

**DECLARATIONS** POLICY NO./05748243

## **Travelers Casualty and Surety Company of America** Hartford, Connecticut

	(A Stock Insurance Company, herein called the Company)
ITEM 1	NAMED INSURED:
	ACCOUNTING DEPARTMENT.COM, LLC
	D/B/A:
	Principal Address: 3312 Atlantic Circle NAPLES, FL 34119
ITEM 2	POLICY PERIOD: Inception Date: December 8, 2022 Expiration Date: December 8, 2025 12:01 A.M. standard time both dates at the Principal Address stated in ITEM 1.
ITEM 3	ALL NOTICES OF CLAIM OR LOSS MUST BE SENT TO THE COMPANY BY EMAIL, FACSIMILE, OR MAIL AS SET FORTH BELOW:  Email: BSIclaims@travelers.com Fax: 1-888-460-6622
	Mail: Travelers Bond & Specialty Insurance Claim P.O. Box 2989 Hartford, CT 06104-2989
·	Overnight Mail: Travelers Bond & Specialty Insurance Claim One Tower Square, S202A Hartford, CT 06183
	For questions related to claim reporting or handling, please call 1-800-842-8496.
ITEM 4	COVERAGE INCLUDED AS OF THE INCEPTION DATE IN ITEM 2:  Crime  2

ITEM 5
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	CRIME	
Insuring Agreement	Single Loss Limit of Insurance	Single Loss Retention
A. Fidelity		
Employee Theft	\$100,000	\$2,500
2. ERISA Fidelity	Not Covered	
3. Employee Theft of Client Property	\$100,000	\$2,500
B. Forgery or Alteration	Not Covered	
C. On Premises	Not Covered	
D. In Transit	Not Covered	
E. Money Orders and Counterfeit Money	Not Covered	
F. Computer Crime		
1. Computer Fraud	\$100,000	\$2,500
Computer Program and Electronic     Data Restoration Expense	\$100,000	\$2,500
G. Funds Transfer Fraud	\$100,000	\$2,500
Personal Accounts Protection     Personal Accounts Forgery or     Alteration	Not Covered	
Identity Fraud Expense     Reimbursement	Not Covered	
I. Claim Expense	\$5,000	\$0

If "Not Covered" is inserted above opposite any specified Insuring Agreement, or if no amount is in the Limit of Insurance, such Insuring Agreement and any other reference thereto is deemed to b from this Crime Policy.						
Policy Aggregate Limit of Ins	urance: Applicable	Not Applicable     ■ Control of the contro				
Policy Period for Insuring Agre If a Policy Aggregate Limit of I Aggregate Limit of Insurance as	eements A through H, inclusive Insurance is not included, the s set forth in Section V. CON	e, is: Not Applicable In this Crime Policy is not subject to a Policy IDITIONS B. PROVISIONS AFFECTING LOSS				
Cancellation of Prior Insurance: By acceptance of this Crime Policy, the Insured gives the Company notice canceling prior policies or bonds issued by the Company that are designated by policy or bond numbers Not Applicable, such cancellation to be effective at the time this Crime Policy becomes effective.						
	-	its territories and possessions, Canada, or any				
Not Applicable						
PREMIUM FOR THE POLICY I	PERIOD:					
\$15,912.00	Policy Premium					
\$5,304.00	Annual Installment Premiu					
AFE-19038-1119; ACF-7006-0 CRI-19101-1117; CRI-19115-0	511; CRI-4031-0109; CRI-300 519; CRI-19085-0919; CRI-19	01-0109; CRI-19060-0713; CRI-19072-0315;				
	the Limit of Insurance, such Infrom this Crime Policy.  Policy Aggregate Limit of Insurance Aggregate Limit of Insurance Aggregate Limit of Insurance at ADJUSTMENT AND SETTLEM.  Cancellation of Prior Insurance and ADJUSTMENT AND SETTLEM.  Cancellation of Prior Insurance and ADJUSTMENT AND SETTLEM.  Cancellation of Prior Insurance and ADJUSTMENT AND SETTLEM.  INSURED'S PREMISES COVER.  All Premises of the Insured in the other country throughout the work.  Not Applicable  PREMIUM FOR THE POLICY \$15,912.00  \$5,304.00  FORMS AND ENDORSEMENT AFE-19038-1119; ACF-7006-0 CRI-19101-1117; CRI-19115-0	the Limit of Insurance, such Insuring Agreement and any of from this Crime Policy.  Policy Aggregate Limit of Insurance: Applicable  If a Policy Aggregate Limit of Insurance is applicable, then the Policy Period for Insuring Agreements A through H, inclusive If a Policy Aggregate Limit of Insurance is not included, the Aggregate Limit of Insurance as set forth in Section V. CON ADJUSTMENT AND SETTLEMENT 1. Limit of Insurance as Cancellation of Prior Insurance:  By acceptance of this Crime Policy, the Insured gives the bonds issued by the Company that are designated by policy such cancellation to be effective at the time this Crime Policy.  INSURED'S PREMISES COVERED:  All Premises of the Insured in the United States of America, other country throughout the world, except:  Not Applicable  PREMIUM FOR THE POLICY PERIOD:  \$15,912.00  Policy Premium				

THE DECLARATIONS, THE	HE APPLICATION, THI	E CRIME TERMS	AND CONDITIONS,	<b>ANY PURCHAS</b>	ED INSURING
AGREEMENTS, AND AN	IY ENDORSEMENTS	ATTACHED THEI	RETO, CONSTITUT	E THE ENTIRE	<b>AGREEMENT</b>
<b>BETWEEN THE COMPAN</b>	IY AND THE NAMED I	NSURED.			

Countersigned	Ву	

IN WITNESS WHEREOF, the Company has caused this policy to be signed by its authorized officers.

President

JHOP. KK

**Corporate Secretary** 

Wendy C. Shy