

# Farm Insurance Renewal Invitation

Policy Number EGA135108FAR

Client Number EG005725

Client Name JOHN CONTARINO & TERRY LEARY

JOHN CONTARINO & TERRY LEARY  
PO BOX 123  
ATHERTON QLD 4883

## Elders Insurance

ELDERS INSURANCE TABLELANDS

ABN: 59 097 345 474

ATTN:GAIL BARTON

PO BOX 814 MALANDA QLD 4885

(P) 0740956677

(F) 0740898001

(E) insurancetablelands@elders.com.au

## Period of Insurance

From 08/06/2022 To 08/06/2023 at 4pm

Your Insurance Policy will expire at 4.00pm on the FROM DATE shown. To arrange cover : 1. Check the Sum(s) Insured, Policy Covers and Policy Wordings to understand what you are covered for. If any changes are required please advise us. 2. Pay the amount due before the FROM DATE.

## The Insured

LEACON SUPERANNUATION FUND

## Payment Advice/Options



### By Mail:

If payment is by cheque or credit card please detach this Payment Advice and forward to:

ELDERS INSURANCE TABLELANDS  
ATTN:GAIL BARTON  
PO BOX 814  
MALANDA QLD 4885



Billers Code: 106591  
Ref: 0201135108039

### Telephone & Internet Banking - BPAY®

Contact your bank or financial institution to make this payment from your cheque, savings, debit, credit card or transaction account. More info: [www.bpay.com.au](http://www.bpay.com.au)

Please make Cheque payable to: Elders Insurance

### Payment by Credit Card

MasterCard  Visa

Credit Card

Account Name  Expiry Date  /  /

Signature  Date  /  /

For the Amount of \$

### Client name:

JOHN CONTARINO & TERRY LEARY

Client Number: EG005725

Policy Number: EGA135108FAR

Agent Number: EG0040182

**Total Amount Payable \$1,555.44**

**Due Date 08/06/2022**

Issued by Elders Insurance (Underwriting Agency) Pty Limited ABN 56 138 879 026 AFS Licence 340 965 Level 15, 11 Waymouth Street Adelaide SA 5000  
Underwritten by QBE Insurance (Australia) Limited ABN 78 003 191 035 AFS Licence 239545 Level 18, 388 George Street Sydney NSW 2000

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ABN: 59 097 345 474  
ATTN:GAIL BARTON  
PO BOX 814 MALANDA QLD 4885

## Period of Insurance

From 08/06/2022 To 08/06/2023 at 4pm

### The Insured

LEACON SUPERANNUATION FUND

### Location Summary

#### Address

317 WINFIELD RD LAKE EACHAM QLD 4884

### Farm Liability Summary

Farm Liability cover has NOT been selected and is NOT covered by this policy

### Theft of Farm Property Summary

Theft cover has NOT been selected and is NOT covered by this policy

This document becomes your Policy Schedule and Tax Invoice/Adjustment Note on payment.

### Total Premium and Charges

Premium	\$1,269.76	ABN	31 207 459 216
Levies	NIL	Tax Status	Not Registered
GST	\$126.98	Tax Percentage	\$0.00%
Stamp Duty	\$125.70		
*Intermediary Service Fee	\$30.00		
*Intermediary Service Fee GST	\$3.00		
<b>Total Premium</b>	<b>\$1,555.44</b>		

The amount of stamp duty paid is calculated under the relevant States/Territory Duties Act, based on where the risks, properties, contingencies or events are located.

\*Invoiced for and on behalf of Elders Insurance Authorised Representative.