	Category 1: Cover is provided under the POLICY whilst the COVERED PERSON is on a JOURNEY .
TRAVEL RADIUS:	100 kms
MINIMUM AGE LIMIT:	0
MAXIMUM AGE LIMIT:	80

Limit(s) of Liability

EVENT LIMIT OF LIABILITY:	All POLICY Sections	\$10,000,000
NON SCHEDULED FLIGHTS LIMIT OF LIABILITY:	All POLICY Sections	\$1,000,000
POLICY AGGREGATE LIMIT OF LIABILITY:	All POLICY Sections	\$10,000,000

Sections of Cover

Category 1

SECTION 1	PART A - PERSONAL ACCIDENT LUMP SUM BENEFITS	SUM INSURED
COVERED EVENT 1	ACCIDENTAL DEATH	\$50,000
	ACCIDENTAL DEATH -ACCOMPANYING SPOUSE or PARTNER	\$20,000
	ACCIDENTAL DEATH - DEPENDENT CHILD(REN)	\$5,000
COVERED EVENTS 2 - 26	As per Table of Benefits 1	\$50,000
	ACCOMPANYING SPOUSE OR PARTNER	\$20,000
	DEPENDANT CHILD(REN)	\$5,000
COVERED EVENTS 27 - 31	Surgical benefits as a result of BODILY INJURY as per Table of Benefits 2	Not Covered
COVERED EVENTS 32 - 35	Surgical benefits as a result of SICKNESS as per Table of Benefits 3	Not Covered
COVERED EVENTS 36 - 42	BODILY INJURY resulting in FRACTURED as per Table of Benefits 4	\$Not Covered
COVERED EVENTS 43 - 44	BODILY INJURY resulting in LOSS of TEETH or dental procedures as per Table of Benefits 5	\$Not Covered
SECTION 1	PART B - LOSS OF INCOME BENEFITS	SUM INSURED
COVERED EVENT 45	TEMPORARY TOTAL DISABLEMENT as a result of BODILY INJURY	\$1,000
	Maximum Percentage of SALARY	100 %
	Maximum BENEFIT PERIOD	13 weeks
	EXCESS PERIOD	14 days
COVERED EVENT 46	TEMPORARY PARTIAL DISABLEMENT as a result of BODILY INJURY	\$1,000
	Maximum Percentage of SALARY	100 %
	Maximum BENEFIT PERIOD	13 weeks
	EXCESS PERIOD	14 days
COVERED EVENT 47	TEMPORARY TOTAL DISABLEMENT as a result of SICKNESS	Not Covered
COVERED EVENT 48	TEMPORARY PARTIAL DISABLEMENT as a result of SICKNESS	Not Covered
SECTION 2	MEDICAL AND ADDITIONAL BENEFITS	
	Medical And Additional Expenses	\$500,000
	Excess	\$100
	Hospital Bed Confinement	\$200
	Maximum BENEFIT PERIOD	15 days
SECTION 3	CANCELLATION, LOSS OF DEPOSITS and MISSED TRANSPORT CONNECTION	
	3.1 Cancellation and Curtailment	\$10,000
	3.2 Loss of Deposits	\$10,000
	- Private travel (including INCIDENTAL PRIVATE TRAVEL)	\$10,000
	3.3 Reward Points	\$10,000
	3.4 Missed Transport Connection	\$5,000
SECTION 4	BAGGAGE AND PERSONAL BELONGINGS	
	4.1 Loss or Damage	\$10,000
	Any ONE ITEM (excluding PERSONAL ELECTRICAL ITEMS)	35%
	PERSONAL ELECTRICAL ITEMS	\$10,000
	EXCESS	\$100
	MONEY	\$7,500
	4.2 DELAYED BAGGAGE AND PERSONAL BELONGINGS	\$Not Covered

	4.3 IDENTITY THEFT AS A RESULT OF STOLEN OR LOST PERSONAL DOCUMENTS	\$
SECTION 5	ALTERNATIVE EMPLOYEE or RETURN TO ASSIGNMENT	
	ALTERNATIVE EMPLOYEE or RETURN TO ASSIGNMENT	\$Not Covered
SECTION 6	KIDNAP, HIJACK or DETENTION	
	KIDNAP, HIJACK or DETENTION occurring outside of Mexico, Central America, Colombia, or Venezuela	\$30,000
	KIDNAP, HIJACK or DETENTION occurring in Mexico, Central America, Colombia, or Venezuela	\$30,000
	Aggregate Limit of Liability (Section 6)	\$1,000,000
SECTION 7	RENTAL VEHICLE EXCESS	
	7.1 Rental Vehicle Excess and Administrative Expenses	\$2,500
	7.2 Return of Rental Vehicle	\$500
	7.3 Private Vehicle Excess	\$
SECTION 8	PERSONAL LIABILITY	
	Personal Liability	\$2,000,000
SECTION 9	POLITICAL, AND NATURAL DISASTER EVACUATION	
	Political and Natural Disaster Evacuation	\$20,000
	Accommodation Costs	\$ per day BENEFIT PERIOD 0 days
	Aggregate Limit of Liability (Section 9)	\$1,000,000
SECTION 10	EXTRA TERRITORIAL WORKERS COMPENSATION BENEFITS	
	Weekly Benefit	Not Covered
	Sum Insured	Not Covered
	Aggregate Limit of Liability (Section 10)	\$1,000,000
SECTION 11	ADDITIONAL BENEFITS	SUM INSURED
11.1	Accidental HIV Infection BENEFIT	Not Covered
11.2	Accommodation and Transport Expenses BENEFIT	\$1,000
11.3	Air or Road Rage BENEFIT	Not Covered
11.4	Carjacking Assault BENEFIT	Not Covered
11.5	Chauffeur BENEFIT	Not Covered
11.6	Childcare BENEFIT	BENEFIT PERIOD Not Covered
11.7	Coma BENEFIT	250 per week BENEFIT PERIOD EXCESS PERIOD
11.8	Corporate Image Protection BENEFIT	Not Covered
11.9	Data Connection BENEFIT	Not Covered
11.10	Death by Specified Sickness BENEFIT	\$10,000
11.11	Dependent Child Assistance BENEFIT	Not Covered
11.12	Domestic Assistance Expenses BENEFIT	Not Covered BENEFIT PERIOD EXCESS PERIOD
11.13	Education Fund BENEFIT	Not Covered
11.14	Executor Emergency Cash Advance BENEFIT	Not Covered
11.15	Funeral Expenses BENEFIT	\$10,000
11.16	Home Burglary Excess BENEFIT	Not Covered
11.17	Independent Financial Advice BENEFIT	Not Covered
11.18	Keys and Locks BENEFIT	Not Covered
11.19	Lost Earnings BENEFIT	Not Covered
11.20	Orphaned BENEFIT	Not Covered
11.21	Out-of-Pocket Expenses BENEFIT	Not Covered BENEFIT PERIOD
11.22	Overbooked Flight Benefit	Not Covered
11.23	Partner or Spouse Retraining BENEFIT	Not Covered
11.24	Pet Boarding Expenses BENEFIT	Not Covered

11.25	Premature Birth or Miscarriage BENEFIT	Not Covered
11.26	Reconstructive or Cosmetic Surgery BENEFIT	Not Covered
11.27	Repatriation of Belongings BENEFIT	Not Covered
11.28	Replacement Staff/Recruitment Costs BENEFIT	Not Covered
11.29	Retraining and Rehabilitation BENEFIT	Not Covered
11.30	Search and Rescue Expenses BENEFIT	\$10,000
11.31	Student Tutorial BENEFIT	Not Covered
11.32	Terrorism Injury BENEFIT	Not Covered
11.33	Towing Expenses BENEFIT	Not Covered
11.34	Trauma BENEFIT	Not Covered
11.35	Unexpired Membership BENEFIT	Not Covered

Note: The EVENT LIMIT OF LIABILITY, NON SCHEDULED FLIGHT LIMIT OF LIABILITY and BENEFITS payable applies in excess of any applicable EXCESS PERIOD.

ENDORSEMENTS

Premiums

Base Premium	\$30,000.00
GST	\$2,388.96
Stamp Duty	\$2,957.86
Total Amount Payable by the POLICY HOLDER	\$35,346.82

Insurer:	Proportion:
Arch Underwriting at Lloyd's (Australia) Pty Ltd ABN 27 139 250 605 For and on behalf of Certain Underwriters at Lloyd's	100%

UNIQUE MARKET REFERENCE: B6060500000012024

AGREEMENT NUMBER 500000012024

The amount of Premium specified herein is the amount due to the Underwriters and any commission allowed by them is to be regarded as remuneration of the Broker placing this Insurance.

This CERTIFICATE is issued by the Service Company Coverholder shown above in accordance with the authority granted to them by Certain Underwriters at Lloyd's under the Agreement referred to herein.



Arch Underwriting at Lloyd's (Australia) Pty Ltd
For and on behalf of Certain Underwriters at Lloyd's
Signed at Melbourne
30 August 2024