

RETURN TO:

**AFFIDAVIT OF ANNUAL REPRESENTATION OF MINING CLAIMS**

STATE OF MONTANA

County of \_\_\_\_\_

Of lawful age, and as locator (s) or as the locator(s) authorized agent(s), being duly sworn make the following statement(s) for and behalf of the mining claim(s) hereinafter described:

CLAIM NAME	BLM SERIAL NO.	LOCATION/AMENDMENT COUNTY RECORDATION, BOOK/PAGE

(Additional claims may be listed on the reverse side of this affidavit.)

Total No. (page 1) of Mining Claims: \_\_\_\_\_ x \$10 BLM Service Charge = \$ \_\_\_\_\_

The said mining claim(s) is/are located in Section \_\_\_\_\_, Township \_\_\_\_\_ Range \_\_\_\_\_ in \_\_\_\_\_ County, State of Montana.

The dates and the number of days work was done or improvements were made, and the character of the work and value of improvements placed thereon; or verified report of geological, geochemical or geophysical work relied upon and as required by Section 28-1 of Title 30 of the United States Code are described and identified as follows:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The work done and/or improvements made were made at the instance and request of

the locator(s) of said claim(s). The actual amount paid for work and improvements is paid by

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_ by \_\_\_\_\_

Notary Public for the State of \_\_\_\_\_ Residing at \_\_\_\_\_ My Commission expires \_\_\_\_\_

**RECORDER'S OFFICE**

\_\_\_\_\_, Montana

Filed for record on the \_\_\_\_\_ day of \_\_\_\_\_, A.D. 20 \_\_\_\_\_ at \_\_\_\_\_ o'clock \_\_\_\_\_ M, and recorded in Volume \_\_\_\_\_ of Affidavits of Annual Representation Page \_\_\_\_\_

\_\_\_\_\_  
County Recorder  
By Deputy

Fee \$ \_\_\_\_\_

