



Application for Pension Trust/ERISA Bond

PENSION TRUST/ERISA BONDS

A Bond Designed to Protect Your Valuable Pension Programs

What are Pension Trust/ERISA Bonds?

Many companies today offer pension plans and/or profit sharing programs as part of a benefit package for their employees. These programs are managed by appointed individuals associated with that company's plan, known as fiduciaries. To protect the plan and the money in these funds from fraud and dishonesty, the appointed fiduciaries need to be bonded. The pension trust bond from Surety Bonding Company of America* does just that.

Why is This Bond Needed?

The Pension Reform Act of 1974 (also known as ERISA - Employee Retirement and Income Security Act) states that the funds of pension or profit sharing plans must be protected under a fidelity bond for 10% of the amount of funds handled. As an example, a person who manages a profit sharing program that involves \$250,000 in funds must post a bond for \$25,000. The Commercial Blanket fidelity bond available from Surety Bonding Company of America* satisfies this requirement at a reasonable cost.

Apply For Coverage Now

Just complete this application and give it to your Surety Bonding Company of America agent today. Your application will be reviewed the day it is received.

*Bonds are underwritten by Surety Bonding Company of America with Western Surety Company as Co-Surety.

Commercial Blanket Fidelity Bond Rates for Pension Plan Bonds Under the Pension Reform Act of 1974 - ERISA

CALIFORNIA

Bond Amount	3-Year Prepaid	Bond Amount	3-Year Prepaid
\$ 10,000	\$100	\$ 90,000	\$239
\$ 20,000	\$117	\$ 95,000	\$245
\$ 25,000	\$129	\$ 100,000	\$250
\$ 30,000	\$140	\$ 125,000	\$263
\$ 35,000	\$150	\$ 150,000	\$277
\$ 40,000	\$160	\$ 175,000	\$290
\$ 45,000	\$170	\$ 200,000	\$303
\$ 50,000	\$179	\$ 225,000	\$313
\$ 55,000	\$188	\$ 250,000	\$327
\$ 60,000	\$197	\$ 275,000	\$347
\$ 65,000	\$206	\$ 300,000	\$367
\$ 70,000	\$214	\$ 350,000	\$387
\$ 75,000	\$221	\$ 400,000	\$407
\$ 80,000	\$228	\$ 450,000	\$427
\$ 85,000	\$234	\$ 500,000	\$450

Plan Name: _____
 Business Address: _____
 Type of Business: _____
 Effective Date: _____
 Number of Plan Trustees/Fiduciaries: _____
 Are regular outside audits conducted on the plan?
 Yes _____ No _____
 How often? _____
 By whom? _____
 What is the total fund balance? _____
 Amount of bond requested: _____
 Is this bond required because more than 5% of plan assets are "non-qualifying"? Yes _____ No _____
 Any dishonesty losses related to the plan in the past 5 years? Yes _____ No _____
 Previous surety? Yes _____ No _____
 Name and reason for change: _____

The undersigned agrees the above representations are an accurate statement of current information and procedures. This application, with Bond Declarations and Provisions, and endorsements issued to form a part thereof, constitute the entire contract.

(Signature of Officer or Employer)

(Official Title)

Your CNA Surety Agent

Agent's Name	Spectrum Risk Mgmt. + Ins.
Address	18010 Sky Park Circle, #140
	Street & Number
City	Irving
State	CA
Zip	92614
Agent's Code	0421949