

July 15, 2022

TO: POST QUARTERMASTER  
FROM: DEPARTMENT QUARTERMASTER ERVIN YODER  
SUBJECT: QUARTERMASTER SURETY BOND

Please find enclosed, the form #2 for this is for the renewal term of 9/1/2022 to 9/1/2023. The premium rate is \$4.25 per \$1,000.00 of coverage up to \$25,000.00. Amounts **over** \$25,000.00 will be charged at the rate of \$3.75 per \$1,000.00 of coverage. Also enclosed is a rate list for your convenience. The bonding company requires each post to carry a minimum of \$3,000.00 at \$12.75 unless the Post Trustees audit reports reflects liquid assets of \$2,000.00 or less, in which case, the bonding company will accept a minimum of \$2,000.00 at \$8.50.

Please complete all of the information on the bonding application form and return to this office with the premium at your earliest opportunity—**BUT NO LATER THEN November 30, 2022**. Any Consolidated Application received in **December** and mailed to the bonding company with a **postmark date by December 31, 2022**, will be effective **December 1, 2022**.

Any Consolidated Application received in January and mailed to the bonding company with a postmark date by **January 31, 2023**, will be effective **January 1, 2023**.

The same procedure will be done as above for **March, April and May**. We will not be able to accept any bonds after **May 31, 2023**.

Coverage of the policy requires that at least quarterly, audit of the books and accounts including complete verification of all securities and bank balances be made. If the above is not complied with, the Surety Company will refuse to honor claims of missing funds which cannot be proven by records. Completion of quarterly audits and reconciliation of monthly bank statements may avoid denial of a claim. ***Proof of loss resulting from dishonest acts on the part of the bonded officer is required to the completed and mailed to the bonding company within 120 days of the discovery of the loss.***

The By-laws, Section 703, states that each accountable officer of the organization shall be bonded. **All officers and committee chairmen handling post monies are required to be bonded. CLUB MANAGERS AND GAMBLING OPERATIONS MUST BE BONDED SEPARATELY ON DIFFERENT FORMS OBTAINED FROM THIS OFFICE. A QUARTERMASTER THAT IS HANDLING ANY GAMBLING, GAMES OF CHANCE, SLOT MACHINES, ETC, ARE NOT COVERED UNDER THE QUARTERMASTER BOND. THEY MUST BE COVERED UNDER THE CLUB MANAGER BOND.**

Thank you for your cooperation of the aforementioned regulations, if you have any questions, please feel free to call Department 614-224-1838, Option 2, Susan Hite.

# QUARTERMASTER BONDS-OHIO

## \$4.25 PER THOUSAND UP TO 25000.00

\$3,000.00 .....	\$12.75
\$4,000.00 .....	\$17.00
\$5,000.00 .....	\$21.25
\$6,000.00 .....	\$25.50
\$7,000.00 .....	\$29.75
\$8,000.00 .....	\$34.00
\$10,000.00 .....	\$42.50
\$11,000.00 .....	\$46.75
\$12,000.00 .....	\$51.00
\$13,000.00 .....	\$55.25
\$14,000.00 .....	\$59.50
\$15,000.00 .....	\$63.75
\$16,000.00 .....	\$68.00
\$17,000.00 .....	\$72.25
\$18,000.00 .....	\$76.50
\$19,000.00 .....	\$80.75
\$20,000.00 .....	\$85.00
\$21,000.00 .....	\$89.25
\$22,000.00 .....	\$93.50
\$24,000.00 .....	\$102.00
\$25,000.00 .....	\$106.25

## 3.75 PER THOUSAND 26000.00 AND OVER

\$26,000.00 .....	\$97.50
\$27,000.00 .....	\$101.25
\$28,000.00 .....	\$105.00
\$29,000.00 .....	\$108.75
\$30,000.00 .....	\$112.50
\$31,000.00 .....	\$116.25
\$32,000.00 .....	\$120.00
\$33,000.00 .....	\$123.75
\$34,000.00 .....	\$127.50
\$35,000.00 .....	\$131.25
\$36,000.00 .....	\$135.00
\$37,000.00 .....	\$138.75
\$38,000.00 .....	\$142.50
\$39,000.00 .....	\$146.25
\$40,000.00 .....	\$150.00
\$41,000.00 .....	\$153.75
\$42,000.00 .....	\$157.50
\$43,000.00 .....	\$161.25
\$44,000.00 .....	\$165.00
\$45,000.00 .....	\$168.75
\$46,000.00 .....	\$172.50
\$47,000.00 .....	\$176.25
\$48,000.00 .....	\$180.00
\$49,000.00 .....	\$183.75
\$50,000.00 .....	\$187.50
\$55,000.00 .....	\$206.25
\$60,000.00 .....	\$225.00
\$65,000.00 .....	\$243.75
\$70,000.00 .....	\$262.50
\$75,000.00 .....	\$281.25
\$80,000.00 .....	\$300.00
\$90,000.00 .....	\$337.50
\$100,000.00 .....	\$375.00
\$105,000.00 .....	\$393.75
\$110,000.00 .....	\$412.50
\$115,000.00 .....	\$431.25
\$120,000.00 .....	\$450.00
\$125,000.00 .....	\$468.75

**\*\*\*\*\*MAKE CHECKS PAYABLE TO:**

VFW DEPT. OF OHIO  
 35 E. CHESTNUT ST.  
 STE #506  
 COLUMBUS, OHIO 43215

**FOR: QM BONDS ONLY**

**MINIMUM BOND IS \$3000.00 FOR \$12.75**



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



Dear Comrade Commander:

Questionnaire for VFW Accountable Officers Crime Coverage

August 1, 2022

One of the most important communications you will receive during the year concerns the bond of your Unit Quartermaster. Section 703 of our National By-Laws requires that each accountable officer shall be bonded with an Indemnity Company as surety and the By-Laws places the responsibility for adequate bonding upon the Commander of the post. In any business it is customary to bond any officer handling funds. **THE BOOKS AND RECORDS OF THE ACCOUNTABLE OFFICER MUST BE AUDITED AT LEAST QUARTERLY BY THE TRUSTEES. THIS IS TO COMPLY WITH SECTION 218 OF THE NATIONAL MANUAL OF PROCEDURES.**

The Department Headquarters carries a Crime Policy for the bonding of Department and Post Accountable Officers. This Policy runs for a year – from September 1 to August 31 – premium payments are made on that basis. Coverage for all accountable officers expires on August 31 and premium for the New Year is due on September 1.

Any unit may decide whether it prefers to take out a Policy with some other surety company or have its funds protected by the Department Headquarters Crime Policy. But the matter should be given prompt attention because if your Accountable Officer had previously been covered through the National Headquarters, **a new premium payment is required by September 1, 2022 and delinquent after this date.**

**IF THE POLICY IS NOT RENEWED, TERMINATED, OR CANCELLED AT EXPIRATION DATE OF 9-1-2022, THE POST HAS ONLY 90 DAYS TO SUBMIT A PROOF OF LOSS FOR PRIOR TERM. AFTER 90 DAYS PRIOR COVERAGE CEASES.**

**COVERAGES OF THE POLICY REQUIRE THAT:**

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 will 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 will 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. POST MUST SUBMIT A PROOF OF LOSS FORM WITHIN 120 DAYS FROM THE FIRST DATE OF DISCOVERY OF THE LOSS. Proof of loss resulting from dishonest acts on the part of the bonded officer is required in settlement of claims.**

**THIS POLICY IS ONLY FOR THE YEAR SEPTEMBER 1, 2022 TO AUGUST 31, 2023.**

**The funds of your Post are protected only for that year. Premium for the following year will be due September 1, 2023.**

RETURN THIS QUESTIONNAIRE WITH YOUR PREMIUM CHECK PAYABLE TO YOUR DEPARTMENT HEADQUARTERS

\_\_\_\_\_  
Post # and State

I hereby apply for A1. Employee/Volunteer Theft coverage in the amount of \$ \_\_\_\_\_ for the position

of \_\_\_\_\_. For the year from September 1, 2022 through August 31, 2023.

Number of Persons Bonded:   1        Number of Locations:   1        Post Annual Income: \$ \_\_\_\_\_      Dated: \_\_\_\_\_.

**Has the post had any Crime Coverage losses over the past three years?** \_\_\_\_\_.

If yes, provide a description with date and amount of loss on a separate sheet.

**DEADLINE FOR COVERAGE IS SEPTEMBER 1, 2022 – AFTER THIS DATE YOU WILL BE DELIQUENT AND NOT IN COMPLIANCE WITH THE VFW BY-LAWS.**

\_\_\_\_\_  
QM or Commander or Adjutant or Sr.Vice Signature

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Street Address and City