MONEY LOSS CONTINGENCY RESERVE

Overview

Due to the current unavailability of a suitable loss of money insurance policy for Lions Clubs and Districts, Multiple District 201 of Lions Clubs International Inc. ("MD201") has made the decision to internally fund this risk through a Money Loss Contingency Reserve. This reserve has been established for the period from 30 September 2026 until 31 January 2027, with extension subject to approval at the January 2027 Council Meeting. The monies paid by clubs and districts for loss of money insurance for 2026-2027 will be retained and directed into this separate reserve. Where an eligible loss occurs, an application may be made by the respective club or district for reimbursement from the reserve, in accordance with the terms and conditions set out below.

Entities eligible for reimbursement

All Lions Clubs, Leo Clubs, and Lions Districts within Multiple District 201.

Reimbursement amount

The amount of Money loss up to a maximum of $10,000.00 for any one event.

Administration fee

An administration fee of $250.00 will be deducted from each reimbursement application paid.

Events eligible for reimbursement

Money loss whilst:

- in transit anywhere in Australia.
- at any meeting or project site.
- at the residential premises of a Lions Club member.

Discretion and limits for reimbursement

All reimbursements are discretionary. Payments may only be made if sufficient funds are available in the Money Loss Contingency Reserve. No club or district has a right to reimbursement, and MD201 does not undertake liability for any loss.

Conditions & Exclusions

The following conditions and exclusions apply to this reimbursement:

- Money must be kept securely locked away whilst not in transit.
- Money collected must be deposited into a banking facility within 5 business days of collection.
- Unexplained disappearance and/or shortage is not eligible.
- Money held in unlocked and/or unattended vehicles is not eligible.
- Money held in unattended cash dispensers at meeting or project sites or sales outlets is not eligible.
- Loss occasioned by dishonesty on the part of any Lions Club or Leo Club member is not eligible.

Definitions

"Money" for this reimbursement means cash (notes and coins), cheques, post office money orders, and manual credit card sale vouchers.

Application Process

To apply for reimbursement, please complete the attached form and return to insurance@lions.org.au .

DRAFT

MULTIPLE DISTRICT 201 of LIONS CLUBS INTERNATIONAL INC. ("MD201")

MONEY LOSS - REIMBURSEMENT APPLICATION FORM

Instructions to Club or District completing this application form:

1. **In the event of Loss by Burglary or Theft, details must be reported immediately to the local police Station.**
2. **Fully complete form and return, along with supporting documents, as follows:**

Return completed form to:
PDG Peter Lamb
Chairperson
Lions Australia Insurance Program
08 9586 6631
insurance@lions.org.au
www.lionsclubs.org.au/insurance

Club Name:		District:
ABN Number:	Secretary:	
Are you registered for GST?	Email:	
Address:		
Date of Loss:	Where did Loss take place?	
Give full details of how Loss occurred:		
Is anyone to blame for this Loss? **YES** ◯ **NO** ◯ If so, who?		
Name & Address of any Witnesses:		
Have Police been notified? **YES** ◯ **NO** ◯ Station:		
Police Report No.:	Did Police Attend? **YES** ◯ **NO** ◯	

SCHEDULE OF LOSS

Description of Money Loss	Amount of Loss
	$
	$
	$
	$
	$
	$
	$
TOTAL AMOUNT OF LOSS:	$

Please attach any documents available to substantiate your application, including how the loss was calculated.

Describe any action taken to reduce or recover your Loss?

DECLARATION: I warrant the truth of the foregoing statement and particulars in every respect and that I have not withheld from MD201 any material information in respect of this Loss. Furthermore, I undertake and agree to notify MD201 immediately if any of the money mentioned in this application is subsequently recovered.

Dated at: _____this_____day of_____20___

Signature of authorised Officer: _____

Name & Position held:_____

Signature of Witness: _____

Name of Witness: _____

To facilitate payment via EFT, please supply:

Your Bank BSB Number: _____

Account Number: _____

Name of Account: _____