

**VFW Headquarters  
Department of North Carolina  
917 New Bern Avenue  
Raleigh, NC 27601**

TO: All Districts and Posts

Date: July 12, 2022

Subject: Instructions for filling out Bond Forms

1. **Instructions for each VFW Accountable Officer that handles funds.**
2. **(Always the Quartermaster, but may include the Commander or Assistant Quartermaster).**
  - a. Must use Form No. 2 marked on the lower left side of page
  - b. Use the Quartermaster pricing sheet to find the correct bond price.
  - c. Commander, Adjutant or Senior Vice Commander must sign the form
  - d. The completed form must be sent to Department headquarters with a check or credit card information.
3. **Instructions for each Employee(s)/Volunteer(s) that handle funds.**
  - a. Must use the T-I-A Tallman Insurance Employee form.
  - b. Use the Employee pricing sheet to find the correct bond price.
  - c. The form is filled out and signed by the employee.
  - d. The completed form must be sent to Department headquarters with a check or credit card information.
4. **The Cover Sheet is used to add all VFW Accountable Officers and Employees bond costs.**
  - a. Total all VFW Accountable Officers and Employees bond amount.
  - b. Assemble your bond package, the VFW Accountable Officer form(s) and Employee form(s) with a check or credit card information for the total of all bonds.
  - c. Mail or email (email only with credit card) your bond package to Department Headquarters.
  - d. All bonds must be submitted **by August 31, 2021**
5. **Please call Nichole Campbell with any questions at 828-458-8380.**

**Mail To:** VFW, Dept. of N.C.  
PO Box 25337  
Raleigh, N.C. 27611

**Email To:** deptsec@vfwnc.com

QUARTERMASTER BOND PRICING FOR FY 2022/2023				BARTENDERS, CANTEEN, BINGO, GAMING MGR'S FY 2022/2023			
Bond Amount	Cost	Bond Amount	Cost	Bond Amount	Cost	Bond Amount	Cost
\$2000 or less	\$ 15.00	40,000	\$ 120.00	2,000	\$ 18.00	31,000	\$ 192.00
3,000	\$ 19.00	50,000	\$ 135.00	3,000	\$ 24.00	32,000	\$ 198.00
4,000	\$ 23.00	60,000	\$ 160.00	4,000	\$ 30.00	33,000	\$ 204.00
5,000	\$ 27.00	70,000	\$ 182.00	5,000	\$ 36.00	34,000	\$ 210.00
6,000	\$ 30.00	80,000	\$ 210.00	6,000	\$ 42.00	35,000	\$ 216.00
7,000	\$ 34.00	90,000	\$ 235.00	7,000	\$ 48.00	36,000	\$ 222.00
8,000	\$ 38.00	100,000	\$ 260.00	8,000	\$ 54.00	37,000	\$ 228.00
9,000	\$ 41.00	110,000	\$ 285.00	9,000	\$ 60.00	38,000	\$ 234.00
10,000	\$ 45.00	120,000	\$ 310.00	10,000	\$ 66.00	39,000	\$ 240.00
11,000	\$ 48.00	130,000	\$ 335.00	11,000	\$ 72.00	40,000	\$ 246.00
12,000	\$ 51.00	140,000	\$ 360.00	12,000	\$ 78.00	41,000	\$ 252.00
13,000	\$ 54.00	150,000	\$ 385.00	13,000	\$ 84.00	42,000	\$ 258.00
14,000	\$ 57.00	160,000	\$ 410.00	14,000	\$ 90.00	43,000	\$ 264.00
15,000	\$ 60.00	170,000	\$ 435.00	15,000	\$ 96.00	44,000	\$ 270.00
16,000	\$ 63.00	180,000	\$ 460.00	16,000	\$ 102.00	45,000	\$ 276.00
17,000	\$ 66.00	190,000	\$ 485.00	17,000	\$ 108.00	46,000	\$ 282.00
18,000	\$ 69.00	200,000	\$ 510.00	18,000	\$ 114.00	47,000	\$ 288.00
19,000	\$ 75.00	210,000	\$ 535.00	19,000	\$ 120.00	48,000	\$ 294.00
20,000	\$ 78.00	220,000	\$ 560.00	20,000	\$ 126.00	49,000	\$ 300.00
21,000	\$ 83.00	230,000	\$ 585.00	21,000	\$ 132.00	50,000	\$ 306.00
22,000	\$ 88.00	240,000	\$ 610.00	22,000	\$ 138.00	51,000	\$ 312.00
23,000	\$ 91.00	250,000	\$ 635.00	23,000	\$ 144.00	52,000	\$ 318.00
24,000	\$ 94.00			24,000	\$ 150.00	53,000	\$ 324.00
25,000	\$ 98.00			25,000	\$ 156.00	54,000	\$ 330.00
26,000	\$ 101.00			26,000	\$ 162.00	55,000	\$ 336.00
27,000	\$ 104.00			27,000	\$ 168.00	56,000	\$ 342.00
28,000	\$ 107.00			28,000	\$ 174.00	57,000	\$ 348.00
29,000	\$ 110.00			29,000	\$ 180.00	58,000	\$ 354.00
30,000	\$ 113.00			30,000	\$ 186.00	59,000	\$ 360.00

**VFW Headquarters  
Department of North Carolina  
917 New Bern Avenue  
Raleigh, NC 27601**

**BONDS AND CANTEEN FEES DUE BY AUGUST 31, 20**

**INSTRUCTIONS:**

All Districts and Posts Must use the New Bond Application for 22/23 year.

Do not use last year's bond applications they cannot be accepted.

If paying by check make checks payable to VFW, Dept. of NC and mail all bond applications and checks to:

**VFW, DEPT. OF NC  
PO Box 25337  
Raleigh, NC 27611**

**If paying by credit card, please email card information using this form and applications to:**

Email: [deptsec@vfwnc.com](mailto:deptsec@vfwnc.com)

**Call Nichole Campbell, Tuesday to Friday, with any questions at 828-458-8380.**

Person to be bonded	Total Bond Amount	Bond Cost	Attachment
Commander			QM Form2
Quartermaster			QM form 2
Assistant Quartermaster			QM Form 2
Bingo Manager			TIA form
Canteen Manager			TIA Form
Bartender 1			TIA Form
Bartender 2			TIA Form
Bartender 3			TIA Form
Bartender 4			TIA Form
<b>Totals</b>			TIA Form

Credit Card Number:	
Expiration Date:	
CDC # 3 digits on back of card	



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.

**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".
2. 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.
3. 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.
4. "Employee" means any duly elected position, or any appointed officer as listed in the policy schedule.
5. **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.

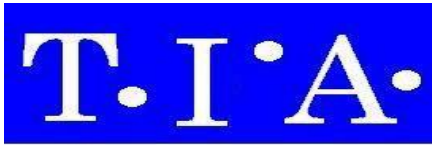
**DEADLINE FOR COVERAGE IS SEPTEMBER 1, 2022 – AFTER THIS**

**DATE YOU WILL BE DELINQUENT AND NOT IN COMPLIANCE**

**WITH THE VFW BY-LAWS.**

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

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



**Tallman Insurance**

A.1 Employee/Volunteer Theft (Dishonesty)

**VFW QUESTIONNAIRE FOR CLUB EMPLOYEES & BINGO  
PERSONS TO, BE COMPLETED BY COVERED  
INDIVIDUAL**

TRAVELERS CASUALTY AND SURETY COMPANY OF AMERICA

**Bond Term: October 1, 2022 to September 30, 2023**

1. a) Name of Post \_\_\_\_\_ Post # \_\_\_\_\_

b) Post Address \_\_\_\_\_

2. a) Name of Person to be Covered \_\_\_\_\_

3. Position to be Covered \_\_\_\_\_

4. Coverage Amount Requested \$ \_\_\_\_\_

5. Number of Persons Covered 1

6. Number of Locations 1

7. Post - Annual Income \_\_\_\_\_

8. Has the post had any losses over the past three years? \_\_\_\_\_ If yes,  
provide a description along with the date and amount of loss.

9. a) Have you ever been convicted of any dishonest or fraudulent employment related act, "for example" burglary,  
robbery, theft or embezzlement of funds of any kind. \_\_\_\_\_

b) If yes, explain \_\_\_\_\_

**IF BOND IS NOT RENEWED, TERMINATED, OR CANCELLED AT EXPIRATION DATE OF 10-1-2022, THE POST HAS ONLY 90 DAYS TO SUBMIT A PROOF OF LOSS FOR PRIOR TERM, AFTER 90 DAYS, PRIOR COVERAGE CEASES.**

**If this is a replacement for a current position, please advise what person you are replacing**

\_\_\_\_\_.

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Signed this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ (Day)  
(Month) (Year)

Signature: Person to be Covered

Form # 4B