



SUPREME AUXILIARY
TO THE
MILITARY ORDER OF THE COOTIE
OF THE U.S.A.



TWO -YEAR QUESTIONNAIRE FOR OFFICERS CRIME COVERAGE

The Auxiliary to the Military Order of the Cootie will be insuring all levels of Auxiliaries for the Two-Year period of September 1, 2023, to August 31, 2025, through the Tallman Insurance Agency. Refer to the Auxiliary to the Military Order of the Cootie Bylaws Section 308C, Section 408B, Section 508B and Section 511E. The President shall see that the Treasurer is covered.

The two-year crime policy provides protection in accordance with the By-Laws for **defalcation or embezzlement only. It does not provide coverage of monies stolen by burglary or robbery, lost monies or monies that may have been destroyed by fire or acts of nature.** The two-year coverage protects the position during the period and is automatically transferable to the newly elected treasurer. **AUXILIARY MUST SUBMIT A PROOF OF LOSS FORM WITHIN 120 DAYS FROM THE FIRST DATE OF DISCOVERY OF THE LOSS.**

All coverage issued during the present two-year coverage will terminate August 31, 2023. The new two-year coverage period is from September 1, 2023, through August 31, 2025. **For coverage to begin on September 1, 2023, we must receive the questionnaire and premium before November 30, 2023. After that date we will accept the premium for coverage but it will be effective the date we receive the questionnaire and premium. If coverage is not renewed, terminated or cancelled at expiration Date of 9-1-2023, the auxiliary has only 90 days to submit a proof of loss for the prior term, after 90 days prior coverage ceases.**

There is a \$1,000.00 minimum and NO maximum limitation for coverage. This coverage may cover all MOC Auxiliaries, MOC Grand District Auxiliaries, MOC Grand Auxiliaries, MOC Supreme District Auxiliaries, and the Supreme Auxiliary to the Military Order of the Cootie. Complete separate questionnaire for each position you wish to be covered.

You are **REQUIRED** to send a copy of your coverage either electronically to sanmckin13440@gmail.com or mail

to: **MOCA Supreme Treasurer, 13440 126th Avenue, Largo, FL 33774-2430**

PLEASE ANSWER ALL QUESTIONS ON THE QUESTIONNAIRE. INCOMPLETE QUESTIONNAIRE WILL NOT BE PROCESSED AND WILL BE RETURNED.

**MAIL QUESTIONNAIRE AND PREMIUM TO: TALLMAN INSURANCE AGENCY,
406 WEST 34TH STREET – SUITE 806, KANSAS CITY, MO 64111 (866) 753-2345**

I hereby apply for A.1 Volunteer Theft Coverage in the amount of \$_____ For the position of _____ for the term September 1, 2023 through August 31, 2025.

Auxiliary Name: _____ Aux. No. _____

Location: _____

CITY and STATE

Name of President: _____

Address: _____

City/State: _____ Zip Code: _____

Contact Telephone Number: _____ Date _____

Number of Persons Covered: 1 # of Locations: 1 - Auxiliary Annual Income: _____

Or Bank Balance

Has the Auxiliary had any bond losses over the past three years? Yes ___ NO ___