

IMPORTANT NOTICE

AS COMMANDER, YOU ARE RESPONSIBLE FOR ADEQUATE BONDING OF YOUR QUARTERMASTER AND OTHER ACCOUNTABLE OFFICERS OF YOUR UNIT ACCORDING TO SECTION 703 OF THE NATIONAL BY-LAWS AND MANUAL OF PROCEDURE.

IF YOU WISH TO BE BONDED THROUGH THE DEPARTMENT HEADQUARTERS, YOU MAY COMPLETE THE ENCLOSED BOND APPLICATION. RETURN FORMS TO QUARTERMASTER, JOHN B GETZ, JR, 4002 FENTON AVENUE, HARRISBURG PA 17109.

IF YOUR UNIT IS BONDED LOCALLY THIS YEAR, PLEASE COMPLETE THE FORM BELOW, EVEN IF YOUR BOND IS GOOD FOR MORE THAN (1) ONE YEAR. WE MUST BE INFORMED SO WE CAN KEEP OUR RECORDS UP TO DATE. PLEASE SEND A COPY OF THE LOCAL BOND FOR DEPARTMENT'S FILES.

AS COMMANDER, YOU ARE RESPONSIBLE FOR NOTIFYING DEPARTMENT HEADQUARTERS, AS TO THE NATURE OF YOUR BONDING. FAILURE TO DO THIS CAN COST YOUR UNIT REPRESENTATION AT DISTRICT, COUNTY COUNCIL AND DEPARTMENT MEETINGS AND CONVENTIONS.

COMPLETE THE FOLLOWING ONLY IF BONDED LOCALLY

-----DETACH HERE-----

LOCAL BOND INFORMATION

DATE _____ DISTRICT NO. _____

TO: STATE QUARTERMASTER

AS COMMANDER OF VETERANS OF FOREIGN WARS POST NO. _____,
OR COUNTY COUNCIL _____, OR DISTRICT NO. _____,

I AM NOTIFYING DEPARTMENT HEADQUARTERS THAT THE ABOVE UNIT IS BONDED ADEQUATELY AS DESCRIBED BELOW. COPY OF BOND ENCLOSED.

NAME OF BONDING COMPANY: _____

AMOUNT BONDED: _____ DATE BOND BEGINS _____
EXPIRES _____

SIGNATURE: _____
COMMANDER

POST _____



Questionnaire for VFW Accountable Officers Crime Coverage

DEPARTMENT HEADQUARTERS
Veterans of Foreign Wars of the United States
TRAVELERS CASUALTY AND SURETY COMPANY OF AMERICA



Dear Comrade Commander:

August 1, 2026

One of the most important communications you will receive during the year concerns appropriate bonding of your Post Positions. Section 703 of the National By-Laws requires that each Accountable Officer shall be bonded with an Indemnity Company as surety. The By-Laws place the responsibility for adequate bonding upon the Commander of the post. Section 218 of the National Manual requires **THE BOOKS AND RECORDS OF THE ACCOUNTABLE OFFICER BE AUDITED AT LEAST QUARTERLY BY THE TRUSTEES.**

The Department Headquarters carries a Crime Policy for the bonding of Department and Post Accountable Officers. Any unit may decide whether it prefers to take out a policy with another surety company or have its funds protected by the Department Headquarters Crime Policy. However, prompt attention is required because if your Accountable Officers had previously been covered through the Department Program, **a new premium payment is required by September 1, 2026 or it will be considered delinquent.**

COVERAGES OF THE POLICY REQUIRE:

1. You agree to make/or cause to be made, at least annually, an audit of your books and accounts, including complete verification of all securities and bank balances pertaining to each "employee and/ or volunteer".

If the above is not complied with, the Insurance Company may refuse to honor claim of missing funds which cannot be proven by records. Monthly audits and reconciliation of bank statements may avoid this denial of claim.

2. The Insurance Company may not pay for loss resulting from any unauthorized advances made by an "employee" to any member for delinquent dues and assessments.

3. "Employee" means any duly elected position, or any appointed officer as listed in the policy schedule.

4. **IF THE POLICY IS NOT RENEWED, TERMINATED, OR CANCELLED AT EXPIRATION DATE OF 9-1-2026, THE POST HAS ONLY 90 DAYS TO SUBMIT A PROOF OF LOSS FOR PRIOR TERM. AFTER 90 DAYS PRIOR COVERAGE CEASES.**

5. **POST MUST SUBMIT A PROOF OF LOSS FORM WITHIN 120 DAYS FROM THE FIRST DATE OF DISCOVERY OF THE LOSS.**

THIS POLICY IS ONLY FOR THE YEAR SEPTEMBER 1, 2026 TO AUGUST 31, 2027

The funds of your Post are protected only for that year. Premium for the following year will be due September 1, 2027

RETURN THIS QUESTIONNAIRE COMPLETED IN FULL WITH YOUR PREMIUM CHECK PAYABLE TO YOUR DEPARTMENT HEADQUARTERS

STATE _____ POST# _____

I hereby apply for A1. Employee/ Volunteer Theft coverage for the year from September 1, 2026 through August 31, 2027 in the

COVERAGE AMOUNT of \$ _____ for the POSITION of _____

Post Annual Income: \$ _____

Has the post had any Crime Coverage losses (theft of money) over the past 3 years by an Accountable Officer? YES ☐ NO ☐
If yes, please contact your Department for a Loss Questionnaire. No Coverage can be extended until approved by insurance carrier

Number of Persons Bonded: 1

Number of Locations: 1

NOTE : Questionnaire is not valid unless all questions are answered. Coverage may be postponed if not completed in **FULL**.

Deadline for coverage is September 1, 2026 - After this date you will be delinquent and not in compliance with the VFW By- Laws.

Form 2 - Revised 2026

QM or Commander or Adjutant or Sr Vice Signature

Date

Phone Number

Street Address, City and Zip

VFW QUARTERMASTER BOND

<u>\$4.25 Per Thousand</u>		<u>\$3.25 Per Thousand</u>		<u>\$2.75 Per Thousand</u>		<u>\$2.50 Per Thousand</u>	
\$ 3,000	 \$ 12.75	\$26,000	 \$ 84.50	\$ 251,000	 \$ 690.25	\$ 501,000	 \$ 1,252.50
\$ 4,000	 \$ 17.00	\$27,000	 \$ 87.75	\$ 252,000	 \$ 693.00	\$ 502,000	 \$ 1,255.00
\$ 5,000	 \$ 21.25	\$28,000	 \$ 91.00	\$ 253,000	 \$ 695.75	\$ 503,000	 \$ 1,257.50
\$ 6,000	 \$ 25.50	\$29,000	 \$ 94.25	\$ 254,000	 \$ 698.50	\$ 504,000	 \$ 1,260.00
\$ 7,000	 \$ 29.75	\$30,000	 \$ 97.50	\$ 255,000	 \$ 701.25	\$ 505,000	 \$ 1,262.50
\$ 8,000	 \$ 34.00	\$40,000	 \$ 130.00	\$ 256,000	 \$ 704.00	\$ 506,000	 \$ 1,265.00
\$ 9,000	 \$ 38.25	\$50,000	 \$ 162.50	\$ 257,000	 \$ 706.75	\$ 507,000	 \$ 1,267.50
\$ 10,000	 \$ 42.50	\$60,000	 \$ 195.00	\$ 258,000	 \$ 709.50	\$ 508,000	 \$ 1,270.00
\$ 11,000	 \$ 46.75	\$70,000	 \$ 227.50	\$ 259,000	 \$ 712.25	\$ 509,000	 \$ 1,272.50
\$ 12,000	 \$ 51.00	\$80,000	 \$ 260.00	\$ 260,000	 \$ 715.00	\$ 510,000	 \$ 1,275.00
\$ 13,000	 \$ 55.25	\$90,000	 \$ 292.50	\$ 270,000	 \$ 742.50	\$ 520,000	 \$ 1,300.00
\$ 14,000	 \$ 59.50	\$100,000	 \$ 325.00	\$ 280,000	 \$ 770.00	\$ 530,000	 \$ 1,325.00
\$ 15,000	 \$ 63.75	\$110,000	 \$ 357.50	\$ 290,000	 \$ 797.50	\$ 540,000	 \$ 1,350.00
\$ 16,000	 \$ 68.00	\$120,000	 \$ 390.00	\$ 300,000	 \$ 825.00	\$ 550,000	 \$ 1,375.00
\$ 17,000	 \$ 72.25	\$130,000	 \$ 422.50	\$ 310,000	 \$ 852.50	\$ 560,000	 \$ 1,400.00
\$ 18,000	 \$ 76.50	\$140,000	 \$ 455.00	\$ 320,000	 \$ 880.00	\$ 570,000	 \$ 1,425.00
\$ 19,000	 \$ 80.75	\$150,000	 \$ 487.50	\$ 330,000	 \$ 907.50	\$ 580,000	 \$ 1,450.00
\$ 20,000	 \$ 85.00	\$160,000	 \$ 520.00	\$ 340,000	 \$ 935.00	\$ 590,000	 \$ 1,475.00
\$ 21,000	 \$ 89.25	\$170,000	 \$ 552.50	\$ 350,000	 \$ 962.50	\$ 600,000	 \$ 1,500.00
\$ 22,000	 \$ 93.50	\$180,000	 \$ 585.00	\$ 360,000	 \$ 990.00		
\$ 23,000	 \$ 97.75	\$190,000	 \$ 617.50	\$ 370,000	 \$ 1,017.50		
\$ 24,000	 \$ 102.00	\$200,000	 \$ 650.00	\$ 380,000	 \$ 1,045.00		
\$ 25,000	 \$ 106.25	\$210,000	 \$ 682.50	\$ 390,000	 \$ 1,072.50		
		\$220,000	 \$ 715.00	\$ 400,000	 \$ 1,100.00		
		\$230,000	 \$ 747.50	\$ 410,000	 \$ 1,127.50		
		\$240,000	 \$ 780.00	\$ 420,000	 \$ 1,155.00		
		\$250,000	 \$ 812.50	\$ 430,000	 \$ 1,182.50		
				\$ 440,000	 \$ 1,210.00		
				\$ 450,000	 \$ 1,237.50		
				\$ 460,000	 \$ 1,265.00		
				\$ 470,000	 \$ 1,292.50		
				\$ 480,000	 \$ 1,320.00		
				\$ 490,000	 \$ 1,347.50		
				\$ 500,000	 \$ 1,375.00		

(\$501,000 and UP)
\$2.50 per Thousand

(\$26,000 to \$250,000)
\$3.25 per Thousand

(\$3000 to \$25,000)
\$4.25 per Thousand

(\$251,000. To \$500,000.)
\$2.75 Per Thousand