WHEN RECORDED RETURN TO:

Thomas Fassish	Skamania County, WA Total:\$257.50
P.O. BOX 118	Pgs=5 Request of: THOMAS FARRISH
Randle, WA 98377	00011429202100039700050053
1-360-520-5229	•
· · ·	
DOCUMENT TITLE(S)	
Affidavit of Annal Asse REFERENCE NUMBER(S) of Documents assigned or released	sment of work
REFERENCE NUMBER(S) of Documents assigned or released	d:
ORMC171387. (2014000	392)
Additional numbers on page of document.	4.7
GRANTOR(S): Thomas James F.	Lesist
[] Additional names on page of document,	1
	nning claim
[] Additional names on page of document. LEGAL DESCRIPTION (Abbreviated: i.e. Lot, Block, Plat or Se	ection, Township, Range, Quarter):
515 TION R.80	
[] Complete legal on page of document.	
TAX PARCEL NUMBER(S):	
N/A	
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The Auditor/Recorder will rely on the information provided on this verify the accuracy or completeness of the indexing information.	ionn, the stair will not read the document to
I am requesting an emergency nonstandard recording	
RCW 36.18.010. I understand that the recorded pro-	
or otherwise obscure some part of the text of the original Company Name:	ginal document.
Signature/Title: Thomas F	255 = 11/22/2021

Form 3830-004 (January 2020)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED OMB NO.: 1004-0114 Expires: April 30, 2023

AFFIDAVIT OF ANNUAL ASSESSMENT WORK

added, as the annual assessment work for the assessment year ending September 1, 2021 for the following contiguous unpatented mining claim(s), located in the County of Skamamio, in the State of								
ADDRESS: P.O.BOX 118	WHEN RECOI	RDED, MAIL DOCUMENT T	Г О :					
FOR COUNTY RECORDER'S USE No. of Claims x \$15/claim Total due BLM \$	NAME: The	omas Fassish	<u>/</u>	_				
FOR COUNTY RECORDER'S USE No. of Claims x \$15/claim Total due BLM \$	ADDRESS:	P.O.BOX 118						
TO ALL WHOM IT MAY CONCERN: 1. The undersigned certifies that at least \$100 per claim was expended for development, labor and improvements, or equivalent value added, as the annual assessment work for the assessment year ending September 1,	CITY, STATE, 2	CIP: Randle, WA	28377	<u>, </u>		FOR C	OUNTY RECORDER'	'S USE
To ALL WHOM IT MAY CONCERN: 1. The undersigned certifies that at least \$100 per claim was expended for development, labor and improvements, or equivalent value added, as the annual assessment work for the assessment year ending September 1,				.0	7	7	No. of Claims	1
TO ALL WHOM IT MAY CONCERN: 1. The undersigned certifies that at least \$100 per claim was expended for development, labor and improvements, or equivalent value added, as the annual assessment work for the assessment year ending September 1,			(7 .∢	. N		x \$15/claim	
1. The undersigned certifies that at least \$100 per claim was expended for development, labor and improvements, or equivalent value added, as the annual assessment work for the assessment year ending September 1,				X	J.,		Total due BLM \$	5.00
added, as the annual assessment work for the assessment year ending September 1, 2021 for the following contiguous unpatented mining claim(s), located in the County of Skamamia, in the State of , in the State of , in the State of Example: 13N 5E 14 MDM Book and Page No. Date	TO ALL WHON	M IT MAY CONCERN:	×		₹.,		4.	
BLM Serial No. Name of Claim Tp Rg Sec Mer County Recordation Example: 13N 5E 14 MDM Book and Page No. Date	1. The undersign added, as the contiguous un	ned certifies that at least \$100 per cannual assessment work for the assessmented mining claim(s), located	claim was sessment y in the Cou	expended ear endin	for devel g Septem	opment, l ber 1,	abor and improvements, or for the foll	equivalent value lowing
Example: 13N 5E 14 MDM Book and Page No. Date		WA		·		1		
	BLM Serial No.	Name of Claim	1 -	_				_
	ORMC 171387	Laskin Joy 2	15	ION	8E)	20140003	03-06-2014
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2. Type of labor and improvements (specify what was done and give the total value for that labor and improvement to show at least \$100 for each claim). If a geological, geochemical, or geophysical survey was performed, as per 30 U.S.C. 28-1, reference the title of the report of survey, give cost and date of the survey and report, and indicate it was filed with the County Recorder:

Description of Work Performed	Value of Work Performed	Date Work Was Performed
removed downed trees off official	1100.00	08/29/2021
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neggets.		

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undersigned testifies that on the erected upon the subject claim	<u> </u>			
•	in. Be sure to indicate if there	in. Be sure to indicate if there is a change of addresse (please print) Curi	in. Be sure to indicate if there is a change of address: Current Mailing Address (please print)	e (please print) Current Mailing Address (please print) (-3

I hereby certify under penalty of perjury under the laws of the State of		WA		_that th	ne foregoing	g statements
are true and correct:				, ,	,	
(Signature of person responsible for above statement)	_ Date:		11/	<u> 22/</u>	2021	
(Signature of person responsible for above statement)			V	•		

Title 18 U.S.C. 1001 and 43 U.S.C. 1212 make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

Notary Rlock

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SUBSCRIBED AND SWO	DRN TO before me, this _ 22 rd	day of_	november	20 <u>21</u>
By: Mardil	Dartine			inniming.
,	(Signature of Affiant)	-	Sunt	ADANTIN
Title: Notany	Dublic	t		JAN SAN SAN SAN SAN SAN SAN SAN SAN SAN S
My Commission Expires:	2-09-2022		BA	NO NO
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INSTRUCTIONS

- 1. This is an optional form that may be used to satisfy the requirements for the Bureau of Land Management (BLM) under the provisions of 43 U.S.C. §1744 and 30 U.S.C. §28-28d and the regulations thereunder (43 CFR part 3835). Since local and State laws may vary, you should contact your local and State agencies where the claims are located to ensure all applicable laws and requirements are satisfied.
- 2. The claimant(s) must fill in the date in paragraph 1 for the applicable assessment year and the county and state where the claims are located.
- 3. All claim names and BLM serial numbers for which this assessment affidavit applies must be listed. Additionally, legal descriptions, and original county recording information may be listed for additional identification purposes.
- 4. The claimant(s) must complete paragraph 2 listing all labor or improvements which was performed on or did benefit the subject mining claims. The value and date of the labor or improvements must also be listed. The total amount of labor or improvements can be listed, but the total expenditure must equal at least \$100 for each claim.
- 5. The names and current mailing addresses of the person(s) performing the labor must be listed in paragraph 3.
- 6. The name and current mailing address of each owner (claimant) of the claims must be listed in paragraph 4. The mailing address shall be the owner's address and not the address of an agent or anyone representing the claimant. Be sure to note if there has been a change of address.
- 7. Paragraph 5 shall be completed to show the date it was verified that all monuments required by law were properly erected, all notices were posted, and that corners were appropriately designated for all claims listed.
- 8. An exact legible reproduction or duplicate (other than microfilm or other electronic media) of this affidavit or another type of affidavit of assessment work that you file or will file in the county where each claim is located, must be filed with the BLM on or before December 30 of the calendar year in which the assessment year ends. For mill or tunnel sites, a separate notice of intent to hold must be filed with the BLM on or before December 30. Requirements for filing a notice of intent to hold can be found at 43 CFR 3835.33.
- 9. A processing fee of \$15 for each claim listed must be remitted to the BLM along with this or any other affidavit of assessment work.

(Continued on Page 4) (Form 3830-004, Page 3)

NOTICES

THE PRIVACY ACT and 43 CFR 2.223(d) require that you be furnished with the following information in connection with the information requested by this form.

AUTHORITY: 30 U.S.C. §28-28d and 43 CFR part 3835 permit collection of the information requested by this form.

PRINCIPAL PURPOSE: The BLM will use the information you provide to document compliance with 43 U.S.C. 1744 and that assessment work has been completed in accordance with 30 U.S.C. § 28-28d and 43 CFR part 3835 in lieu of paying the maintenance fee for the mining claims listed on this form.

ROUTINE USES: The BLM will only disclose this information in accordance with the provisions at 43 CFR 2.231(b) and (c). **EFFECT OF NOT PROVIDING INFORMATION:** Disclosure of the requested information is required by 30 U.S.C. § 28-28d and 43 CFR part 3835 for claimants qualified to perform assessment work in lieu of paying the maintenance fee. Failure to submit all the requested information or to complete this form will delay the BLM's processing of the form and may preclude the BLM's acceptance of the assessment work information, which may result in forfeiture of the mining claim(s) by the claimant.

RELEVANT SYSTEM OF RECORDS NOTICE (SORN) CITATION: The Recordation of Mining Claims SORN may be found at 47 FR 55326 (December 8, 1982).

THE PAPERWORK REDUCTION ACT requires us to inform you that:

Use of this form is optional. You must perform assessment if a waiver to pay the maintenance fee has been requested. This form is provided to help you attest that annual assessment work has been completed in lieu of paying the maintenance fee for your claim(s). Submission of the requested information is necessary to obtain or retain a benefit.

You do not have to respond to this or any other Federal agency-sponsored information collection unless it displays a valid OMB control number.

BURDEN HOURS STATEMENT: The estimated public reporting burden for this form is 30 minutes per response, including the time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. You may submit comments regarding the burden estimate or any other aspect of this form to: U.S. Department of the Interior, Bureau of Land Management (1004-0114), Bureau Information Collection Clearance Officer (WO-630), 1849 C Street, N.W., Room 2134LM, Washington, D.C. 20240.