OREGON DEPARTMENT OF FORESTRY
INTERAGENCY FIREFIGHTING CREW AGREEMENT
AGREEMENT AWARD SUMMARY - CREWS

1. AGREEMENT NUMBER: IFCA07142

BLM NUMBER: HAE076142

AGREEMENT NO. MUST APPEAR ON ALL PAPERS RELATING TO THIS AGREEMENT

2. EFFECTIVE DATES:
a. Beginning 2008 Agreement Period
b. Ending September 30, 2009

3. BUSINESS INFORMATION:

BIRRUETA REFORESTATION INC
2389 STEIWER RD SE
JEFFERSON, OR 97352

4. DESIGNATED DISPATCH LOCATION ADDRESS: ***(location of Crew where hired)***

1985 LANA AVE NE
SALEM, OR 97303

a. FEIN: 54-2155554
b. Business Phone: 503-540-8768
c. DUNS: 869196527
d. Business Owner: ANTONIO BIRRUETA
5. NUMBER OF 20 PERSON CREWS FOR DESIGNATED DISPATCH LOCATION: 1
6. HOURLY RATE: $$42.00

7. Dispatch Contact Name: ANTONIO BIRRUETA

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-540-8768	503-540-8865	503-551-1444	503-540-5597	

Dispatch Contact Name: SONIA BELTRAN

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-881-5431		503-881-5431	503-540-5597	

8. If commissary is available at fire camps, Use by Contractor's Personnel is:
☐ **AUTHORIZED** ☐ **NOT AUTHORIZED by CONTRACTOR**

9. CONTRACTOR OR AUTHORIZED AGENT (SIGN HERE)
ANTONIO BIRRUETA /S/
10. DATE 6/27/08

11. CONTRACTOR OR AUTHORIZED AGENT'S NAME (PRINT HERE)
ANTONIO BIRRUETA

12. ODF CONTRACT MANAGER SIGNATURE
Burke Mayer /S/
13. DATE 6/27/08

14. ODF CONTRACT MANAGER'S NAME AND TITLE
Burke Mayer, Interim Chief Procurement Officer

15. AUTHORIZED USA CONTRACTING OFFICER SIGNATURE
Madeline Small for Steve Shapiro /S/
16. DATE 6/27/08

17. AUTHORIZED USA CONTRACTING OFFICER'S NAME AND TITLE
Steve Shapiro, Contracting Officer

OREGON DEPARTMENT OF FORESTRY
INTERAGENCY FIREFIGHTING CREW AGREEMENT
AGREEMENT AWARD SUMMARY - CREWS

1. AGREEMENT NUMBER: IFCA07175

BLM NUMBER: HAE076175

AGREEMENT NO. MUST APPEAR ON ALL PAPERS RELATING TO THIS AGREEMENT

2. EFFECTIVE DATES:
a. Beginning 2008 Agreement Period
b. Ending September 30, 2009

3. BUSINESS INFORMATION:

C S R ENTERPRISES
PO BOX 9
DALLAS, OR 97338

4. DESIGNATED DISPATCH LOCATION ADDRESS: ***(location of Crew where hired)***

4917 LOCKWOOD AVE W
THE DALLES, OR 97058

a. FEIN: 20-8382867
b. Business Phone: 503-623-8861
c. DUNS: 800604469

d. Business Owner: SHAYONA & CAMILLE ROBERTS

5. NUMBER OF 20 PERSON CREWS FOR DESIGNATED DISPATCH LOCATION: 1

6. HOURLY RATE: $$43.50

7. Dispatch Contact Name: MICHAEL COX

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-623-8861	503-623-3035	503-917-9243	503-831-1341	

Dispatch Contact Name: RUSS IRWIN

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
541-980-9719	541-980-9719	541-980-9719	503-623-8861	

8. If commissary is available at fire camps, Use by Contractor's Personnel is:
☐ **AUTHORIZED** ☒ **NOT AUTHORIZED by CONTRACTOR**

9. CONTRACTOR OR AUTHORIZED AGENT (SIGN HERE)
SHAYONA ROBERTS /S/

10. DATE 6/26/08

11. CONTRACTOR OR AUTHORIZED AGENT'S NAME (PRINT HERE)
SHAYONA ROBERTS

12. ODF CONTRACT MANAGER SIGNATURE
Burke Mayer /S/

13. DATE 6/27/08

14. ODF CONTRACT MANAGER'S NAME AND TITLE
Burke Mayer, Interim Chief Procurement Officer

15. AUTHORIZED USA CONTRACTING OFFICER SIGNATURE
Madeline Small for Steve Shapiro /S/

16. DATE 6/27/08

17. AUTHORIZED USA CONTRACTING OFFICER'S NAME AND TITLE
Steve Shapiro, Contracting Officer

OREGON DEPARTMENT OF FORESTRY
INTERAGENCY FIREFIGHTING CREW AGREEMENT
AGREEMENT AWARD SUMMARY - CREWS

1. **AGREEMENT NUMBER:** IFCA07141 **BLM NUMBER:** HAE076141 AGREEMENT NO. MUST APPEAR ON ALL PAPERS RELATING TO THIS AGREEMENT	2. **EFFECTIVE DATES:** a. **Beginning** 2008 Agreement Period	b. **Ending** September 30, 2009
3. **BUSINESS INFORMATION:** COOPER CONTRACTING INC 64655 OLD BEND REDMOND HWY BEND, OR 97701	4. **DESIGNATED DISPATCH LOCATION ADDRESS:** ***(location of Crew where hired)*** 2675 HIGH DESERT DR PRINEVILLE, OR 97754	
a. **FEIN:** 93-0988298	b. **Business Phone:** 541-934-2423	c. **DUNS:** 19-521-0349
d. **Business Owner:** LOREEN COOPER	5. **NUMBER OF 20 PERSON CREWS FOR DESIGNATED DISPATCH LOCATION:** 1	6. **HOURLY RATE:** $41.00

7. **Dispatch Contact Name:** PAUL/LOREEN COOPER

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
541-934-2423		541-420-2318	541-934-2307	541-317-3330

Dispatch Contact Name: MIKE CADE

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
	541-280-4413	541-280-4413	541-318-0492	

8. **If commissary is available at fire camps, Use by Contractor's Personnel is:**
☒ **AUTHORIZED** ☐ **NOT AUTHORIZED by CONTRACTOR**

9. **CONTRACTOR OR AUTHORIZED AGENT (SIGN HERE)** /S/ LOREEN COOPER	10. **DATE** 7/10/08
11. **CONTRACTOR OR AUTHORIZED AGENT'S NAME (PRINT HERE)** LOREEN COOPER	
12. **ODF CONTRACT MANAGER SIGNATURE** /S/ BURKE MAYER	13. **DATE** 7/10/08
14. **ODF CONTRACT MANAGER'S NAME AND TITLE** Burke Mayer, Interim Chief Procurement Officer	
15. **AUTHORIZED USA CONTRACTING OFFICER SIGNATURE** /S/ MADELINE C. SMALL FOR STEVE SHAPIRO	16. **DATE** 7/11/08
17. **AUTHORIZED USA CONTRACTING OFFICER'S NAME AND TITLE** Steve Shapiro, Contracting Officer	

OREGON DEPARTMENT OF FORESTRY
INTERAGENCY FIREFIGHTING CREW AGREEMENT
AGREEMENT AWARD SUMMARY - CREWS

1. **AGREEMENT NUMBER:** IFCA07129 **BLM NUMBER:** HAE076129 AGREEMENT NO. MUST APPEAR ON ALL PAPERS RELATING TO THIS AGREEMENT	2. **EFFECTIVE DATES:** a. **Beginning** 2008 Agreement Period	b. **Ending** September 30, 2009
3. **BUSINESS INFORMATION:** DUST BUSTERS PLUS LLC PO BOX 50370 EUGENE, OR 97405	4. **DESIGNATED DISPATCH LOCATION ADDRESS:** ***(location of Crew where hired)*** 1551 S BERTELSEN RD EUGENE, OR 97402	
a. **FEIN:** 32-0033641	b. **Business Phone:** 541-683-1464	c. **DUNS:** 105352129
d. **Business Owner:** LEE JURASEVICH	5. **NUMBER OF 20 PERSON CREWS FOR DESIGNATED DISPATCH LOCATION:** 1	6. **HOURLY RATE:** $$45.00

7. **Dispatch Contact Name:** LEE JURASEVICH

a. **Telephone Number:** *(Daytime)*	b. **Telephone Number:** *(Evening)*	c. **Cell Number:**	d. **Fax Number:**	e. **Pager Number:**
541-683-1464	208-863-9859	208-863-9859	800-679-3909	

Dispatch Contact Name: JAMES/TRISH

a. **Telephone Number:** *(Daytime)*	b. **Telephone Number:** *(Evening)*	c. **Cell Number:**	d. **Fax Number:**	e. **Pager Number:**
541-683-0963	541-225-7424	541-225-7424	800-679-3909	

8. **If commissary is available at fire camps, Use by Contractor's Personnel is:**
☐ **AUTHORIZED** ☐ **NOT AUTHORIZED by CONTRACTOR**

9. **CONTRACTOR OR AUTHORIZED AGENT (SIGN HERE)** Lee Jurasevich /S/	10. **DATE** 6/27/08
11. **CONTRACTOR OR AUTHORIZED AGENT'S NAME (PRINT HERE)** Lee Jurasevich	
12. **ODF CONTRACT MANAGER SIGNATURE** Burke Mayer /S/	13. **DATE** 6/27/08
14. **ODF CONTRACT MANAGER'S NAME AND TITLE** Burke Mayer, Interim Chief Procurement Officer	
15. **AUTHORIZED USA CONTRACTING OFFICER SIGNATURE** Madeline Small for Steve Shapiro /S/	16. **DATE** 6/27/08
17. **AUTHORIZED USA CONTRACTING OFFICER'S NAME AND TITLE** Steve Shapiro, Contracting Officer	

OREGON DEPARTMENT OF FORESTRY
INTERAGENCY FIREFIGHTING CREW AGREEMENT
AGREEMENT AWARD SUMMARY - CREWS

1. **AGREEMENT NUMBER:** IFCA07130 **BLM NUMBER:** HAE076130 AGREEMENT NO. MUST APPEAR ON ALL PAPERS RELATING TO THIS AGREEMENT	2. **EFFECTIVE DATES:** a. **Beginning** 2008 Agreement Period	b. **Ending** September 30, 2009
3. **BUSINESS INFORMATION:** EAGLE PASS REFORESTATION INC 50 UPPER APPLEGATE RD JACKSONVILLE, OR 97530	4. **DESIGNATED DISPATCH LOCATION ADDRESS:** ***(location of Crew where hired)*** 50 UPPER APPLEGATE RD JACKSONVILLE, OR 97530	
a. **FEIN:** 93-1296747	b. **Business Phone:** 541-899-1227	c. **DUNS:** 783580632
d. **Business Owner:** ANTONIO C. MENA	5. **NUMBER OF 20 PERSON CREWS FOR DESIGNATED DISPATCH LOCATION:** 1	6. **HOURLY RATE:** $$35.60

7. **Dispatch Contact Name:** ANTONIO C MENA

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
541-899-1227	541-899-8512	541-951-3885	541-899-8789	

Dispatch Contact Name: KELLY PETERSON

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
541-899-1227	541-862-2120	541-821-1609	541-899-8789	

8. **If commissary is available at fire camps, Use by Contractor's Personnel is:**
☐ **AUTHORIZED** ☐ **NOT AUTHORIZED by CONTRACTOR**

9. **CONTRACTOR OR AUTHORIZED AGENT (SIGN HERE)** /S/ ANTONIO C MENA	10. **DATE** 6/27/08
11. **CONTRACTOR OR AUTHORIZED AGENT'S NAME (PRINT HERE)** ANTONIO C MENA	
12. **ODF CONTRACT MANAGER SIGNATURE** /S/ BURKE MAYER	13. **DATE** 7/2/08
14. **ODF CONTRACT MANAGER'S NAME AND TITLE** Burke Mayer, Interim Chief Procurement Officer	
15. **AUTHORIZED USA CONTRACTING OFFICER SIGNATURE** /S/ STEVE SHAPIRO	16. **DATE** 7/2/08
17. **AUTHORIZED USA CONTRACTING OFFICER'S NAME AND TITLE** Steve Shapiro, Contracting Officer	

OREGON DEPARTMENT OF FORESTRY
INTERAGENCY FIREFIGHTING CREW AGREEMENT
AGREEMENT AWARD SUMMARY - CREWS

1. AGREEMENT NUMBER: IFCA07139 **BLM NUMBER:** HAE076139 AGREEMENT NO. MUST APPEAR ON ALL PAPERS RELATING TO THIS AGREEMENT	**2. EFFECTIVE DATES:** **a. Beginning** 2008 Agreement Period	**b. Ending** September 30, 2009
3. BUSINESS INFORMATION: FERGUSON MANAGEMENT CO SOUTH PO BOX 1090 JEFFERSON, OR 97352	**4. DESIGNATED DISPATCH LOCATION ADDRESS:** ***(location of Crew where hired)*** 33935 Hwy 99E, Suite A Tangent, OR 97389	
a. FEIN: 93-1292992	**b. Business Phone:** 541-928-6504	**c. DUNS:** 800333226
d. Business Owner: BOB FERGUSON	**5. NUMBER OF 20 PERSON CREWS FOR DESIGNATED DISPATCH LOCATION:** 1	**6. HOURLY RATE:** $$40.50

7. Dispatch Contact Name: BOB FERGUSON

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
541-928-6504	503-394-3356	541-990-9720	541-967-1281	254-871-5418

Dispatch Contact Name: DENNIS SICKLES

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
541-928-6504	503-787-3755	541-981-3081	541-967-1281	503-559-0286

8. If commissary is available at fire camps, Use by Contractor's Personnel is:
☒ **AUTHORIZED** ☐ **NOT AUTHORIZED by CONTRACTOR**

9. CONTRACTOR OR AUTHORIZED AGENT (SIGN HERE) /S/ BOB FERGUSON	**10. DATE** 7/14/08
11. CONTRACTOR OR AUTHORIZED AGENT'S NAME (PRINT HERE) BOB FERGUSON	
12. ODF CONTRACT MANAGER SIGNATURE /S/ BURKE MAYER	**13. DATE** 7/15/08
14. ODF CONTRACT MANAGER'S NAME AND TITLE Burke Mayer, Interim Chief Procurement Officer	
15. AUTHORIZED USA CONTRACTING OFFICER SIGNATURE /S/ STEVE SHAPIRO	**16. DATE** 7/15/08
17. AUTHORIZED USA CONTRACTING OFFICER'S NAME AND TITLE Steve Shapiro, Contracting Officer	

OREGON DEPARTMENT OF FORESTRY
INTERAGENCY FIREFIGHTING CREW AGREEMENT
AGREEMENT AWARD SUMMARY - CREWS

1. AGREEMENT NUMBER: IFCA07143

BLM NUMBER: HAE076143

AGREEMENT NO. MUST APPEAR ON ALL PAPERS RELATING TO THIS AGREEMENT

2. EFFECTIVE DATES:
a. Beginning 2008 Agreement Period
b. Ending September 30, 2009

3. BUSINESS INFORMATION:

FOREST FOR THE FUTURE INC
10695 BRICK RD SE
TURNER, OR 97392

4. DESIGNATED DISPATCH LOCATION ADDRESS: ***(location of Crew where hired)***

208 MAIN ST
AUMSVILLE, OR 97325

a. FEIN: 93-1087608
b. Business Phone: 503-743-2355
c. DUNS: 626285316

d. Business Owner: JUAN CEJA

5. NUMBER OF 20 PERSON CREWS FOR DESIGNATED DISPATCH LOCATION: 1

6. HOURLY RATE: $$39.00

7. Dispatch Contact Name: JUAN L CEJA

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-743-2355	503-743-2355	503-559-3149	503-743-3250	

Dispatch Contact Name: MARCIE CEJA

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-743-2355	503-743-2355	503-580-3945	503-743-3250	

8. If commissary is available at fire camps, Use by Contractor's Personnel is:
☒ **AUTHORIZED** ☐ **NOT AUTHORIZED by CONTRACTOR**

9. CONTRACTOR OR AUTHORIZED AGENT (SIGN HERE)
JUAN CEJA /S/

10. DATE 6/26/08

11. CONTRACTOR OR AUTHORIZED AGENT'S NAME (PRINT HERE)
JUAN CEJA

12. ODF CONTRACT MANAGER SIGNATURE
Burke Mayer /S/

13. DATE 6/27/08

14. ODF CONTRACT MANAGER'S NAME AND TITLE
Burke Mayer, Interim Chief Procurement Officer

15. AUTHORIZED USA CONTRACTING OFFICER SIGNATURE
Madeline Small for Steve Shapiro /S/

16. DATE 6/27/08

17. AUTHORIZED USA CONTRACTING OFFICER'S NAME AND TITLE
Steve Shapiro, Contracting Officer

OREGON DEPARTMENT OF FORESTRY
INTERAGENCY FIREFIGHTING CREW AGREEMENT
AGREEMENT AWARD SUMMARY - CREWS

1. AGREEMENT NUMBER: IFCA07131

BLM NUMBER: HAE076131

AGREEMENT NO. MUST APPEAR ON ALL PAPERS RELATING TO THIS AGREEMENT

2. EFFECTIVE DATES:
a. Beginning 2008 Agreement Period
b. Ending September 30, 2009

3. BUSINESS INFORMATION:

G H RANCH LLC
14606 ANDERSON RD
KLAMATH FALLS, OR 97603

4. DESIGNATED DISPATCH LOCATION ADDRESS: ***(location of Crew where hired)***

14606 ANDERSON RD
KLAMATH FALLS, OR 97603

a. FEIN: 93-1022487
b. Business Phone: 541-798-0255
c. DUNS: 60-859-6771

d. Business Owner:

GERRY & NELDA HERMAN

5. NUMBER OF 20 PERSON CREWS FOR DESIGNATED DISPATCH LOCATION: 1

6. HOURLY RATE: $$37.00

7. Dispatch Contact Name: JOHN W BUNKER

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
541-798-0255	541-850-8822	541-891-6091	541-798-5514	

Dispatch Contact Name: GERRY/NELDA HERMAN

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
541-798-0255	541-798-5240	541-891-6204	541-798-5514	

8. If commissary is available at fire camps, Use by Contractor's Personnel is:
☒ **AUTHORIZED** ☐ **NOT AUTHORIZED by CONTRACTOR**

9. CONTRACTOR OR AUTHORIZED AGENT (SIGN HERE)
Nelda Herman /S/

10. DATE 6/25/08

11. CONTRACTOR OR AUTHORIZED AGENT'S NAME (PRINT HERE)
Nelda Herman

12. ODF CONTRACT MANAGER SIGNATURE
Burke Mayer /S/

13. DATE 6/27/08

14. ODF CONTRACT MANAGER'S NAME AND TITLE

Burke Mayer, Interim Chief Procurement Officer

15. AUTHORIZED USA CONTRACTING OFFICER SIGNATURE
Madeline Small for Steve Shapiro /S/

16. DATE 6/27/08

17. AUTHORIZED USA CONTRACTING OFFICER'S NAME AND TITLE

Steve Shapiro, Contracting Officer

OREGON DEPARTMENT OF FORESTRY
INTERAGENCY FIREFIGHTING CREW AGREEMENT
AGREEMENT AWARD SUMMARY - CREWS

1. **AGREEMENT NUMBER:** IFCA07132 **BLM NUMBER:** HAE076132 AGREEMENT NO. MUST APPEAR ON ALL PAPERS RELATING TO THIS AGREEMENT	2. **EFFECTIVE DATES:** a. **Beginning** 2008 Agreement Period	b. **Ending** September 30, 2009
3. **BUSINESS INFORMATION:** G H RANCH LLC 14606 ANDERSON RD KLAMATH FALLS, OR 97603	4. **DESIGNATED DISPATCH LOCATION ADDRESS:** ***(location of Crew where hired)*** 14606 ANDERSON RD KLAMATH FALLS, OR 97603	
a. **FEIN:** 93-1022487	b. **Business Phone:** 541-798-0255	c. **DUNS:** 60-859-6771
d. **Business Owner:** GERRY & NELDA HERMAN	5. **NUMBER OF 20 PERSON CREWS FOR DESIGNATED DISPATCH LOCATION:** 1	6. **HOURLY RATE:** $$37.00

7. **Dispatch Contact Name:** JOHN W BUNKER

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
541-798-0255	541-850-8822	541-891-6091	541-798-5514	

Dispatch Contact Name: GERRY/NELDA HERMAN

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
541-798-0255	541-798-5240	541-891-6204	541-798-5514	

8. **If commissary is available at fire camps, Use by Contractor's Personnel is:**
☒ **AUTHORIZED** ☐ **NOT AUTHORIZED by CONTRACTOR**

9. **CONTRACTOR OR AUTHORIZED AGENT (SIGN HERE)** Nelda Herman /S/	10. **DATE** 6/25/08
11. **CONTRACTOR OR AUTHORIZED AGENT'S NAME (PRINT HERE)** Nelda Herman	
12. **ODF CONTRACT MANAGER SIGNATURE** Burke Mayer /S/	13. **DATE** 6/27/08
14. **ODF CONTRACT MANAGER'S NAME AND TITLE** Burke Mayer, Interim Chief Procurement Officer	
15. **AUTHORIZED USA CONTRACTING OFFICER SIGNATURE** Madeline Small for Steve Shapiro /S/	16. **DATE** 6/27/08
17. **AUTHORIZED USA CONTRACTING OFFICER'S NAME AND TITLE** Steve Shapiro, Contracting Officer	

OREGON DEPARTMENT OF FORESTRY
INTERAGENCY FIREFIGHTING CREW AGREEMENT
AGREEMENT AWARD SUMMARY - CREWS

1. AGREEMENT NUMBER: IFCA07128a **BLM NUMBER:** HAE076128a AGREEMENT NO. MUST APPEAR ON ALL PAPERS RELATING TO THIS AGREEMENT	**2. EFFECTIVE DATES:** **a. Beginning** 2008 Agreement Period	**b. Ending** September 30, 2009
3. BUSINESS INFORMATION: GRAYBACK FORESTRY INC PO BOX 838 MERLIN, OR 97532	**4. DESIGNATED DISPATCH LOCATION ADDRESS:** ***(location of Crew where hired)*** 1570 AVENUE F WHITE CITY, OR 97530	
a. FEIN: 93-0730231	**b. Business Phone:** 541-476-0033	**c. DUNS:** 095013975
d. Business Owner: MICHAEL D WHEELOCK	**5. NUMBER OF 20 PERSON CREWS FOR DESIGNATED DISPATCH LOCATION:** 1	**6. HOURLY RATE:** $38.00

7. Dispatch Contact Name: MICHAEL D WHEELOCK

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
541-476-0033	541-476-0033	541-218-2748	541-476-0162	

Dispatch Contact Name: MILT COYLE

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
541-476-0033	541-476-0033	541-761-0952	541-476-0162	

8. If commissary is available at fire camps, Use by Contractor's Personnel is:
☐ **AUTHORIZED** ☐ **NOT AUTHORIZED by CONTRACTOR**

9. CONTRACTOR OR AUTHORIZED AGENT (SIGN HERE) /S/ MICHAEL D WHEELOCK	**10. DATE** 7/15/08
11. CONTRACTOR OR AUTHORIZED AGENT'S NAME (PRINT HERE) MICHAEL D WHEELOCK	
12. ODF CONTRACT MANAGER SIGNATURE /S/ BURKE MAYER	**13. DATE** 7/15/08
14. ODF CONTRACT MANAGER'S NAME AND TITLE Burke Mayer, Interim Chief Procurement Officer	
15. AUTHORIZED USA CONTRACTING OFFICER SIGNATURE /S/ STEVE SHAPIRO	**16. DATE** 7/15/08
17. AUTHORIZED USA CONTRACTING OFFICER'S NAME AND TITLE Steve Shapiro, Contracting Officer	

OREGON DEPARTMENT OF FORESTRY
INTERAGENCY FIREFIGHTING CREW AGREEMENT
AGREEMENT AWARD SUMMARY - CREWS

1. **AGREEMENT NUMBER:** IFCA07154 **BLM NUMBER:** HAE076154 AGREEMENT NO. MUST APPEAR ON ALL PAPERS RELATING TO THIS AGREEMENT	2. **EFFECTIVE DATES:** a. **Beginning** 2008 Agreement Period	b. **Ending** October 31, 2008
3. **BUSINESS INFORMATION:** J FRANCO REFORESTATION INC 9227 STAYTON RD SE AUMSVILLE, OR 97325	4. **DESIGNATED DISPATCH LOCATION ADDRESS:** *(location of Crew where hired)* 616 GOVERNMENT WAY MATTAWA, WA 99349	
a. **FEIN:** 86-1081316	b. **Business Phone:** 503-302-3166	c. **DUNS:** 141158910
d. **Business Owner:** JESUS FRANCO G	5. **NUMBER OF 20 PERSON CREWS FOR DESIGNATED DISPATCH LOCATION:** 1	6. **HOURLY RATE:** $45.00

7. **Dispatch Contact Name:** JESUS FRANCO

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-302-3166	503-302-3166	503-302-3166	503-769-1422	

Dispatch Contact Name: JOEL SALAS

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
509-830-7318	509-830-0679	509-830-0679	503-769-1422	

8. **If commissary is available at fire camps, Use by Contractor's Personnel is:**
☒ **AUTHORIZED** ☐ **NOT AUTHORIZED by CONTRACTOR**

9. **CONTRACTOR OR AUTHORIZED AGENT (SIGN HERE)** /S/ JESUS FRANCO	10. **DATE** 7/10/08
11. **CONTRACTOR OR AUTHORIZED AGENT'S NAME (PRINT HERE)** JESUS FRANCO	
12. **ODF CONTRACT MANAGER SIGNATURE** /S/ BURKE MAYER	13. **DATE** 7/11/08
14. **ODF CONTRACT MANAGER'S NAME AND TITLE** Burke Mayer, Interim Chief Procurement Officer	
15. **AUTHORIZED USA CONTRACTING OFFICER SIGNATURE** /S/ MADELINE C. SMALL FOR STEVE SHAPIRO	16. **DATE** 7/11/08
17. **AUTHORIZED USA CONTRACTING OFFICER'S NAME AND TITLE** Steve Shapiro, Contracting Officer	

OREGON DEPARTMENT OF FORESTRY
INTERAGENCY FIREFIGHTING CREW AGREEMENT
AGREEMENT AWARD SUMMARY - CREWS

1. AGREEMENT NUMBER: IFCA07158

BLM NUMBER: HAE076158

AGREEMENT NO. MUST APPEAR ON ALL PAPERS RELATING TO THIS AGREEMENT

2. EFFECTIVE DATES:
a. Beginning 2008 Agreement Period
b. Ending September 30, 2009

3. BUSINESS INFORMATION:

LAVA RIVER FORESTRY INC
PO BOX 42
SALEM, OR 97308

4. DESIGNATED DISPATCH LOCATION ADDRESS: ***(location of Crew where hired)***

3470 DONALD ST NE
SALEM, OR 97301

a. FEIN: 68-0622167
b. Business Phone: 503-838-4334
c. DUNS: 621439491

d. Business Owner: LUIS R. PEREZ

5. NUMBER OF 20 PERSON CREWS FOR DESIGNATED DISPATCH LOCATION: 1

6. HOURLY RATE: $$40.00

7. Dispatch Contact Name: LUIS R PEREZ

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-881-2197	503-508-6928	503-881-2197	503-838-1153 ~~503-589-8036~~	

Dispatch Contact Name: MARIA I PEREZ

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-838-4334	503-510-4935	503-510-4935	503-838-1153 ~~503-589-8036~~	

8. If commissary is available at fire camps, Use by Contractor's Personnel is:
☐ **AUTHORIZED** ☒ **NOT AUTHORIZED by CONTRACTOR**

9. CONTRACTOR OR AUTHORIZED AGENT (SIGN HERE)
LUIS R. PEREZ /S/

10. DATE 6/26/08

11. CONTRACTOR OR AUTHORIZED AGENT'S NAME (PRINT HERE)
LUIS R. PEREZ

12. ODF CONTRACT MANAGER SIGNATURE
Burke Mayer /S/

13. DATE 6/27/08

14. ODF CONTRACT MANAGER'S NAME AND TITLE
Burke Mayer, Interim Chief Procurement Officer

15. AUTHORIZED USA CONTRACTING OFFICER SIGNATURE
Madeline Small for Steve Shapiro /S/

16. DATE 6/27/08

17. AUTHORIZED USA CONTRACTING OFFICER'S NAME AND TITLE
Steve Shapiro, Contracting Officer

OREGON DEPARTMENT OF FORESTRY
INTERAGENCY FIREFIGHTING CREW AGREEMENT
AGREEMENT AWARD SUMMARY - CREWS

1. AGREEMENT NUMBER: IFCA07159

BLM NUMBER: HAE076159

AGREEMENT NO. MUST APPEAR ON ALL PAPERS RELATING TO THIS AGREEMENT

2. EFFECTIVE DATES:
a. Beginning 2008 Agreement Period
b. Ending September 30, 2009

3. BUSINESS INFORMATION:

LAVA RIVER FORESTRY INC
PO BOX 42
SALEM, OR 97308

4. DESIGNATED DISPATCH LOCATION ADDRESS: ***(location of Crew where hired)***

3470 DONALD ST NE
SALEM, OR 97301

a. FEIN: 68-0622167
b. Business Phone: 503-838-4334
c. DUNS: 621439491

d. Business Owner: LUIS R. PEREZ

5. NUMBER OF 20 PERSON CREWS FOR DESIGNATED DISPATCH LOCATION: 1

6. HOURLY RATE: $$40.00

7. Dispatch Contact Name: LUIS R PEREZ

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-881-2197	503-508-6928	503-881-2197	503-838-1153 ~~503-589-8036~~	

Dispatch Contact Name: MARIA I PEREZ

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-838-4334	503-510-4935	503-510-4935	503-838-1153 ~~503-589-8036~~	

8. If commissary is available at fire camps, Use by Contractor's Personnel is:
☐ **AUTHORIZED** ☒ **NOT AUTHORIZED by CONTRACTOR**

9. CONTRACTOR OR AUTHORIZED AGENT (SIGN HERE)
LUIS R. PEREZ /S/

10. DATE 6/26/08

11. CONTRACTOR OR AUTHORIZED AGENT'S NAME (PRINT HERE)
LUIS R. PEREZ

12. ODF CONTRACT MANAGER SIGNATURE
Burke Mayer /S/

13. DATE 6/27/08

14. ODF CONTRACT MANAGER'S NAME AND TITLE
Burke Mayer, Interim Chief Procurement Officer

15. AUTHORIZED USA CONTRACTING OFFICER SIGNATURE
Madeline Small for Steve Shapiro /S/

16. DATE 6/27/08

17. AUTHORIZED USA CONTRACTING OFFICER'S NAME AND TITLE
Steve Shapiro, Contracting Officer

OREGON DEPARTMENT OF FORESTRY
INTERAGENCY FIREFIGHTING CREW AGREEMENT
AGREEMENT AWARD SUMMARY - CREWS

1. AGREEMENT NUMBER: IFCA07160

BLM NUMBER: HAE076160

AGREEMENT NO. MUST APPEAR ON ALL PAPERS RELATING TO THIS AGREEMENT

2. EFFECTIVE DATES:
a. Beginning 2008 Agreement Period
b. Ending September 30, 2009

3. BUSINESS INFORMATION:

LAVA RIVER FORESTRY INC
PO BOX 42
SALEM, OR 97308

4. DESIGNATED DISPATCH LOCATION ADDRESS: ***(location of Crew where hired)***

110 KING AVE
NYSSA, OR 97913

a. FEIN: 68-0622167
b. Business Phone: 503-838-4334
c. DUNS: 621439491

d. Business Owner: LUIS R. PEREZ

5. NUMBER OF 20 PERSON CREWS FOR DESIGNATED DISPATCH LOCATION: 1

6. HOURLY RATE: $$43.00

7. Dispatch Contact Name: LUIS R PEREZ

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-881-2197	503-508-6928	503-881-2197	503-838-1153 ~~503-589-8036~~	

Dispatch Contact Name: MARIA I PEREZ

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-838-4334	503-510-4935	503-510-4935	503-838-1153 ~~503-589-8036~~	

8. If commissary is available at fire camps, Use by Contractor's Personnel is:
☐ AUTHORIZED ☒ NOT AUTHORIZED by CONTRACTOR

9. CONTRACTOR OR AUTHORIZED AGENT (SIGN HERE)
LUIS R. PEREZ /S/

10. DATE 6/26/08

11. CONTRACTOR OR AUTHORIZED AGENT'S NAME (PRINT HERE)
LUIS R. PEREZ

12. ODF CONTRACT MANAGER SIGNATURE
Burke Mayer /S/

13. DATE 6/27/08

14. ODF CONTRACT MANAGER'S NAME AND TITLE
Burke Mayer, Interim Chief Procurement Officer

15. AUTHORIZED USA CONTRACTING OFFICER SIGNATURE
Madeline Small for Steve Shapiro /S/

16. DATE 6/27/08

17. AUTHORIZED USA CONTRACTING OFFICER'S NAME AND TITLE
Steve Shapiro, Contracting Officer

OREGON DEPARTMENT OF FORESTRY
INTERAGENCY FIREFIGHTING CREW AGREEMENT
AGREEMENT AWARD SUMMARY - CREWS

1. AGREEMENT NUMBER: IFCA07162

BLM NUMBER: HAE076162

AGREEMENT NO. MUST APPEAR ON ALL PAPERS RELATING TO THIS AGREEMENT

2. EFFECTIVE DATES:
a. Beginning 2008 Agreement Period
b. Ending October 31, 2008

3. BUSINESS INFORMATION:

MOSQUEDA REFORESTATION INC
518 CITATION DR NE
SALEM, OR 97301

4. DESIGNATED DISPATCH LOCATION ADDRESS: ***(location of Crew where hired)***

3545 PORTLAND RD NE
SALEM, OR 97301

a. FEIN: 46-0504613
b. Business Phone: 503-371-1316
c. DUNS: 02-163-0061

d. Business Owner:

MANUEL MOSQUEDA

5. NUMBER OF 20 PERSON CREWS FOR DESIGNATED DISPATCH LOCATION: 1

6. HOURLY RATE: $$45.00

7. Dispatch Contact Name: JOSE MOSQUEDA

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-931-7461	971-239-8891	503-559-0185	503-391-6887	

Dispatch Contact Name: FRANCISCO MOSQUEDA

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-371-1316	503-371-1316	503-931-7855	503-391-6887	

8. If commissary is available at fire camps, Use by Contractor's Personnel is:
☐ **AUTHORIZED** ☐ **NOT AUTHORIZED by CONTRACTOR**

9. CONTRACTOR OR AUTHORIZED AGENT (SIGN HERE)
MANUEL MOSQUEDA /S/

10. DATE 6/26/08

11. CONTRACTOR OR AUTHORIZED AGENT'S NAME (PRINT HERE)
MANUEL MOSQUEDA

12. ODF CONTRACT MANAGER SIGNATURE
Burke Mayer /S/

13. DATE 6/27/08

14. ODF CONTRACT MANAGER'S NAME AND TITLE

Burke Mayer, Interim Chief Procurement Officer

15. AUTHORIZED USA CONTRACTING OFFICER SIGNATURE
Madeline Small for Steve Shapiro /S/

16. DATE 6/27/08

17. AUTHORIZED USA CONTRACTING OFFICER'S NAME AND TITLE

Steve Shapiro, Contracting Officer

OREGON DEPARTMENT OF FORESTRY
INTERAGENCY FIREFIGHTING CREW AGREEMENT
AGREEMENT AWARD SUMMARY - CREWS

1. **AGREEMENT NUMBER:** IFCA07163 **BLM NUMBER:** HAE076163 AGREEMENT NO. MUST APPEAR ON ALL PAPERS RELATING TO THIS AGREEMENT	2. **EFFECTIVE DATES:** a. **Beginning** 2008 Agreement Period	b. **Ending** October 31, 2008
3. **BUSINESS INFORMATION:** M Q FRANCO REFORESTATION 8457 DARLEY RD SE AUMSVILLE, OR 97325	4. **DESIGNATED DISPATCH LOCATION ADDRESS:** ***(location of Crew where hired)*** 607 PORTAGE AVE MATTAWA, WA 99349	
a. **FEIN:** 93-0961277	b. **Business Phone:** 503-749-2288	c. **DUNS:** 196712095
d. **Business Owner:** MANUEL Q FRANCO	5. **NUMBER OF 20 PERSON CREWS FOR DESIGNATED DISPATCH LOCATION:** 1	6. **HOURLY RATE:** $$45.00

7. **Dispatch Contact Name:** MANUEL Q FRANCO

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-749-2288	503-580-6631	503-580-6631	503-749-4040	

Dispatch Contact Name: LEONEL R ROCHA G

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-991-1865	503-991-1865	503-991-1865	503-749-4040	

8. **If commissary is available at fire camps, Use by Contractor's Personnel is:**
☒ **AUTHORIZED** ☐ **NOT AUTHORIZED by CONTRACTOR**

9. **CONTRACTOR OR AUTHORIZED AGENT (SIGN HERE)** MANUEL Q FRANCO /S/	10. **DATE** 6/26/08
11. **CONTRACTOR OR AUTHORIZED AGENT'S NAME (PRINT HERE)** MANUEL Q FRANCO	
12. **ODF CONTRACT MANAGER SIGNATURE** Burke Mayer /S/	13. **DATE** 6/27/08
14. **ODF CONTRACT MANAGER'S NAME AND TITLE** Burke Mayer, Interim Chief Procurement Officer	
15. **AUTHORIZED USA CONTRACTING OFFICER SIGNATURE** Madeline Small for Steve Shapiro /S/	16. **DATE** 6/27/08
17. **AUTHORIZED USA CONTRACTING OFFICER'S NAME AND TITLE** Steve Shapiro, Contracting Officer	

OREGON DEPARTMENT OF FORESTRY
INTERAGENCY FIREFIGHTING CREW AGREEMENT
AGREEMENT AWARD SUMMARY - CREWS

1. **AGREEMENT NUMBER:** IFCA07164 **BLM NUMBER:** HAE076164 AGREEMENT NO. MUST APPEAR ON ALL PAPERS RELATING TO THIS AGREEMENT	2. **EFFECTIVE DATES:** a. **Beginning** 2008 Agreement Period	b. **Ending** October 31, 2008
3. **BUSINESS INFORMATION:** M Q FRANCO REFORESTATION 8457 DARLEY RD SE AUMSVILLE, OR 97325	4. **DESIGNATED DISPATCH LOCATION ADDRESS:** ***(location of Crew where hired)*** 53469 APPLETON RD MILTON FREEWATER, OR 97862	
a. **FEIN:** 93-0961277	b. **Business Phone:** 503-749-2288	c. **DUNS:** 196712095
d. **Business Owner:** MANUEL Q FRANCO	5. **NUMBER OF 20 PERSON CREWS FOR DESIGNATED DISPATCH LOCATION:** 1	6. **HOURLY RATE:** $$45.00

7. **Dispatch Contact Name:** MANUEL Q FRANCO

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-749-2288	503-580-6631	503-580-6631	503-749-4040	

Dispatch Contact Name: LEONEL R ROCHA G

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-991-1865	503-991-1865	503-991-1865	503-749-4040	

8. **If commissary is available at fire camps, Use by Contractor's Personnel is:**
☒ **AUTHORIZED** ☐ **NOT AUTHORIZED by CONTRACTOR**

9. **CONTRACTOR OR AUTHORIZED AGENT (SIGN HERE)** MANUEL Q FRANCO /S/	10. **DATE** 6/26/08
11. **CONTRACTOR OR AUTHORIZED AGENT'S NAME (PRINT HERE)** MANUEL Q FRANCO	
12. **ODF CONTRACT MANAGER SIGNATURE** Burke Mayer /S/	13. **DATE** 6/27/08
14. **ODF CONTRACT MANAGER'S NAME AND TITLE** Burke Mayer, Interim Chief Procurement Officer	
15. **AUTHORIZED USA CONTRACTING OFFICER SIGNATURE** Madeline Small for Steve Shapiro /S/	16. **DATE** 6/27/08
17. **AUTHORIZED USA CONTRACTING OFFICER'S NAME AND TITLE** Steve Shapiro, Contracting Officer	

OREGON DEPARTMENT OF FORESTRY
INTERAGENCY FIREFIGHTING CREW AGREEMENT
AGREEMENT AWARD SUMMARY - CREWS

1. AGREEMENT NUMBER: IFCA07165

BLM NUMBER: HAE076165

AGREEMENT NO. MUST APPEAR ON ALL PAPERS RELATING TO THIS AGREEMENT

2. EFFECTIVE DATES:
a. Beginning 2008 Agreement Period
b. Ending October 31, 2008

3. BUSINESS INFORMATION:

M Q FRANCO REFORESTATION
8457 DARLEY RD SE
AUMSVILLE, OR 97325

4. DESIGNATED DISPATCH LOCATION ADDRESS: ***(location of Crew where hired)***

450 YAKIMA VALLEY HWY
PARKER, WA 98939

a. FEIN: 93-0961277
b. Business Phone: 503-749-2288
c. DUNS: 196712095

d. Business Owner: MANUEL Q FRANCO

5. NUMBER OF 20 PERSON CREWS FOR DESIGNATED DISPATCH LOCATION: 1

6. HOURLY RATE: $$45.00

7. Dispatch Contact Name: MANUEL Q FRANCO

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-749-2288	503-580-6631	503-580-6631	503-749-4040	

Dispatch Contact Name: LEONEL R ROCHA G

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-991-1865	503-991-1865	503-991-1865	503-749-4040	

8. If commissary is available at fire camps, Use by Contractor's Personnel is:
☒ **AUTHORIZED** ☐ **NOT AUTHORIZED by CONTRACTOR**

9. CONTRACTOR OR AUTHORIZED AGENT (SIGN HERE)
MANUEL Q FRANCO /S/

10. DATE 6/26/08

11. CONTRACTOR OR AUTHORIZED AGENT'S NAME (PRINT HERE)
MANUEL Q FRANCO

12. ODF CONTRACT MANAGER SIGNATURE
Burke Mayer /S/

13. DATE 6/27/08

14. ODF CONTRACT MANAGER'S NAME AND TITLE
Burke Mayer, Interim Chief Procurement Officer

15. AUTHORIZED USA CONTRACTING OFFICER SIGNATURE
Madeline Small for Steve Shapiro /S/

16. DATE 6/27/08

17. AUTHORIZED USA CONTRACTING OFFICER'S NAME AND TITLE
Steve Shapiro, Contracting Officer

OREGON DEPARTMENT OF FORESTRY
INTERAGENCY FIREFIGHTING CREW AGREEMENT
AGREEMENT AWARD SUMMARY - CREWS

1. **AGREEMENT NUMBER:** IFCA07166 **BLM NUMBER:** HAE076166 AGREEMENT NO. MUST APPEAR ON ALL PAPERS RELATING TO THIS AGREEMENT	2. **EFFECTIVE DATES:** a. **Beginning** 2008 Agreement Period	b. **Ending** October 31, 2008
3. **BUSINESS INFORMATION:** M Q FRANCO REFORESTATION 8457 DARLEY RD SE AUMSVILLE, OR 97325	4. **DESIGNATED DISPATCH LOCATION ADDRESS:** ***(location of Crew where hired)*** UNDEV LAND BEHIND 112 MAINS ST AUMSVILLE, OR 97325	
a. **FEIN:** 93-0961277	b. **Business Phone:** 503-749-2288	c. **DUNS:** 196712095
d. **Business Owner:** MANUEL Q FRANCO	5. **NUMBER OF 20 PERSON CREWS FOR DESIGNATED DISPATCH LOCATION:** 1	6. **HOURLY RATE:** $$45.00

7. **Dispatch Contact Name:** MANUEL Q FRANCO

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-749-2288	503-580-6631	503-580-6631	503-749-4040	

Dispatch Contact Name: LEONEL R ROCHA G

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-991-1865	503-991-1865	503-991-1865	503-749-4040	

8. **If commissary is available at fire camps, Use by Contractor's Personnel is:**
☒ **AUTHORIZED** ☐ **NOT AUTHORIZED by CONTRACTOR**

9. **CONTRACTOR OR AUTHORIZED AGENT (SIGN HERE)** MANUEL Q FRANCO /S/	10. **DATE** 6/26/08
11. **CONTRACTOR OR AUTHORIZED AGENT'S NAME (PRINT HERE)** MANUEL Q FRANCO	
12. **ODF CONTRACT MANAGER SIGNATURE** Burke Mayer /S/	13. **DATE** 6/27/08
14. **ODF CONTRACT MANAGER'S NAME AND TITLE** Burke Mayer, Interim Chief Procurement Officer	
15. **AUTHORIZED USA CONTRACTING OFFICER SIGNATURE** Madeline Small for Steve Shapiro /S/	16. **DATE** 6/27/08
17. **AUTHORIZED USA CONTRACTING OFFICER'S NAME AND TITLE** Steve Shapiro, Contracting Officer	

OREGON DEPARTMENT OF FORESTRY
INTERAGENCY FIREFIGHTING CREW AGREEMENT
AGREEMENT AWARD SUMMARY - CREWS

1. AGREEMENT NUMBER: IFCA07167

BLM NUMBER: HAE076167

AGREEMENT NO. MUST APPEAR ON ALL PAPERS RELATING TO THIS AGREEMENT

2. EFFECTIVE DATES:
a. Beginning 2008 Agreement Period
b. Ending October 31, 2008

3. BUSINESS INFORMATION:

M Q FRANCO REFORESTATION
8457 DARLEY RD SE
AUMSVILLE, OR 97325

4. DESIGNATED DISPATCH LOCATION ADDRESS: ***(location of Crew where hired)***

UNDEV LAND BEHIND 112 MAINS ST
AUMSVILLE, OR 97325

a. FEIN: 93-0961277
b. Business Phone: 503-749-2288
c. DUNS: 196712095

d. Business Owner: MANUEL Q FRANCO

5. NUMBER OF 20 PERSON CREWS FOR DESIGNATED DISPATCH LOCATION: 1

6. HOURLY RATE: $$45.00

7. Dispatch Contact Name: MANUEL Q FRANCO

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-749-2288	503-580-6631	503-580-6631	503-749-4040	

Dispatch Contact Name: LEONEL R ROCHA G

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-991-1865	503-991-1865	503-991-1865	503-749-4040	

8. If commissary is available at fire camps, Use by Contractor's Personnel is:
☒ **AUTHORIZED** ☐ **NOT AUTHORIZED by CONTRACTOR**

9. CONTRACTOR OR AUTHORIZED AGENT (SIGN HERE)
MANUEL Q FRANCO /S/

10. DATE 6/26/08

11. CONTRACTOR OR AUTHORIZED AGENT'S NAME (PRINT HERE)
MANUEL Q FRANCO

12. ODF CONTRACT MANAGER SIGNATURE
Burke Mayer /S/

13. DATE 6/27/08

14. ODF CONTRACT MANAGER'S NAME AND TITLE
Burke Mayer, Interim Chief Procurement Officer

15. AUTHORIZED USA CONTRACTING OFFICER SIGNATURE
Madeline Small for Steve Shapiro /S/

16. DATE 6/27/08

17. AUTHORIZED USA CONTRACTING OFFICER'S NAME AND TITLE
Steve Shapiro, Contracting Officer

OREGON DEPARTMENT OF FORESTRY
INTERAGENCY FIREFIGHTING CREW AGREEMENT
AGREEMENT AWARD SUMMARY - CREWS

1. AGREEMENT NUMBER: IFCA07168

BLM NUMBER: HAE076168

AGREEMENT NO. MUST APPEAR ON ALL PAPERS RELATING TO THIS AGREEMENT

2. EFFECTIVE DATES:
a. Beginning 2008 Agreement Period
b. Ending October 31, 2008

3. BUSINESS INFORMATION:

NORTH PACIFIC FORESTRY INC
PO BOX 7280
SALEM, OR 97301

4. DESIGNATED DISPATCH LOCATION ADDRESS: ***(location of Crew where hired)***

2735 PORTLAND RD NE
SALEM, OR 97301

a. FEIN: 93-1317467
b. Business Phone: 503-763-0570
c. DUNS: 020656380

d. Business Owner: SALVADOR A. PEREZ

5. NUMBER OF 20 PERSON CREWS FOR DESIGNATED DISPATCH LOCATION: 1

6. HOURLY RATE: $$42.00

7. Dispatch Contact Name: SALVADOR & ELOY PEREZ

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-763-0570	503-881-3125	503-881-2435	503-763-1729	

Dispatch Contact Name: SALVADOR,ELOY, ADRIAN PEREZ

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-551-2139	503-881-2435	503-881-3125	503-763-1729	

8. If commissary is available at fire camps, Use by Contractor's Personnel is:
☒ **AUTHORIZED** ☐ **NOT AUTHORIZED by CONTRACTOR**

9. CONTRACTOR OR AUTHORIZED AGENT (SIGN HERE)
ELOY A PEREZ /S/

10. DATE 6/27/08

11. CONTRACTOR OR AUTHORIZED AGENT'S NAME (PRINT HERE)
ELOY A PEREZ

12. ODF CONTRACT MANAGER SIGNATURE
Burke Mayer /S/

13. DATE 6/27/08

14. ODF CONTRACT MANAGER'S NAME AND TITLE
Burke Mayer, Interim Chief Procurement Officer

15. AUTHORIZED USA CONTRACTING OFFICER SIGNATURE
Madeline Small for Steve Shapiro /S/

16. DATE 6/27/08

17. AUTHORIZED USA CONTRACTING OFFICER'S NAME AND TITLE
Steve Shapiro, Contracting Officer

OREGON DEPARTMENT OF FORESTRY
INTERAGENCY FIREFIGHTING CREW AGREEMENT
AGREEMENT AWARD SUMMARY - CREWS

1. AGREEMENT NUMBER: IFCA07169

BLM NUMBER: HAE076169

AGREEMENT NO. MUST APPEAR ON ALL PAPERS RELATING TO THIS AGREEMENT

2. EFFECTIVE DATES:
a. Beginning 2008 Agreement Period
b. Ending October 31, 2008

3. BUSINESS INFORMATION:

NORTH PACIFIC FORESTRY INC
PO BOX 7280
SALEM, OR 97301

4. DESIGNATED DISPATCH LOCATION ADDRESS: ***(location of Crew where hired)***

2735 PORTLAND RD NE
SALEM, OR 97301

a. FEIN: 93-1317467
b. Business Phone: 503-763-0570
c. DUNS: 020656380

d. Business Owner: SALVADOR A. PEREZ

5. NUMBER OF 20 PERSON CREWS FOR DESIGNATED DISPATCH LOCATION: 1

6. HOURLY RATE: $$42.00

7. Dispatch Contact Name: SALVADOR & ELOY PEREZ

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-763-0570	503-881-3125	503-881-2435	503-763-1729	

Dispatch Contact Name: SALVADOR,ELOY, ADRIAN PEREZ

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-551-2139	503-881-2435	503-881-3125	503-763-1729	

8. If commissary is available at fire camps, Use by Contractor's Personnel is:
☒ **AUTHORIZED** ☐ **NOT AUTHORIZED by CONTRACTOR**

9. CONTRACTOR OR AUTHORIZED AGENT (SIGN HERE)
ELOY A PEREZ /S/

10. DATE 6/27/08

11. CONTRACTOR OR AUTHORIZED AGENT'S NAME (PRINT HERE)
ELOY A PEREZ

12. ODF CONTRACT MANAGER SIGNATURE
Burke Mayer /S/

13. DATE 6/27/08

14. ODF CONTRACT MANAGER'S NAME AND TITLE
Burke Mayer, Interim Chief Procurement Officer

15. AUTHORIZED USA CONTRACTING OFFICER SIGNATURE
Madeline Small for Steve Shapiro /S/

16. DATE 6/27/08

17. AUTHORIZED USA CONTRACTING OFFICER'S NAME AND TITLE
Steve Shapiro, Contracting Officer

OREGON DEPARTMENT OF FORESTRY
INTERAGENCY FIREFIGHTING CREW AGREEMENT
AGREEMENT AWARD SUMMARY - CREWS

1. AGREEMENT NUMBER: IFCA07170 **BLM NUMBER:** HAE076170 AGREEMENT NO. MUST APPEAR ON ALL PAPERS RELATING TO THIS AGREEMENT	**2. EFFECTIVE DATES:** **a. Beginning** 2008 Agreement Period	**b. Ending** October 31, 2008
3. BUSINESS INFORMATION: NORTH PACIFIC FORESTRY INC PO BOX 7280 SALEM, OR 97301	**4. DESIGNATED DISPATCH LOCATION ADDRESS:** ***(location of Crew where hired)*** 2735 PORTLAND RD NE SALEM, OR 97301	
a. FEIN: 93-1317467	**b. Business Phone:** 503-763-0570	**c. DUNS:** 020656380
d. Business Owner: SALVADOR A. PEREZ	**5. NUMBER OF 20 PERSON CREWS FOR DESIGNATED DISPATCH LOCATION:** 1	**6. HOURLY RATE:** $$42.00

7. Dispatch Contact Name: SALVADOR & ELOY PEREZ

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-763-0570	503-881-3125	503-881-2435	503-763-1729	

Dispatch Contact Name: SALVADOR,ELOY, ADRIAN PEREZ

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-551-2139	503-881-2435	503-881-3125	503-763-1729	

8. If commissary is available at fire camps, Use by Contractor's Personnel is:
☒ **AUTHORIZED** ☐ **NOT AUTHORIZED by CONTRACTOR**

9. CONTRACTOR OR AUTHORIZED AGENT (SIGN HERE) ELOY A PEREZ /S/	**10. DATE** 6/27/08
11. CONTRACTOR OR AUTHORIZED AGENT'S NAME (PRINT HERE) ELOY A PEREZ	
12. ODF CONTRACT MANAGER SIGNATURE Burke Mayer /S/	**13. DATE** 6/27/08
14. ODF CONTRACT MANAGER'S NAME AND TITLE Burke Mayer, Interim Chief Procurement Officer	
15. AUTHORIZED USA CONTRACTING OFFICER SIGNATURE Madeline Small for Steve Shapiro /S/	**16. DATE** 6/27/08
17. AUTHORIZED USA CONTRACTING OFFICER'S NAME AND TITLE Steve Shapiro, Contracting Officer	

OREGON DEPARTMENT OF FORESTRY
INTERAGENCY FIREFIGHTING CREW AGREEMENT
AGREEMENT AWARD SUMMARY - CREWS

1. AGREEMENT NUMBER: IFCA07171

BLM NUMBER: HAE076171

AGREEMENT NO. MUST APPEAR ON ALL PAPERS RELATING TO THIS AGREEMENT

2. EFFECTIVE DATES:
a. Beginning 2008 Agreement Period
b. Ending October 31, 2008

3. BUSINESS INFORMATION:

NORTH PACIFIC FORESTRY INC
PO BOX 7280
SALEM, OR 97301

4. DESIGNATED DISPATCH LOCATION ADDRESS: ***(location of Crew where hired)***

2639 KIRTLAND RD
CENTRAL POINT, OR 97502

a. FEIN: 93-1317467
b. Business Phone: 503-763-0570
c. DUNS: 020656380

d. Business Owner: SALVADOR A. PEREZ

5. NUMBER OF 20 PERSON CREWS FOR DESIGNATED DISPATCH LOCATION: 1

6. HOURLY RATE: $$43.00

7. Dispatch Contact Name: SALVADOR & ELOY PEREZ

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-763-0570	503-881-3125	503-881-2435	503-763-1729	

Dispatch Contact Name: SALVADOR,ELOY, ADRIAN PEREZ

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-551-2139	503-881-2435	503-881-3125	503-763-1729	

8. If commissary is available at fire camps, Use by Contractor's Personnel is:
☒ **AUTHORIZED** ☐ **NOT AUTHORIZED by CONTRACTOR**

9. CONTRACTOR OR AUTHORIZED AGENT (SIGN HERE)
ELOY A PEREZ /S/

10. DATE
6/27/08

11. CONTRACTOR OR AUTHORIZED AGENT'S NAME (PRINT HERE)
ELOY A PEREZ

12. ODF CONTRACT MANAGER SIGNATURE
Burke Mayer /S/

13. DATE
6/27/08

14. ODF CONTRACT MANAGER'S NAME AND TITLE

Burke Mayer, Interim Chief Procurement Officer

15. AUTHORIZED USA CONTRACTING OFFICER SIGNATURE
Madeline Small for Steve Shapiro /S/

16. DATE
6/27/08

17. AUTHORIZED USA CONTRACTING OFFICER'S NAME AND TITLE

Steve Shapiro, Contracting Officer

OREGON DEPARTMENT OF FORESTRY
INTERAGENCY FIREFIGHTING CREW AGREEMENT
AGREEMENT AWARD SUMMARY - CREWS

1. **AGREEMENT NUMBER:** IFCA07172 **BLM NUMBER:** HAE076172 AGREEMENT NO. MUST APPEAR ON ALL PAPERS RELATING TO THIS AGREEMENT	2. **EFFECTIVE DATES:** a. **Beginning** 2008 Agreement Period	b. **Ending** October 31, 2008
3. **BUSINESS INFORMATION:** NORTH PACIFIC FORESTRY INC PO BOX 7280 SALEM, OR 97301	4. **DESIGNATED DISPATCH LOCATION ADDRESS:** ***(location of Crew where hired)*** 344 COOPER ST MATTAWA, WA 99349	
a. **FEIN:** 93-1317467	b. **Business Phone:** 503-763-0570	c. **DUNS:** 020656380
d. **Business Owner:** SALVADOR A. PEREZ	5. **NUMBER OF 20 PERSON CREWS FOR DESIGNATED DISPATCH LOCATION:** 1	6. **HOURLY RATE:** $$44.00

7. **Dispatch Contact Name:** SALVADOR & ELOY PEREZ

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-763-0570	503-881-3125	503-881-2435	503-763-1729	

Dispatch Contact Name: SALVADOR,ELOY, ADRIAN PEREZ

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-551-2139	503-881-2435	503-881-3125	503-763-1729	

8. **If commissary is available at fire camps, Use by Contractor's Personnel is:**
☒ **AUTHORIZED** ☐ **NOT AUTHORIZED by CONTRACTOR**

9. **CONTRACTOR OR AUTHORIZED AGENT (SIGN HERE)** ELOY A PEREZ /S/	10. **DATE** 6/27/08
11. **CONTRACTOR OR AUTHORIZED AGENT'S NAME (PRINT HERE)** ELOY A PEREZ	
12. **ODF CONTRACT MANAGER SIGNATURE** Burke Mayer /S/	13. **DATE** 6/27/08
14. **ODF CONTRACT MANAGER'S NAME AND TITLE** Burke Mayer, Interim Chief Procurement Officer	
15. **AUTHORIZED USA CONTRACTING OFFICER SIGNATURE** Madeline Small for Steve Shapiro /S/	16. **DATE** 6/27/08
17. **AUTHORIZED USA CONTRACTING OFFICER'S NAME AND TITLE** Steve Shapiro, Contracting Officer	

OREGON DEPARTMENT OF FORESTRY
INTERAGENCY FIREFIGHTING CREW AGREEMENT
AGREEMENT AWARD SUMMARY - CREWS

1. AGREEMENT NUMBER: IFCA07173

BLM NUMBER: HAE076173

AGREEMENT NO. MUST APPEAR ON ALL PAPERS RELATING TO THIS AGREEMENT

2. EFFECTIVE DATES:
a. Beginning 2008 Agreement Period
b. Ending October 31, 2008

3. BUSINESS INFORMATION:

NORTH PACIFIC FORESTRY INC
PO BOX 7280
SALEM, OR 97301

4. DESIGNATED DISPATCH LOCATION ADDRESS: ***(location of Crew where hired)***

344 COOPER ST
MATTAWA, WA 99349

a. FEIN: 93-1317467
b. Business Phone: 503-763-0570
c. DUNS: 020656380

d. Business Owner: SALVADOR A. PEREZ

5. NUMBER OF 20 PERSON CREWS FOR DESIGNATED DISPATCH LOCATION: 1

6. HOURLY RATE: $$44.00

7. Dispatch Contact Name: SALVADOR & ELOY PEREZ

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-763-0570	503-881-3125	503-881-2435	503-763-1729	

Dispatch Contact Name: SALVADOR,ELOY, ADRIAN PEREZ

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-551-2139	503-881-2435	503-881-3125	503-763-1729	

8. If commissary is available at fire camps, Use by Contractor's Personnel is:
☒ **AUTHORIZED** ☐ **NOT AUTHORIZED by CONTRACTOR**

9. CONTRACTOR OR AUTHORIZED AGENT (SIGN HERE)
ELOY A PEREZ /S/

10. DATE 6/27/08

11. CONTRACTOR OR AUTHORIZED AGENT'S NAME (PRINT HERE)
ELOY A PEREZ

12. ODF CONTRACT MANAGER SIGNATURE
Burke Mayer /S/

13. DATE 6/27/08

14. ODF CONTRACT MANAGER'S NAME AND TITLE
Burke Mayer, Interim Chief Procurement Officer

15. AUTHORIZED USA CONTRACTING OFFICER SIGNATURE
Madeline Small for Steve Shapiro /S/

16. DATE 6/27/08

17. AUTHORIZED USA CONTRACTING OFFICER'S NAME AND TITLE
Steve Shapiro, Contracting Officer

OREGON DEPARTMENT OF FORESTRY
INTERAGENCY FIREFIGHTING CREW AGREEMENT
AGREEMENT AWARD SUMMARY - CREWS

1. **AGREEMENT NUMBER:** IFCA07174 **BLM NUMBER:** HAE076174 AGREEMENT NO. MUST APPEAR ON ALL PAPERS RELATING TO THIS AGREEMENT	2. **EFFECTIVE DATES:** a. **Beginning** 2008 Agreement Period	b. **Ending** October 31, 2008
3. **BUSINESS INFORMATION:** NORTH PACIFIC FORESTRY INC PO BOX 7280 SALEM, OR 97301	4. **DESIGNATED DISPATCH LOCATION ADDRESS:** ***(location of Crew where hired)*** 344 COOPER ST MATTAWA, WA 99349	
a. **FEIN:** 93-1317467	b. **Business Phone:** 503-763-0570	c. **DUNS:** 020656380
d. **Business Owner:** SALVADOR A. PEREZ	5. **NUMBER OF 20 PERSON CREWS FOR DESIGNATED DISPATCH LOCATION:** 1	6. **HOURLY RATE:** $$44.00

7. **Dispatch Contact Name:** SALVADOR & ELOY PEREZ

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-763-0570	503-881-3125	503-881-2435	503-763-1729	

Dispatch Contact Name: SALVADOR,ELOY, ADRIAN PEREZ

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-551-2139	503-881-2435	503-881-3125	503-763-1729	

8. **If commissary is available at fire camps, Use by Contractor's Personnel is:**
☒ **AUTHORIZED** ☐ **NOT AUTHORIZED by CONTRACTOR**

9. **CONTRACTOR OR AUTHORIZED AGENT (SIGN HERE)** ELOY A PEREZ /S/	10. **DATE** 6/27/08
11. **CONTRACTOR OR AUTHORIZED AGENT'S NAME (PRINT HERE)** ELOY A PEREZ	
12. **ODF CONTRACT MANAGER SIGNATURE** Burke Mayer /S/	13. **DATE** 6/27/08
14. **ODF CONTRACT MANAGER'S NAME AND TITLE** Burke Mayer, Interim Chief Procurement Officer	
15. **AUTHORIZED USA CONTRACTING OFFICER SIGNATURE** Madeline Small for Steve Shapiro /S/	16. **DATE** 6/27/08
17. **AUTHORIZED USA CONTRACTING OFFICER'S NAME AND TITLE** Steve Shapiro, Contracting Officer	

OREGON DEPARTMENT OF FORESTRY
INTERAGENCY FIREFIGHTING CREW AGREEMENT
AGREEMENT AWARD SUMMARY - CREWS

1. **AGREEMENT NUMBER:** IFCA07146 **BLM NUMBER:** HAE076146 AGREEMENT NO. MUST APPEAR ON ALL PAPERS RELATING TO THIS AGREEMENT	2. **EFFECTIVE DATES:** a. **Beginning** 2008 Agreement Period	b. **Ending** October 31, 2008
3. **BUSINESS INFORMATION:** NORTH REFORESTATION INC 9930 HOFFMAN RD MONMOUTH, OR 97361	4. **DESIGNATED DISPATCH LOCATION ADDRESS:** ***(location of Crew where hired)*** 1201 STRYKER RD LOT "B" INDEPENDENCE, OR 97351	
a. **FEIN:** 93-0932493	b. **Business Phone:** 503-838-0557	c. **DUNS:** 195210349
d. **Business Owner:** JOSE B RINCON	5. **NUMBER OF 20 PERSON CREWS FOR DESIGNATED DISPATCH LOCATION:** 1	6. **HOURLY RATE:** $$45.00

7. **Dispatch Contact Name:** JOSE B RINCON

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-838-0557	503-838-4578	503-931-4025	503-606-0942	

Dispatch Contact Name: GERARDO RINCON

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-580-5754				

8. **If commissary is available at fire camps, Use by Contractor's Personnel is:**
☒ **AUTHORIZED** ☐ **NOT AUTHORIZED by CONTRACTOR**

9. **CONTRACTOR OR AUTHORIZED AGENT (SIGN HERE)** JOSE B RINCON /S/	10. **DATE** 6/26/08
11. **CONTRACTOR OR AUTHORIZED AGENT'S NAME (PRINT HERE)** JOSE B RINCON	
12. **ODF CONTRACT MANAGER SIGNATURE** Burke Mayer /S/	13. **DATE** 6/27/08
14. **ODF CONTRACT MANAGER'S NAME AND TITLE** Burke Mayer, Interim Chief Procurement Officer	
15. **AUTHORIZED USA CONTRACTING OFFICER SIGNATURE** Madeline Small for Steve Shapiro /S/	16. **DATE** 6/27/08
17. **AUTHORIZED USA CONTRACTING OFFICER'S NAME AND TITLE** Steve Shapiro, Contracting Officer	

OREGON DEPARTMENT OF FORESTRY
INTERAGENCY FIREFIGHTING CREW AGREEMENT
AGREEMENT AWARD SUMMARY - CREWS

1. AGREEMENT NUMBER: IFCA07147

BLM NUMBER: HAE076147

AGREEMENT NO. MUST APPEAR ON ALL PAPERS RELATING TO THIS AGREEMENT

2. EFFECTIVE DATES:
a. Beginning 2008 Agreement Period
b. Ending October 31, 2008

3. BUSINESS INFORMATION:

P R REFORESTATION INC
288 44TH AVE NE
SALEM, OR 97301

4. DESIGNATED DISPATCH LOCATION ADDRESS: ***(location of Crew where hired)***

3220-3230 PORTLAND RD NE
SALEM, OR 97305

a. FEIN: 90-0115058
b. Business Phone: 503-363-2489
c. DUNS: 187662726

d. Business Owner: JOSE PORFIRIO RAMIREZ SALDANA

5. NUMBER OF 20 PERSON CREWS FOR DESIGNATED DISPATCH LOCATION: 1

6. HOURLY RATE: $$45.00

7. Dispatch Contact Name: TERESA ORTIZ

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-540-3083	503-589-1338	503-871-5366	503-363-1198	

Dispatch Contact Name: JOSE PORFIRIO/JUAN RAMIREZ

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-580-0964	503-551-8701	503-551-8701	503-363-1198	

8. If commissary is available at fire camps, Use by Contractor's Personnel is:
☐ **AUTHORIZED** ☒ **NOT AUTHORIZED by CONTRACTOR**

9. CONTRACTOR OR AUTHORIZED AGENT (SIGN HERE)
THERESA ORTIZ /S/

10. DATE 6/26/08

11. CONTRACTOR OR AUTHORIZED AGENT'S NAME (PRINT HERE)
THERESA ORTIZ

12. ODF CONTRACT MANAGER SIGNATURE
Burke Mayer /S/

13. DATE 6/27/08

14. ODF CONTRACT MANAGER'S NAME AND TITLE
Burke Mayer, Interim Chief Procurement Officer

15. AUTHORIZED USA CONTRACTING OFFICER SIGNATURE
Madeline Small for Steve Shapiro /S/

16. DATE 6/27/08

17. AUTHORIZED USA CONTRACTING OFFICER'S NAME AND TITLE
Steve Shapiro, Contracting Officer

OREGON DEPARTMENT OF FORESTRY
INTERAGENCY FIREFIGHTING CREW AGREEMENT
AGREEMENT AWARD SUMMARY - CREWS

1. AGREEMENT NUMBER: IFCA07148

BLM NUMBER: HAE076148

AGREEMENT NO. MUST APPEAR ON ALL PAPERS RELATING TO THIS AGREEMENT

2. EFFECTIVE DATES:
a. Beginning 2008 Agreement Period
b. Ending October 31, 2008

3. BUSINESS INFORMATION:

P R REFORESTATION INC
288 44TH AVE NE
SALEM, OR 97301

4. DESIGNATED DISPATCH LOCATION ADDRESS: ***(location of Crew where hired)***

3220-3230 PORTLAND RD NE
SALEM, OR 97305

a. FEIN: 90-0115058
b. Business Phone: 503-363-2489
c. DUNS: 187662726

d. Business Owner: JOSE PORFIRIO RAMIREZ SALDANA

5. NUMBER OF 20 PERSON CREWS FOR DESIGNATED DISPATCH LOCATION: 1

6. HOURLY RATE: $$45.00

7. Dispatch Contact Name: TERESA ORTIZ

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-540-3083	503-589-1338	503-871-5366	503-363-1198	

Dispatch Contact Name: JOSE PORFIRIO/JUAN RAMIREZ

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-580-0964	503-551-8701	503-551-8701	503-363-1198	

8. If commissary is available at fire camps, Use by Contractor's Personnel is:
☐ **AUTHORIZED** ☒ **NOT AUTHORIZED by CONTRACTOR**

9. CONTRACTOR OR AUTHORIZED AGENT (SIGN HERE)
THERESA ORTIZ /S/

10. DATE 6/26/08

11. CONTRACTOR OR AUTHORIZED AGENT'S NAME (PRINT HERE)
THERESA ORTIZ

12. ODF CONTRACT MANAGER SIGNATURE
Burke Mayer /S/

13. DATE 6/27/08

14. ODF CONTRACT MANAGER'S NAME AND TITLE
Burke Mayer, Interim Chief Procurement Officer

15. AUTHORIZED USA CONTRACTING OFFICER SIGNATURE
Madeline Small for Steve Shapiro /S/

16. DATE 6/27/08

17. AUTHORIZED USA CONTRACTING OFFICER'S NAME AND TITLE
Steve Shapiro, Contracting Officer

OREGON DEPARTMENT OF FORESTRY
INTERAGENCY FIREFIGHTING CREW AGREEMENT
AGREEMENT AWARD SUMMARY - CREWS

1. AGREEMENT NUMBER: IFCA07149

BLM NUMBER: HAE076149

AGREEMENT NO. MUST APPEAR ON ALL PAPERS RELATING TO THIS AGREEMENT

2. EFFECTIVE DATES:
a. Beginning 2008 Agreement Period
b. Ending October 31, 2008

3. BUSINESS INFORMATION:

P R REFORESTATION INC
288 44TH AVE NE
SALEM, OR 97301

4. DESIGNATED DISPATCH LOCATION ADDRESS: ***(location of Crew where hired)***

3220-3230 PORTLAND RD NE
SALEM, OR 97305

a. FEIN: 90-0115058
b. Business Phone: 503-363-2489
c. DUNS: 187662726

d. Business Owner: JOSE PORFIRIO RAMIREZ SALDANA

5. NUMBER OF 20 PERSON CREWS FOR DESIGNATED DISPATCH LOCATION: 1

6. HOURLY RATE: $$45.00

7. Dispatch Contact Name: TERESA ORTIZ

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-540-3083	503-589-1338	503-871-5366	503-363-1198	

Dispatch Contact Name: JOSE PORFIRIO/JUAN RAMIREZ

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-580-0964	503-551-8701	503-551-8701	503-363-1198	

8. If commissary is available at fire camps, Use by Contractor's Personnel is:
☐ **AUTHORIZED** ☒ **NOT AUTHORIZED by CONTRACTOR**

9. CONTRACTOR OR AUTHORIZED AGENT (SIGN HERE)
THERESA ORTIZ /S/

10. DATE 6/26/08

11. CONTRACTOR OR AUTHORIZED AGENT'S NAME (PRINT HERE)
THERESA ORTIZ

12. ODF CONTRACT MANAGER SIGNATURE
Burke Mayer /S/

13. DATE 6/27/08

14. ODF CONTRACT MANAGER'S NAME AND TITLE
Burke Mayer, Interim Chief Procurement Officer

15. AUTHORIZED USA CONTRACTING OFFICER SIGNATURE
Madeline Small for Steve Shapiro /S/

16. DATE 6/27/08

17. AUTHORIZED USA CONTRACTING OFFICER'S NAME AND TITLE
Steve Shapiro, Contracting Officer

OREGON DEPARTMENT OF FORESTRY
INTERAGENCY FIREFIGHTING CREW AGREEMENT
AGREEMENT AWARD SUMMARY - CREWS

1. AGREEMENT NUMBER: IFCA07150

BLM NUMBER: HAE076150

AGREEMENT NO. MUST APPEAR ON ALL PAPERS RELATING TO THIS AGREEMENT

2. EFFECTIVE DATES:
a. Beginning 2008 Agreement Period
b. Ending October 31, 2008

3. BUSINESS INFORMATION:

P R REFORESTATION INC
288 44TH AVE NE
SALEM, OR 97301

4. DESIGNATED DISPATCH LOCATION ADDRESS: ***(location of Crew where hired)***

3220-3230 PORTLAND RD NE
SALEM, OR 97305

a. FEIN: 90-0115058
b. Business Phone: 503-363-2489
c. DUNS: 187662726

d. Business Owner:

JOSE PORFIRIO RAMIREZ SALDANA

5. NUMBER OF 20 PERSON CREWS FOR DESIGNATED DISPATCH LOCATION: 1

6. HOURLY RATE: $$45.00

7. Dispatch Contact Name: TERESA ORTIZ

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-540-3083	503-589-1338	503-871-5366	503-363-1198	

Dispatch Contact Name: JOSE PORFIRIO/JUAN RAMIREZ

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-580-0964	503-551-8701	503-551-8701	503-363-1198	

8. If commissary is available at fire camps, Use by Contractor's Personnel is:
☐ **AUTHORIZED** ☒ **NOT AUTHORIZED by CONTRACTOR**

9. CONTRACTOR OR AUTHORIZED AGENT (SIGN HERE)
THERESA ORTIZ /S/

10. DATE
6/26/08

11. CONTRACTOR OR AUTHORIZED AGENT'S NAME (PRINT HERE)
THERESA ORTIZ

12. ODF CONTRACT MANAGER SIGNATURE
Burke Mayer /S/

13. DATE
6/27/08

14. ODF CONTRACT MANAGER'S NAME AND TITLE

Burke Mayer, Interim Chief Procurement Officer

15. AUTHORIZED USA CONTRACTING OFFICER SIGNATURE
Madeline Small for Steve Shapiro /S/

16. DATE
6/27/08

17. AUTHORIZED USA CONTRACTING OFFICER'S NAME AND TITLE

Steve Shapiro, Contracting Officer

OREGON DEPARTMENT OF FORESTRY
INTERAGENCY FIREFIGHTING CREW AGREEMENT
AGREEMENT AWARD SUMMARY - CREWS

1. AGREEMENT NUMBER: IFCA07151

BLM NUMBER: HAE076151

AGREEMENT NO. MUST APPEAR ON ALL PAPERS RELATING TO THIS AGREEMENT

2. EFFECTIVE DATES:
a. Beginning 2008 Agreement Period
b. Ending October 31, 2008

3. BUSINESS INFORMATION:

P R REFORESTATION INC
288 44TH AVE NE
SALEM, OR 97301

4. DESIGNATED DISPATCH LOCATION ADDRESS: ***(location of Crew where hired)***

3220-3230 PORTLAND RD NE
SALEM, OR 97305

a. FEIN: 90-0115058
b. Business Phone: 503-363-2489
c. DUNS: 187662726

d. Business Owner:

JOSE PORFIRIO RAMIREZ SALDANA

5. NUMBER OF 20 PERSON CREWS FOR DESIGNATED DISPATCH LOCATION: 1

6. HOURLY RATE: $$45.00

7. Dispatch Contact Name: TERESA ORTIZ

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-540-3083	503-589-1338	503-871-5366	503-363-1198	

Dispatch Contact Name: JOSE PORFIRIO/JUAN RAMIREZ

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-580-0964	503-551-8701	503-551-8701	503-363-1198	

8. If commissary is available at fire camps, Use by Contractor's Personnel is:
☐ **AUTHORIZED** ☒ **NOT AUTHORIZED by CONTRACTOR**

9. CONTRACTOR OR AUTHORIZED AGENT (SIGN HERE)
THERESA ORTIZ /S/

10. DATE
6/26/08

11. CONTRACTOR OR AUTHORIZED AGENT'S NAME (PRINT HERE)
THERESA ORTIZ

12. ODF CONTRACT MANAGER SIGNATURE
Burke Mayer /S/

13. DATE
6/27/08

14. ODF CONTRACT MANAGER'S NAME AND TITLE

Burke Mayer, Interim Chief Procurement Officer

15. AUTHORIZED USA CONTRACTING OFFICER SIGNATURE
Madeline Small for Steve Shapiro /S/

16. DATE
6/27/08

17. AUTHORIZED USA CONTRACTING OFFICER'S NAME AND TITLE

Steve Shapiro, Contracting Officer

~~See next page~~

OREGON DEPARTMENT OF FORESTRY
INTERAGENCY FIREFIGHTING CREW AGREEMENT
AGREEMENT AWARD SUMMARY - CREWS

1. AGREEMENT NUMBER: IFCA07161

BLM NUMBER: HAE076161

AGREEMENT NO. MUST APPEAR ON ALL PAPERS RELATING TO THIS AGREEMENT

2. EFFECTIVE DATES:
a. Beginning
2008 Agreement Period

b. Ending
September 30, 2009

3. BUSINESS INFORMATION:

PACIFIC COAST CONTRACTING INC
PO BOX 3254
CENTRAL POINT, OR 97502

4. DESIGNATED DISPATCH LOCATION ADDRESS: *(location of Crew where hired)*

5041 UPTON RD
CENTRAL POINT, OR 97502

a. FEIN: 20-1973057

b. Business Phone: 541-664-2982

c. DUNS: 123880648

d. Business Owner:

JUAN BAUTISTA

5. NUMBER OF 20 PERSON CREWS FOR DESIGNATED DISPATCH LOCATION: 1

6. HOURLY RATE: $34.00

7. Dispatch Contact Name: JUAN BAUTISTA

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
541-664-2982	541-941-3165	541-941-3165	541-664-9282	

Dispatch Contact Name: FRANCISCO OROZCO

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
541-664-2982	541-621-9697	541-621-9697	541-664-9282	

8. If commissary is available at fire camps, Use by Contractor's Personnel is:
☐ AUTHORIZED ☐ NOT AUTHORIZED by CONTRACTOR

9. CONTRACTOR OR AUTHORIZED AGENT (SIGN HERE)
JUAN BAUTISTA /S/

10. DATE
6/30/08

11. CONTRACTOR OR AUTHORIZED AGENT'S NAME (PRINT HERE)
JUAN BAUTISTA

12. ODF CONTRACT MANAGER SIGNATURE
BURKE MAYER /S/

13. DATE
7/02/08

14. ODF CONTRACT MANAGER'S NAME AND TITLE

Burke Mayer, Interim Chief Procurement Officer

15. AUTHORIZED USA CONTRACTING OFFICER SIGNATURE
STEVE SHAPIRO /S/

16. DATE
7/02/08

17. AUTHORIZED USA CONTRACTING OFFICER'S NAME AND TITLE

Steve Shapiro, Contracting Officer

OREGON DEPARTMENT OF FORESTRY
INTERAGENCY FIREFIGHTING CREW AGREEMENT
AGREEMENT AWARD SUMMARY - CREWS

1. AGREEMENT NUMBER: IFCA07161
BLM NUMBER: HAE078161
AGREEMENT NO. MUST APPEAR ON ALL PAPERS RELATING TO THIS AGREEMENT

2. EFFECTIVE DATES:
a. Beginning 2008 Agreement Period
b. Ending September 30, 2009

3. BUSINESS INFORMATION:
PACIFIC COAST CONTRACTING INC
PO BOX 3254
CENTRAL POINT, OR 97502

4. DESIGNATED DISPATCH LOCATION ADDRESS: *(location of Crew where hired)*
5041 UPTON RD
CENTRAL POINT, OR 97502

a. FEIN: 20-1973087
b. Business Phone: 541-664-2882
c. DUNS: 123660649
d. Business Owner: JUAN BAUTISTA
e. NUMBER OF 20 PERSON CREWS FOR DESIGNATED DISPATCH LOCATION: 1
f. HOURLY RATE: $$84.00

7. Dispatch Contact Name: JUAN BAUTISTA

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
541-664-2882	541-941-3165	541-941-3165	541-664-9282	

Dispatch Contact Name: FRANCISCO OROZCO

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
541-664-2882	541-621-9697	541-621-9697	541-664-9282	

8. If commissary is available at fire camps, Use by Contractor's Personnel is:
☒ AUTHORIZED ☐ NOT AUTHORIZED by CONTRACTOR

9. CONTRACTOR OR AUTHORIZED AGENT (SIGN HERE): Juan Bautista
10. DATE: 6-30-08

11. CONTRACTOR OR AUTHORIZED AGENT'S NAME (PRINT HERE): Juan Bautista

12. ODF CONTRACT MANAGER SIGNATURE: Burke Mayer
13. DATE: 7/2/08

14. ODF CONTRACT MANAGER'S NAME AND TITLE
Burke Mayer, Interim Chief Procurement Officer

15. AUTHORIZED USA CONTRACTING OFFICER SIGNATURE: Steve Shapiro
16. DATE: 7/2/08

17. AUTHORIZED USA CONTRACTING OFFICER'S NAME AND TITLE
Steve Shapiro, Contracting Officer

OREGON DEPARTMENT OF FORESTRY
INTERAGENCY FIREFIGHTING CREW AGREEMENT
AGREEMENT AWARD SUMMARY - CREWS

1. AGREEMENT NUMBER: IFCA07140 **BLM NUMBER:** HAE076140 AGREEMENT NO. MUST APPEAR ON ALL PAPERS RELATING TO THIS AGREEMENT	**2. EFFECTIVE DATES:** **a. Beginning** 2008 Agreement Period	**b. Ending** September 30, 2009

3. BUSINESS INFORMATION: PACIFIC OASIS INC 1575 E NEVADA ST ASHLAND, OR 97520		**4. DESIGNATED DISPATCH LOCATION ADDRESS:** ***(location of Crew where hired)*** 1575 EAST NEVADA ST ASHLAND, OR 97520
a. FEIN: 91-1855038	**b. Business Phone:** 541-821-5429	**c. DUNS:** 942259896
d. Business Owner: STEPHEN DODDS		**5. NUMBER OF 20 PERSON CREWS FOR DESIGNATED DISPATCH LOCATION:** 1
		6. HOURLY RATE: $$39.00

7. Dispatch Contact Name: REBEKAH DODDS

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
541-821-1410	541-552-1919	541-821-5429	541-482-1956	541-488-4287

Dispatch Contact Name: PETER HAWLEY

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
541-821-1410	541-821-5429	541-944-3230	541-482-1956	541-488-4287

8. If commissary is available at fire camps, Use by Contractor's Personnel is:
☐ **AUTHORIZED** ☐ **NOT AUTHORIZED by CONTRACTOR**

9. CONTRACTOR OR AUTHORIZED AGENT (SIGN HERE) STEPHEN DODDS /S/	**10. DATE** 6/26/08
11. CONTRACTOR OR AUTHORIZED AGENT'S NAME (PRINT HERE) STEPHEN DODDS	
12. ODF CONTRACT MANAGER SIGNATURE Burke Mayer /S/	**13. DATE** 6/27/08
14. ODF CONTRACT MANAGER'S NAME AND TITLE Burke Mayer, Interim Chief Procurement Officer	
15. AUTHORIZED USA CONTRACTING OFFICER SIGNATURE Madeline Small for Steve Shapiro /S/	**16. DATE** 6/27/08
17. AUTHORIZED USA CONTRACTING OFFICER'S NAME AND TITLE Steve Shapiro, Contracting Officer	

OREGON DEPARTMENT OF FORESTRY
INTERAGENCY FIREFIGHTING CREW AGREEMENT
AGREEMENT AWARD SUMMARY - CREWS

1. AGREEMENT NUMBER: IFCA07134

BLM NUMBER: HAE076134

AGREEMENT NO. MUST APPEAR ON ALL PAPERS RELATING TO THIS AGREEMENT

2. EFFECTIVE DATES:
a. Beginning 2008 Agreement Period
b. Ending September 30, 2009

3. BUSINESS INFORMATION:

PONDEROSA REFORESTATION INC
PO BOX 1067
MEDFORD, OR 97501

4. DESIGNATED DISPATCH LOCATION ADDRESS: ***(location of Crew where hired)***

369 OAK GROVE RD
MEDFORD, OR 97501

a. FEIN: 93-1013177
b. Business Phone: 541-601-1977
c. DUNS: 803684646

d. Business Owner: JUAN BENCOMO

5. NUMBER OF 20 PERSON CREWS FOR DESIGNATED DISPATCH LOCATION: 1

6. HOURLY RATE: $$40.00

7. Dispatch Contact Name: JUAN BENCOMO

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
541-601-1977	541-601-1977	541-601-1977	541-857-0267	

Dispatch Contact Name: OSWALDO BENCOMO

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
541-941-2210	541-941-2210	541-941-2210	541-857-0267	

8. If commissary is available at fire camps, Use by Contractor's Personnel is:
☒ **AUTHORIZED** ☐ **NOT AUTHORIZED by CONTRACTOR**

9. CONTRACTOR OR AUTHORIZED AGENT (SIGN HERE)
Juan Bencomo /S/

10. DATE
6/26/08

11. CONTRACTOR OR AUTHORIZED AGENT'S NAME (PRINT HERE)
Juan Bencomo

12. ODF CONTRACT MANAGER SIGNATURE
Burke Mayer /S/

13. DATE
6/27/08

14. ODF CONTRACT MANAGER'S NAME AND TITLE
Burke Mayer, Interim Chief Procurement Officer

15. AUTHORIZED USA CONTRACTING OFFICER SIGNATURE
Madeline Small for Steve Shapiro /S/

16. DATE
6/27/08

17. AUTHORIZED USA CONTRACTING OFFICER'S NAME AND TITLE
Steve Shapiro, Contracting Officer

OREGON DEPARTMENT OF FORESTRY
INTERAGENCY FIREFIGHTING CREW AGREEMENT
AGREEMENT AWARD SUMMARY - CREWS

1. AGREEMENT NUMBER: IFCA07135

BLM NUMBER: HAE076135

AGREEMENT NO. MUST APPEAR ON ALL PAPERS RELATING TO THIS AGREEMENT

2. EFFECTIVE DATES:
a. Beginning 2008 Agreement Period
b. Ending September 30, 2009

3. BUSINESS INFORMATION:

PONDEROSA REFORESTATION INC
PO BOX 1067
MEDFORD, OR 97501

4. DESIGNATED DISPATCH LOCATION ADDRESS: ***(location of Crew where hired)***

369 OAK GROVE RD
MEDFORD, OR 97501

a. FEIN: 93-1013177
b. Business Phone: 541-601-1977
c. DUNS: 803684646

d. Business Owner: JUAN BENCOMO

5. NUMBER OF 20 PERSON CREWS FOR DESIGNATED DISPATCH LOCATION: 1

6. HOURLY RATE: $$40.00

7. Dispatch Contact Name: JUAN BENCOMO

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
541-601-1977	541-601-1977	541-601-1977	541-857-0267	

Dispatch Contact Name: OSWALDO BENCOMO

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
541-941-2210	541-941-2210	541-941-2210	541-857-0267	

8. If commissary is available at fire camps, Use by Contractor's Personnel is:
☒ **AUTHORIZED** ☐ **NOT AUTHORIZED by CONTRACTOR**

9. CONTRACTOR OR AUTHORIZED AGENT (SIGN HERE)
Juan Bencomo /S/

10. DATE 6/26/08

11. CONTRACTOR OR AUTHORIZED AGENT'S NAME (PRINT HERE)
Juan Bencomo

12. ODF CONTRACT MANAGER SIGNATURE
Burke Mayer /S/

13. DATE 6/27/08

14. ODF CONTRACT MANAGER'S NAME AND TITLE
Burke Mayer, Interim Chief Procurement Officer

15. AUTHORIZED USA CONTRACTING OFFICER SIGNATURE
Madeline Small for Steve Shapiro /S/

16. DATE 6/27/08

17. AUTHORIZED USA CONTRACTING OFFICER'S NAME AND TITLE
Steve Shapiro, Contracting Officer

OREGON DEPARTMENT OF FORESTRY
INTERAGENCY FIREFIGHTING CREW AGREEMENT
AGREEMENT AWARD SUMMARY - CREWS

1. AGREEMENT NUMBER: IFCA07155

BLM NUMBER: HAE076155

AGREEMENT NO. MUST APPEAR ON ALL PAPERS RELATING TO THIS AGREEMENT

2. EFFECTIVE DATES:
a. Beginning 2008 Agreement Period
b. Ending September 30, 2009

3. BUSINESS INFORMATION:

R & R CONTRACTING INC
4313 RIDGEWAY DR SE
TURNER, OR 97392

4. DESIGNATED DISPATCH LOCATION ADDRESS: ***(location of Crew where hired)***

10215 RICKREALL RD
RICKREALL, OR 97371

a. FEIN: 93-1291645
b. Business Phone: 503-743-2720
c. DUNS: 157630315

d. Business Owner: AMADOR ROCHA G

5. NUMBER OF 20 PERSON CREWS FOR DESIGNATED DISPATCH LOCATION: 1

6. HOURLY RATE: $$45.00

7. Dispatch Contact Name: AMADOR ROCHA G

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-559-5689	503-743-2720	503-559-5689	503-743-9134	

Dispatch Contact Name: FEDERICO ROCHA F

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-559-4973	503-769-2947	503-559-4973	503-749-4040	

8. If commissary is available at fire camps, Use by Contractor's Personnel is:
☒ **AUTHORIZED** ☐ **NOT AUTHORIZED by CONTRACTOR**

9. CONTRACTOR OR AUTHORIZED AGENT (SIGN HERE)
AMADOR ROCHA G /S/

10. DATE 6/26/08

11. CONTRACTOR OR AUTHORIZED AGENT'S NAME (PRINT HERE)
AMADOR ROCHA G

12. ODF CONTRACT MANAGER SIGNATURE
Burke Mayer /S/

13. DATE 6/27/08

14. ODF CONTRACT MANAGER'S NAME AND TITLE
Burke Mayer, Interim Chief Procurement Officer

15. AUTHORIZED USA CONTRACTING OFFICER SIGNATURE
Madeline Small for Steve Shapiro /S/

16. DATE 6/27/08

17. AUTHORIZED USA CONTRACTING OFFICER'S NAME AND TITLE
Steve Shapiro, Contracting Officer

OREGON DEPARTMENT OF FORESTRY
INTERAGENCY FIREFIGHTING CREW AGREEMENT
AGREEMENT AWARD SUMMARY - CREWS

1. **AGREEMENT NUMBER:** IFCA07156 **BLM NUMBER:** HAE076156 AGREEMENT NO. MUST APPEAR ON ALL PAPERS RELATING TO THIS AGREEMENT	2. **EFFECTIVE DATES:** a. **Beginning** 2008 Agreement Period	b. **Ending** September 30, 2009
3. **BUSINESS INFORMATION:** R & R CONTRACTING INC 4313 RIDGEWAY DR SE TURNER, OR 97392	4. **DESIGNATED DISPATCH LOCATION ADDRESS:** ***(location of Crew where hired)*** 10215 RICKREALL RD RICKREALL, OR 97371	
a. **FEIN:** 93-1291645	b. **Business Phone:** 503-743-2720	c. **DUNS:** 157630315
d. **Business Owner:** AMADOR ROCHA G	5. **NUMBER OF 20 PERSON CREWS FOR DESIGNATED DISPATCH LOCATION:** 1	6. **HOURLY RATE:** $$45.00

7. **Dispatch Contact Name:** AMADOR ROCHA G

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-559-5689	503-743-2720	503-559-5689	503-743-9134	

Dispatch Contact Name: FEDERICO ROCHA F

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-559-4973	503-769-2947	503-559-4973	503-749-4040	

8. **If commissary is available at fire camps, Use by Contractor's Personnel is:**
☒ **AUTHORIZED** ☐ **NOT AUTHORIZED by CONTRACTOR**

9. **CONTRACTOR OR AUTHORIZED AGENT (SIGN HERE)** AMADOR ROCHA G /S/	10. **DATE** 6/26/08
11. **CONTRACTOR OR AUTHORIZED AGENT'S NAME (PRINT HERE)** AMADOR ROCHA	
12. **ODF CONTRACT MANAGER SIGNATURE** Burke Mayer /S/	13. **DATE** 6/27/08
14. **ODF CONTRACT MANAGER'S NAME AND TITLE** Burke Mayer, Interim Chief Procurement Officer	
15. **AUTHORIZED USA CONTRACTING OFFICER SIGNATURE** Madeline Small for Steve Shapiro /S/	16. **DATE** 6/27/08
17. **AUTHORIZED USA CONTRACTING OFFICER'S NAME AND TITLE** Steve Shapiro, Contracting Officer	

OREGON DEPARTMENT OF FORESTRY
INTERAGENCY FIREFIGHTING CREW AGREEMENT
AGREEMENT AWARD SUMMARY - CREWS

1. AGREEMENT NUMBER: IFCA07157

BLM NUMBER: HAE076157

AGREEMENT NO. MUST APPEAR ON ALL PAPERS RELATING TO THIS AGREEMENT

2. EFFECTIVE DATES:
a. Beginning 2008 Agreement Period
b. Ending September 30, 2009

3. BUSINESS INFORMATION:

R & R CONTRACTING INC
4313 RIDGEWAY DR SE
TURNER, OR 97392

4. DESIGNATED DISPATCH LOCATION ADDRESS: ***(location of Crew where hired)***

360 W ROLLING HILLS DR
EAGLE POINT, OR 97524

a. FEIN: 93-1291645
b. Business Phone: 503-743-2720
c. DUNS: 157630315

d. Business Owner: AMADOR ROCHA G

5. NUMBER OF 20 PERSON CREWS FOR DESIGNATED DISPATCH LOCATION: 1

6. HOURLY RATE: $$45.00

7. Dispatch Contact Name: AMADOR ROCHA G

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-559-5689	503-743-2720	503-559-5689	503-743-9134	

Dispatch Contact Name: FEDERICO ROCHA F

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-559-4973	503-769-2947	503-559-4973	503-749-4040	

8. If commissary is available at fire camps, Use by Contractor's Personnel is:
☒ **AUTHORIZED** ☐ **NOT AUTHORIZED by CONTRACTOR**

9. CONTRACTOR OR AUTHORIZED AGENT (SIGN HERE)
AMADOR ROCHA G /S/

10. DATE 6/26/08

11. CONTRACTOR OR AUTHORIZED AGENT'S NAME (PRINT HERE)
AMADOR ROCHA

12. ODF CONTRACT MANAGER SIGNATURE
Burke Mayer /S/

13. DATE 6/27/08

14. ODF CONTRACT MANAGER'S NAME AND TITLE
Burke Mayer, Interim Chief Procurement Officer

15. AUTHORIZED USA CONTRACTING OFFICER SIGNATURE
Madeline Small for Steve Shapiro /S/

16. DATE 6/27/08

17. AUTHORIZED USA CONTRACTING OFFICER'S NAME AND TITLE
Steve Shapiro, Contracting Officer

OREGON DEPARTMENT OF FORESTRY
INTERAGENCY FIREFIGHTING CREW AGREEMENT
AGREEMENT AWARD SUMMARY - CREWS

1. **AGREEMENT NUMBER:** IFCA07133 **BLM NUMBER:** HAE076133 AGREEMENT NO. MUST APPEAR ON ALL PAPERS RELATING TO THIS AGREEMENT	2. **EFFECTIVE DATES:** a. **Beginning** 2008 Agreement Period	b. **Ending** September 30, 2009
3. **BUSINESS INFORMATION:** SUMMITT FORESTS INC 1257 SISKIYOU BLVD PMB #218 ASHLAND, OR 97520	4. **DESIGNATED DISPATCH LOCATION ADDRESS:** *(location of Crew where hired)* 5065 S PACIFIC HWY PHOENIX, OR 97535	

a. **FEIN:** 680197970	b. **Business Phone:** 541-535-8920	c. **DUNS:** 608261764
d. **Business Owner:** SCOTT NELSON	5. **NUMBER OF 20 PERSON CREWS FOR DESIGNATED DISPATCH LOCATION:** 1	6. **HOURLY RATE:** $$39.00

7. **Dispatch Contact Name:** SCOTT NELSON

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
541-535-8920	541-535-8920	541-944-0260	541-535-9970	

Dispatch Contact Name: DINAH WALKER

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
541-535-8920	541-535-8920	541-621-3358	541-535-9970	

8. **If commissary is available at fire camps, Use by Contractor's Personnel is:**
☐ **AUTHORIZED** ☒ **NOT AUTHORIZED by CONTRACTOR**

9. **CONTRACTOR OR AUTHORIZED AGENT (SIGN HERE)** /S/ SCOTT NELSON	10. **DATE** 6/27/08
11. **CONTRACTOR OR AUTHORIZED AGENT'S NAME (PRINT HERE)** SCOTT NELSON	
12. **ODF CONTRACT MANAGER SIGNATURE** /S/ BURKE MAYER	13. **DATE** 7/2/08
14. **ODF CONTRACT MANAGER'S NAME AND TITLE** Burke Mayer, Interim Chief Procurement Officer	
15. **AUTHORIZED USA CONTRACTING OFFICER SIGNATURE** /S/ STEVE SHAPIRO	16. **DATE** 7/2/08
17. **AUTHORIZED USA CONTRACTING OFFICER'S NAME AND TITLE** Steve Shapiro, Contracting Officer	

OREGON DEPARTMENT OF FORESTRY
INTERAGENCY FIREFIGHTING CREW AGREEMENT
AGREEMENT AWARD SUMMARY - CREWS

1. AGREEMENT NUMBER: IFCA07144

BLM NUMBER: HAE076144

AGREEMENT NO. MUST APPEAR ON ALL PAPERS RELATING TO THIS AGREEMENT

2. EFFECTIVE DATES:
a. Beginning 2008 Agreement Period
b. Ending September 30, 2009

3. BUSINESS INFORMATION:

TOM FERY FARM INC
PO BOX 361
STAYTON, OR 97383

4. DESIGNATED DISPATCH LOCATION ADDRESS: ***(location of Crew where hired)***

11528 STAYTON RD
STAYTON, OR 97383

a. FEIN: 93-1262675
b. Business Phone: 503-949-9090
c. DUNS: 94-425-3442

d. Business Owner: THOMAS FERY

5. NUMBER OF 20 PERSON CREWS FOR DESIGNATED DISPATCH LOCATION: 1

6. HOURLY RATE: $$40.00

7. Dispatch Contact Name: THOMAS FERY

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-949-9090	503-769-7496	503-949-9090	503-769-8496	503-949-3111

Dispatch Contact Name: ROBIN WINSTON

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
971-275-6137	503-678-2512	971-275-6137	503-678-2528	

8. If commissary is available at fire camps, Use by Contractor's Personnel is:
☒ **AUTHORIZED** ☐ **NOT AUTHORIZED by CONTRACTOR**

9. CONTRACTOR OR AUTHORIZED AGENT (SIGN HERE)
THOMAS FERY /S/

10. DATE
6/26/08

11. CONTRACTOR OR AUTHORIZED AGENT'S NAME (PRINT HERE)
THOMAS FERY

12. ODF CONTRACT MANAGER SIGNATURE
Burke Mayer /S/

13. DATE
6/27/08

14. ODF CONTRACT MANAGER'S NAME AND TITLE

Burke Mayer, Interim Chief Procurement Officer

15. AUTHORIZED USA CONTRACTING OFFICER SIGNATURE
Madeline Small for Steve Shapiro /S/

16. DATE
6/27/08

17. AUTHORIZED USA CONTRACTING OFFICER'S NAME AND TITLE

Steve Shapiro, Contracting Officer

OREGON DEPARTMENT OF FORESTRY
INTERAGENCY FIREFIGHTING CREW AGREEMENT
AGREEMENT AWARD SUMMARY - CREWS

1. AGREEMENT NUMBER: IFCA07145

BLM NUMBER: HAE076145

AGREEMENT NO. MUST APPEAR ON ALL PAPERS RELATING TO THIS AGREEMENT

2. EFFECTIVE DATES:
a. Beginning 2008 Agreement Period
b. Ending September 30, 2009

3. BUSINESS INFORMATION:

TOM FERY FARM INC
PO BOX 361
STAYTON, OR 97383

4. DESIGNATED DISPATCH LOCATION ADDRESS: ***(location of Crew where hired)***

11528 STAYTON RD
STAYTON, OR 97383

a. FEIN: 93-1262675
b. Business Phone: 503-949-9090
c. DUNS: 94-425-3442

d. Business Owner: THOMAS FERY

5. NUMBER OF 20 PERSON CREWS FOR DESIGNATED DISPATCH LOCATION: 1

6. HOURLY RATE: $$40.00

7. Dispatch Contact Name: THOMAS FERY

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-949-9090	503-769-7496	503-949-9090	503-769-8496	503-949-3111

Dispatch Contact Name: ROBIN WINSTON

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
971-275-6137	503-678-2512	971-275-6137	503-678-2528	

8. If commissary is available at fire camps, Use by Contractor's Personnel is:
☒ **AUTHORIZED** ☐ **NOT AUTHORIZED by CONTRACTOR**

9. CONTRACTOR OR AUTHORIZED AGENT (SIGN HERE)
THOMAS FERY /S/

10. DATE 6/26/08

11. CONTRACTOR OR AUTHORIZED AGENT'S NAME (PRINT HERE)
THOMAS FERY

12. ODF CONTRACT MANAGER SIGNATURE
Burke Mayer /S/

13. DATE 6/27/08

14. ODF CONTRACT MANAGER'S NAME AND TITLE
Burke Mayer, Interim Chief Procurement Officer

15. AUTHORIZED USA CONTRACTING OFFICER SIGNATURE
Madeline Small for Steve Shapiro /S/

16. DATE 6/27/08

17. AUTHORIZED USA CONTRACTING OFFICER'S NAME AND TITLE
Steve Shapiro, Contracting Officer

OREGON DEPARTMENT OF FORESTRY
INTERAGENCY FIREFIGHTING CREW AGREEMENT
AGREEMENT AWARD SUMMARY - CREWS

1. **AGREEMENT NUMBER:** IFCA07136 **BLM NUMBER:** HAE076136 AGREEMENT NO. MUST APPEAR ON ALL PAPERS RELATING TO THIS AGREEMENT	2. **EFFECTIVE DATES:** a. **Beginning** 2008 Agreement Period	b. **Ending** October 31, 2008
3. **BUSINESS INFORMATION:** TORRES CONTRACTING INC PO BOX 7434 SALEM, OR 97303	4. **DESIGNATED DISPATCH LOCATION ADDRESS:** ***(location of Crew where hired)*** 4023 SALEM INDUSTRIAL DR NE SALEM, OR 97303	
a. **FEIN:** 93-1283943	b. **Business Phone:** 503-393-7287	c. **DUNS:** 094329492
d. **Business Owner:** DOLORES TORRES	5. **NUMBER OF 20 PERSON CREWS FOR DESIGNATED DISPATCH LOCATION:** 1	6. **HOURLY RATE:** $$44.00

7. **Dispatch Contact Name:** DOLORES TORRES

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-463-1574	503-463-1574	503-559-5021	503-393-2999	

Dispatch Contact Name: ANNA OR RICARDO TORRES

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-463-1574	503-463-1574	503-551-1999	503-393-2999	

8. **If commissary is available at fire camps, Use by Contractor's Personnel is:**
☐ **AUTHORIZED** ☐ **NOT AUTHORIZED by CONTRACTOR**

9. **CONTRACTOR OR AUTHORIZED AGENT (SIGN HERE)** DOLORES TORRES /S/	10. **DATE** 6/26/08
11. **CONTRACTOR OR AUTHORIZED AGENT'S NAME (PRINT HERE)** DOLORES TORRES	
12. **ODF CONTRACT MANAGER SIGNATURE** Burke Mayer /S/	13. **DATE** 6/27/08
14. **ODF CONTRACT MANAGER'S NAME AND TITLE** Burke Mayer, Interim Chief Procurement Officer	
15. **AUTHORIZED USA CONTRACTING OFFICER SIGNATURE** Madeline Small for Steve Shapiro /S/	16. **DATE** 6/27/08
17. **AUTHORIZED USA CONTRACTING OFFICER'S NAME AND TITLE** Steve Shapiro, Contracting Officer	

OREGON DEPARTMENT OF FORESTRY
INTERAGENCY FIREFIGHTING CREW AGREEMENT
AGREEMENT AWARD SUMMARY - CREWS

1. **AGREEMENT NUMBER:** IFCA07137 **BLM NUMBER:** HAE076137 AGREEMENT NO. MUST APPEAR ON ALL PAPERS RELATING TO THIS AGREEMENT	2. **EFFECTIVE DATES:** a. **Beginning** 2008 Agreement Period	b. **Ending** October 31, 2008
3. **BUSINESS INFORMATION:** TORRES CONTRACTING INC PO BOX 7434 SALEM, OR 97303	4. **DESIGNATED DISPATCH LOCATION ADDRESS:** ***(location of Crew where hired)*** 4023 SALEM INDUSTRIAL DR NE SALEM, OR 97303	
a. **FEIN:** 93-1283943	b. **Business Phone:** 503-393-7287	c. **DUNS:** 094329492
d. **Business Owner:** DOLORES TORRES	5. **NUMBER OF 20 PERSON CREWS FOR DESIGNATED DISPATCH LOCATION:** 1	6. **HOURLY RATE:** $$44.00

7. **Dispatch Contact Name:** DOLORES TORRES

a. **Telephone Number:** *(Daytime)*	b. **Telephone Number:** *(Evening)*	c. **Cell Number:**	d. **Fax Number:**	e. **Pager Number:**
503-463-1574	503-463-1574	503-559-5021	503-393-2999	

Dispatch Contact Name: ANNA OR RICARDO TORRES

a. **Telephone Number:** *(Daytime)*	b. **Telephone Number:** *(Evening)*	c. **Cell Number:**	d. **Fax Number:**	e. **Pager Number:**
503-463-1574	503-463-1574	503-551-1999	503-393-2999	

8. **If commissary is available at fire camps, Use by Contractor's Personnel is:**
☐ **AUTHORIZED** ☐ **NOT AUTHORIZED by CONTRACTOR**

9. **CONTRACTOR OR AUTHORIZED AGENT (SIGN HERE)** DOLORES TORRES /S/	10. **DATE** 6/26/08
11. **CONTRACTOR OR AUTHORIZED AGENT'S NAME (PRINT HERE)** DOLORES TORRES	
12. **ODF CONTRACT MANAGER SIGNATURE** Burke Mayer /S/	13. **DATE** 6/27/08
14. **ODF CONTRACT MANAGER'S NAME AND TITLE** Burke Mayer, Interim Chief Procurement Officer	
15. **AUTHORIZED USA CONTRACTING OFFICER SIGNATURE** Madeline Small for Steve Shapiro /S/	16. **DATE** 6/27/08
17. **AUTHORIZED USA CONTRACTING OFFICER'S NAME AND TITLE** Steve Shapiro, Contracting Officer	

OREGON DEPARTMENT OF FORESTRY
INTERAGENCY FIREFIGHTING CREW AGREEMENT
AGREEMENT AWARD SUMMARY - CREWS

1. AGREEMENT NUMBER: IFCA07138

BLM NUMBER: HAE076138

AGREEMENT NO. MUST APPEAR ON ALL PAPERS RELATING TO THIS AGREEMENT

2. EFFECTIVE DATES:
a. Beginning 2008 Agreement Period
b. Ending October 31, 2008

3. BUSINESS INFORMATION:

TORRES CONTRACTING INC
PO BOX 7434
SALEM, OR 97303

4. DESIGNATED DISPATCH LOCATION ADDRESS: ***(location of Crew where hired)***

4023 SALEM INDUSTRIAL DR NE
SALEM, OR 97303

a. FEIN: 93-1283943
b. Business Phone: 503-393-7287
c. DUNS: 094329492

d. Business Owner: DOLORES TORRES

5. NUMBER OF 20 PERSON CREWS FOR DESIGNATED DISPATCH LOCATION: 1

6. HOURLY RATE: $$44.00

7. Dispatch Contact Name: DOLORES TORRES

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-463-1574	503-463-1574	503-559-5021	503-393-2999	

Dispatch Contact Name: ANNA OR RICARDO TORRES

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-463-1574	503-463-1574	503-551-1999	503-393-2999	

8. If commissary is available at fire camps, Use by Contractor's Personnel is:
☐ **AUTHORIZED** ☐ **NOT AUTHORIZED by CONTRACTOR**

9. CONTRACTOR OR AUTHORIZED AGENT (SIGN HERE)
DOLORES TORRES /S/

10. DATE 6/26/08

11. CONTRACTOR OR AUTHORIZED AGENT'S NAME (PRINT HERE)
DOLORES TORRES

12. ODF CONTRACT MANAGER SIGNATURE
Burke Mayer /S/

13. DATE 6/27/08

14. ODF CONTRACT MANAGER'S NAME AND TITLE
Burke Mayer, Interim Chief Procurement Officer

15. AUTHORIZED USA CONTRACTING OFFICER SIGNATURE
Madeline Small for Steve Shapiro /S/

16. DATE 6/27/08

17. AUTHORIZED USA CONTRACTING OFFICER'S NAME AND TITLE
Steve Shapiro, Contracting Officer

OREGON DEPARTMENT OF FORESTRY
INTERAGENCY FIREFIGHTING CREW AGREEMENT
AGREEMENT AWARD SUMMARY - CREWS

1. AGREEMENT NUMBER: IFCA07152

BLM NUMBER: HAE076152

AGREEMENT NO. MUST APPEAR ON ALL PAPERS RELATING TO THIS AGREEMENT

2. EFFECTIVE DATES:
a. Beginning 2008 Agreement Period
b. Ending September 30, 2009

3. BUSINESS INFORMATION:

WILD FIRE SERVICES INC
402 N 41ST ST
YAKIMA, WA 98901

4. DESIGNATED DISPATCH LOCATION ADDRESS: ***(location of Crew where hired)***

105 S NACHES AVE
YAKIMA, WA 98901

a. FEIN: 20-0716073
b. Business Phone: 509-248-6468
c. DUNS: 130478758

d. Business Owner: KARLA LOGOZZO

5. NUMBER OF 20 PERSON CREWS FOR DESIGNATED DISPATCH LOCATION: 1

6. HOURLY RATE: $$36.00

7. Dispatch Contact Name: TIM LOGOZZO

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
509-949-2825	509-248-6468	509-949-2825	509-248-6468	

Dispatch Contact Name: KARLA LOGOZZO

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
509-949-1655	509-248-6468	509-949-1655	509-248-6468	

8. If commissary is available at fire camps, Use by Contractor's Personnel is:
☒ **AUTHORIZED** ☐ **NOT AUTHORIZED by CONTRACTOR**

9. CONTRACTOR OR AUTHORIZED AGENT (SIGN HERE)
KARLA LOGOZZO /S/

10. DATE 6/26/08

11. CONTRACTOR OR AUTHORIZED AGENT'S NAME (PRINT HERE)
KARLA LOGOZZO

12. ODF CONTRACT MANAGER SIGNATURE
Burke Mayer /S/

13. DATE 6/27/08

14. ODF CONTRACT MANAGER'S NAME AND TITLE
Burke Mayer, Interim Chief Procurement Officer

15. AUTHORIZED USA CONTRACTING OFFICER SIGNATURE
Madeline Small for Steve Shapiro /S/

16. DATE 6/27/08

17. AUTHORIZED USA CONTRACTING OFFICER'S NAME AND TITLE
Steve Shapiro, Contracting Officer

OREGON DEPARTMENT OF FORESTRY
INTERAGENCY FIREFIGHTING CREW AGREEMENT
AGREEMENT AWARD SUMMARY - CREWS

1. AGREEMENT NUMBER: IFCA07153

BLM NUMBER: HAE076153

AGREEMENT NO. MUST APPEAR ON ALL PAPERS RELATING TO THIS AGREEMENT

2. EFFECTIVE DATES:
a. Beginning 2008 Agreement Period
b. Ending October 31, 2008

3. BUSINESS INFORMATION:

WOODPECKER
19207 ALLINSON
HUBBARD, OR 97032

4. DESIGNATED DISPATCH LOCATION ADDRESS: ***(location of Crew where hired)***

1185 E COLLEGE ST
MT ANGEL, OR 97062

a. FEIN: 93-1029403
b. Business Phone: 503-678-2474
c. DUNS: 186158440

d. Business Owner: ANDRON USOLTSEFF

5. NUMBER OF 20 PERSON CREWS FOR DESIGNATED DISPATCH LOCATION: 1

6. HOURLY RATE: $$44.75

7. Dispatch Contact Name: ANDRON USOLTSEFF

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
971-338-8226	971-338-8226	503-984-1784	503-678-0203	

Dispatch Contact Name: ROSIE USOLTSEFF

a. Telephone Number: *(Daytime)*	b. Telephone Number: *(Evening)*	c. Cell Number:	d. Fax Number:	e. Pager Number:
503-984-4519	503-984-4519	503-984-4519	503-678-2481	

8. If commissary is available at fire camps, Use by Contractor's Personnel is:
☐ **AUTHORIZED** ☒ **NOT AUTHORIZED by CONTRACTOR**

9. CONTRACTOR OR AUTHORIZED AGENT (SIGN HERE)
ANDRON USOLTSEFF /S/

10. DATE 6/26/08

11. CONTRACTOR OR AUTHORIZED AGENT'S NAME (PRINT HERE)
ANDRON USOLTSEFF

12. ODF CONTRACT MANAGER SIGNATURE
Burke Mayer /S/

13. DATE 6/27/08

14. ODF CONTRACT MANAGER'S NAME AND TITLE
Burke Mayer, Interim Chief Procurement Officer

15. AUTHORIZED USA CONTRACTING OFFICER SIGNATURE
Madeline Small for Steve Shapiro /S/

16. DATE 6/27/08

17. AUTHORIZED USA CONTRACTING OFFICER'S NAME AND TITLE
Steve Shapiro, Contracting Officer