

**Snyder Volunteer Firefighter's Benevolent Association  
Policies  
Adopted March 2, 2026**

**Membership Benefits**

After the successful completion of the Snyder Fire Department probationary period, a Benevolent Association member may be eligible to apply for Association benefits. Benefit eligibility ends with the cessation of membership.

**Life Insurance Coverage**

The Benevolent Association may purchase group life insurance coverage for an amount determined by the Board of Trustees. The Association cannot maintain a fund to provide any life insurance benefits.

The member is responsible to complete the insurance application listing his/her beneficiary and to keep the information up to date by notifying the Association's Executive Secretary or by updating the insurance provider's portal (if there is one) of changes as soon as possible after they occur.

**Additional Funeral Expenses**

The Association may pay an additional funeral expense upon the presentation of receipts of expenses and the proof of additional needs. This benefit shall be acted upon by the Board of Trustees as soon as possible after such information is provided to the Executive Secretary.

**Out of Pocket Medical Expenses**

Members may be entitled to reimbursement for out-of-pocket medical expenses. The reimbursement applies for members only and not family members.

To file a claim, members must fill out the *Request for Reimbursement Voucher* form and submit it to the Board of Trustees for review. Please note the Benevolent Association can only assist members with out of pocket expenses associated with personal prescription medications (not over the counter) and other health care related expenses. All insurance coverage must be clearly indicated and a copy of all the insurance coverage paid should be also be provided. If there is no insurance coverage, that is to be noted on the voucher form. Claims must be

submitted in a timely manner, not to exceed 90 days from the invoice or statement date; however, claims dated within the last 90 days of the year will only be accepted up until the following year's February trustees meeting.

The Board of Trustees will establish the maximum reimbursement threshold each year. It will be based on the annual receipt of 2% funds and the association's treasury.

Benefits are not guaranteed and no person should expect a reimbursement.

### **Hospitalization Coverage**

Members in good standing may be entitled to receive hospital and/or nursing assistance payments in accordance with the following qualifications and limitations:

A. Application for Benefits:

Presentation to the Board of Trustees of a properly executed application form and duplicate bill for hospital and/or nursing home assistance or proof of confinement from said hospital and/or nursing home.

B. Payment Schedule:

The Board of trustees shall determine the need and reimbursement threshold for each claim.

C. Payment of Benefits:

Payment to be made as soon as possible after receipt of application and duplicate bill or proof of confinement from the hospital and/or nursing home.

D. Maximum 12 month benefit       \$3,000.00.

E. Maximum lifetime benefit   \$6,000.00.

F. No benefit shall be paid unless there is a balance of ten thousand (\$10,000.00) dollars in the Treasury. Any claim filed during this period shall be paid in order of their receipt

G. Under no circumstances will the Benevolent Association be liable for any late fees, charges, or other penalties from the inability or failure to submit a reimbursement by any date

### **Request for Additional Benefit Assistance**

Association members can request additional financial help beyond what is outlined by the board of trustees, bylaws, and policies.

Requests must be made in writing and will be reviewed by the Board of Trustees Additional Benefits Committee.

### **Additional Benefits Committee**

#### **1. Committee Appointment:**

- At the start of each calendar year (or when an opening occurs), the president will appoint up to two trustees to serve on the "Additional Benefits Committee"

#### **2. Committee Review Process:**

- After reviewing the request, the applicant, along with their spouse or significant other, will meet with the committee or full Benevolent Board of Trustees.
- The applicant must provide documentation on the following:
  - All sources of income for the applicant and their spouse/significant other.
  - All bank statements for both.
  - Additional income sources for the spouse/significant other (e.g., social security, pensions, stocks/portfolios).
  - Any life insurance policy/policies
  - Prior year Tax Returns (Federal/State)
  - Any other undisclosed income sources.

#### **4. Board of Trustees' Role:**

- After the committee, or full board, meets with the applicant, the Board of Trustees will convene to make a final decision, considering the committee's recommendation.

- The Board of Trustees should evaluate the hardship by asking, “If the request is denied, how will it affect the applicant’s quality of life?” while also ensuring the association’s financial stability.

**5. Confidentiality:**

- All findings and discussions related to the applicant’s financial review will be kept confidential by the Board of Trustees.