



**Skeeter BassFan Army
Contingency Claim Form and Affidavit**

Return completed form by mail to:

**BassFan LLC
ATTN: Army Contingency Program
P.O. Box 10508
Portland, OR 97296**

1) TRAIL NAME: _____

2) TRAIL EVENT: _____

3) DATE OF EVENT: _____

4) SPECIFIC CONTINGENCY SPONSOR PRODUCT USED:

5) I, _____ (print your name), hereby attest that I finished 1st (or whichever place contingency requires) in the above event.

6) My address is:

7) _____
(signature)

Note: Complete one contingency form for each contingency partner product used.