

F. Equipment, Supplies or Materials Losses, Used or to be Replaced

Fire Name(s) _

2024 and 2025

Oregon Cattlemen's Fire Season Wildfire Assistance Application Application Submittal Deadline to OCA Office by March

Application Submittal Deadline to OCA Office by March 31, 2026

_ (attach documentation and describe on back)

Contact Information: Applicant Name/Owner:			OCA Member Yes No		
Contact Name:			Title (Agent, Employee, Owner) Date:		
Address:					
City:	State:	County:		Zip:	
Phone:		E-Mail:			
2024 and 2025 Fire Season Wildfire Assista	nce Application I	nstruction	ns:		
 December 1, 2026. Mail to: Oregon Cattlemen's Association, 1320 Capitol St. NE, Suite 150, Salem, OR 97301; fax to: 503-361-8947; or email to: oca@orcattle.com. Qualifying Entities or individuals: OCA members and Oregon cattle producers incurring losses from 2024 and 2025 Wildfires. Funds were received by OCA as private donations for 2024 and 2025 Wildfire Assistance (no public funds). Assistance applications (with supporting documentation) will be considered for reimbursement of expenses or losses incurred by individuals or entities as a direct result of 2024 and 2025 wildfires in Oregon counties. Assistance applications will be considered for incurred expenses or losses suffered from: A) Emergency Feed, Transport or Pasturing; B) Fencing Loss; C) Structural Losses; D) Re-seeding Cost; G) Other losses or expenses. The format for reviewing received assistance applications, reviewing applicant's supporting documentation, and issuing disbursements to applicants will be determined by OCA. The wildfire fund may not be sufficient to meet all requests and may be prorated between applicants at the committee's discretion. If you have any questions please contact the Oregon Cattlemen's Association office at 503-361-8941. Assistance Claim:					
* On the back of this form please provide a brief of the back of this form please provide a brief of the back of this form please provide a brief of the back of this form please provide a brief of the back of this form please provide a brief of the back of this form please provide a brief of the back of this form please provide a brief of the back of this form please provide a brief of the back of this form please provide a brief of the back of this form please provide a brief of the back of this form please provide a brief of the back of this form please provide a brief of the back of t		<u> </u>		porting receipts)	
	tu Livestock.		(4444011 5-2	porting receipts/	
B. Permanent or Temporary Fencing: 1. Supplies and Materials, Labor or contract 2. Other Costs - describe below:	ed services :	\$ \$		eipts/estimates) pporting documents)	
Please indicate length or number of miles of fencing to replace/repair					
C. Structural Losses (structures, water improvements, o	corrals, etc.) \$		(attach receipts/estir	nates and describe on back)	
D. Seeding Cost for acres burned:	\$		(attach receipts/etim	nates)	
E. Other Losses, Costs or Expenses Incurred:	\$		(attach receipts/estin	nates and describe on back)	
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Voice of the Cattle Industry Since 1913

Please provide a brief description	of losses, assistance funds requested:
The undersigned certifies that:	
Assistance funds requested on this form h	nave or will be spent according to the terms outlined within the agreement. n reimbursed or are not expected to be reimbursed by another program or source.
Assistance funds requested have not beer	reimbursed or are not expected to be reimbursed by another program or source.
To the best of my knowledge the information	tion provided within this Assistance Claim is true and accurate. Cattlemen's Association may request additional information or documentation.
 I understand and agree that the Oregon C 	attlemen's Association may request additional information or documentation.
 I am authorized by the Assistance award r 	recipient to execute this document and legally bind the recipient by this signed execution.
Signature:	Date:
Printed Name:	Title:
Any additional needs or comments:	
For OCA office use only:	
	Date of Application Received:
Date of Application Review:	
Project Location:	
Payment Amount:	Payment Date: