**Organization Name:**

**BAckground**

Subrecipients (unless they are an Institution of Higher Education or State/Local Government Agency) are required to obtain a Fidelity Bond or Crime Policy in compliance with OneStar’s Terms and Conditions:

**IX. FIDELITY BOND OR CRIME POLICY**

1. The subrecipient, unless it is an Institution of Higher Education or State/ Local Government Agency, shall obtain a Fidelity Bond or Crime Policy equal to or greater than the grant award amount. If the subrecipient’s current coverage is lower than the grant amount, the subrecipient shall amend the coverage to reflect the grant amount. In addition, OneStar Foundation shall be named as a third party loss payee.
	1. The subrecipient receiving the Grant Award is named as a third party loss payee (but does not necessary need to be the sole loss payee). This insurance shall cover the dishonest acts of all employees, volunteers, officers and directors.
	2. The subrecipient may obtain the necessary Bond through their general liability carrier, a major casualty insurance carrier, or a bonds specialty company.
2. The subrecipient shall keep the Fidelity Bond or Crime Policy current from the start date of the budget period to six months after the date of final reimbursement.

If the subrecipient Bond or Policy does not meet the criteria above, the subrecipient may submit a waiver request for OneStar’s consideration by submitting a written statement that is determined to be satisfactory to the Commission from an independent certified public accountant that certifies the reduced bond amount as being appropriate and sufficient bond to provide coverage for the total amount of funds administered by Subrecipient and also appropriate to the internal controls in place by subrecipient.

**Instructions**

After reviewing your coverage and policy and determining that it does not meet the criteria, please follow the requirement in IX.C. Please include the certification from an independent certified public account (IX, section C) with this completed form and submit both documents to your OneStar Grants Officer.

**FIDELITY BOND COVERAGE**

If your organization’s coverage does not meet the criteria listed in Section IX of the One Star Terms and Conditions, you may submit a waiver request for OneStar’s consideration. In submitting your waiver request, please indicate exactly which item(s) your policy is not able to comply with.

Please describe your reason for requesting a waiver.

**CERTIFICATION**

By completing this form on behalf of the subrecipient, I certify that I have been duly authorized by the subrecipient to complete and certify this report.

By signing this report, I certify that it is true, complete, and accurate to the best of my knowledge. I am aware that any false, fictitious, or fraudulent information may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 18, Section 1001).

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| Type or Print Name above |  | Title |
|  |  |  |
| Signature |  | Date |