



## Hunters Helping the Hungry Program Meat Processor Application Form

Only meat processors that are inspected by the United States Department of Agriculture or the Nebraska Department of Agriculture are eligible to apply.

**APPLICATIONS MUST BE COMPLETED AND RETURNED BY SEPTEMBER 1<sup>ST</sup>**

**Please direct questions and comments to Program Coordinator Jordyn Riha:**

Phone: (402) 471-5430 or email: Jordyn.riha@nebraska.gov.

This application is not a binding contract. The Nebraska Game and Parks Commission will select and offer contracts to eligible processors. Selection may be based on the expected number of donated deer in the area, availability of charitable organizations to distribute venison, and the number of deer the processor is willing to process\*\*.

**2024-2025 Season Dates:**

**Archery:** Sept. 1, 2024 – Dec. 31, 2024

**Special Landowner:** Nov. 9, 2024 – Nov. 11, 2024

**November firearm:** Nov. 16, 2024 – Nov. 24, 2024

**Muzzleloader:** Dec. 1, 2024 – Dec. 31, 2024

**October River Antlerless Firearm:** Oct. 1, 2024 – Oct. 15, 2024

**Late Antlerless Only Firearm:** Jan. 1, 2025 – Jan. 15, 2025

**Antlerless Only Season Choice:** Sept. 1, 2024-Jan. 15, 2025

**Limited Landowner:** Sept. 1, 2024-Jan. 15, 2025

To streamline processing, **attach documentation of your most recent inspection** by the U.S. Department of Agriculture or Nebraska Department of Agriculture.

Business/Legal Name

Owner/Contact Name

Phone number

email address (if available)

Mailing Address (Street Address, PO Box, City, State, Zip)

Dates willing to accept deer (xx/xx/xx – (xx/xx/xx))

Previous Participant YES  NO

Number of deer willing to accept \_\_\_\_\_

If yes, # of bags remaining \_\_\_\_\_

**YOU MUST** – nominate below a local charitable food distribution organization to pick up and distribute venison from your location. Your contract will identify the charitable organization that **you will contact to arrange for pick up** and distribution of the packaged and frozen venison. **If you leave this section blank**, your contract will list a charitable food distribution organization **deemed by the Nebraska Game and Parks Commission**.

Charitable Organization Legal Name

Contact Name

Phone number

email address (if available)

Mailing Address (Street Address, PO Box, City, State, Zip)

website address (if available)

**Please return by postal mail:**

Attention: Jordyn Riha  
Nebraska Game & Parks Commission  
2200 N 33<sup>rd</sup> St,  
PO Box 30370  
Lincoln, NE 68503-0370

**by fax:**

Attention: Jordyn Riha  
(402) 471-4992

**or by email:**

Jordyn.riha@nebraska.gov

Website: [www.OutdoorNebraska.org/HHH](http://www.OutdoorNebraska.org/HHH)