

FIDELITY COVERAGE APPLICATION COVERAGE LIMITS OVER \$50,000

Complete Name & Address of Association (Please Print or Type)

	UNDERWR	ITING QUESTIONS – DISH	ONESTY	
1.	Are annual audits performed by an In If NO, is an annual audit performed deposits or withdrawals?	dependent CPA? I by an audit committee comprised Yes No	Yes	nake
2.	withdrawals?	Yes No	orized to sign checks or make deposits or	
3.	Will countersignature of all checks be required?			
	If YES, at what limit is countersignature required?			
	Names of authorized check signers _			
	If NO, describe account controls on a			
idelity	Losses (past 6 years) Provide: Dates,	Amounts and Description of Losses	- Check if None	
ate	Amount	Description of Loss		
- 1				
Please	e list by position, officers, committee ch		• •	
Please	e list by position, officers, committee ch	nairperson, or employee positions to Volunteer Position	be covered under this policy: Paid Position	
Please	e list by position, officers, committee ch		• •	
Please	e list by position, officers, committee ch		• •	
Please	e list by position, officers, committee ch		• •	
Please	e list by position, officers, committee ch		• •	
best c	*If more than one person occupies a of the applicant's knowledge and belief, or employee either before or after beco	Volunteer Position Volunteer Position	Paid Position Paid Position property of persons per position dishonest act committed by any officer, committed by any of	nmitte
best o	*If more than one person occupies a of the applicant's knowledge and belief, or employee either before or after beco	Volunteer Position Volunteer Position D position, please include the number of applicant has no information of any oming an officer, committee chairpers	Paid Position Paid Position property of persons per position dishonest act committed by any officer, common or employee of the applicant.	nmitte

Insurance Fraud Warning:

An application or an addendum to an application shall clearly contain a fraud warning substantially as follows: Any person who, with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud. This is suggested language. Any language that is substantially similar is acceptable if it does not contain specific fines or penalties.