Skamania County, WA Total:\$358.50 MINE Pgs=6

2025-002049

12/18/2025 10:22 AM

Request of: CHRISTOPHER NAVOLYNSKI

00023018202500020490060062

WHEN RECORD	ED RETU	IRN TO:	
Christopher	Mayor	lynsk.	<u> </u>
700 Mide	He For	k rd	
Onalaska		98570	
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e information Washington State Recorder's Cover Sheet (RCW 65:04)

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DOCUMENT TITLE(S) (or transaction contained therein) (all areas applicable to your document must be
filled in)
P.O.L assesment work REFERENCE NUMBER(S) of Documents assigned or released:
REFERENCE NUMBER(S) of Documents assigned or released:
[] Additional numbers on page of document.
GRANTOR(S):
1. Christopher Havolynski 2.
3
[] Additional names on page of document.
GRANTEE(S): 5 Gnorty Onnyon = 101474028
Comment and the second
1. HK HoPe-101381834 68.CTS mine #2-101622365
2. Fan - O Gald - 101640854 7. Champ Oreck#1 - 101359016 - 2. Hope #2-101480978
2. Comp. Creek#1 - 101359016
Additional names on page of document.
LEGAL DESCRIPTION (Abbreviated: i.e. Lot, Block, Plat or Section, Township, Range, Quarter):
Sec Township Ry mer
LEGAL DESCRIPTION (Abbreviated: i.e. Lot, Block, Plat or Section, Township, Range, Quarter): Sec Township Rq mer 10 10 n SE William He
[] Complete legal on page of document
Assessor's Property Tax Parcel #
[] Additional parcel numbers on page of document.
The Auditor/Recorder will rely on the information provided on this form. The staff will not read the document to
verify the accuracy or completeness of the indexing information.
"I am signing below and paying an additional \$50.00 recording fee (as provided in RCW 36.18.010 and
referred to as an emergency nonstandard document), because this document does not meet margin and formatting requirements. Furthermore, I herby understand that the recording process may cover up or
otherwise obscure some part of the text of the original document as a result of this request."
Note to Submitter: Do NOT sign above nor pay additional \$50 fee if the document meets margin/formatting
Note to Sobmitter: Do NOT sign above nor pay additional \$50 fee if the document meets margin/iormatting requirements.
requirements.

Form 3830-004 (January 2020)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED OMB NO.: 1004-0114 Expires: May 31, 2027

AFFIDAVIT OF ANNUAL ASSESSMENT WORK

when recorded, Mail document to: NAME: Chistophe Role Plauslynsh. Address: 700 Middle Fock rol CITY, STATE, ZIP: Onalaska Wa 98570	FOR COUNTY RECORDER'S USE
	No. of Claims
TO ALL WHOM IT MAY CONCERN:	
1. The undersigned certifies that at least \$100 per claim was expende added, as the annual assessment work for the assessment year endi unpatented mining claim(s), located in the County of Skaws	ng September 1, 2085 for the following contiguous
BLM Serial No. Name of Claim Tp Rg	Sec Mer County Recordation Co. Recording

BLM Serial No.	Name of Claim		Rg nple: 13N			County Recordation Book and Page No.	Co. Recording Date
101381834	HK HOPE	lon	88	4	willard	156749	
101640854	Pan-0 601d	16 5	88	4	Willia	154172	
101484451	Hope#Z	16 n	88	4	Wilm	/5/13/	
101431722	My Chance	lon	88	3	Willia	15/132	
101474028	Gnarly Canyon	10n	88	16	Willm	155948	
101622365	CJS mine #2	10 n	88	10	Wilm	164700	
1	Camp Creek#1	10 n	88	10	Willama	t 170900	
101480978	BiG Daddy	10 n	28	10	willm	147543	
101622364	CJS mine #1	10 n	88	/5_	Willm	164699	
1							

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
HKHope - 2 Persons 5 hrseach Slaving	#100	4-5-2025
Pane-Gold-3 Persons 5hrs each Panning Sheicing	\$ 150	4-12-2025
Hope #2-2 Per Sons 5 hrs each Panning Sluicing	s # 100	4-19-2025
my Chance - 2 Persons 5his each Panning Slaw	ing #100	4-26-2025
Gnorly Canyon - 3 Persons 5 hrs Each Panaing Shice	ing \$ 150	5-3-2025

who performed the labor and improvements.
Current Mailing Address (please print)
200 middle fork od Onahska WA 98570
700 middle Fork rd Onglaska WA 9857
746 Telegraph od Winlock WA 98596
21501 122nd Street Court & Bonney lake WA
96391
who holds and claims the subject mining claim(s) for the valuable minerals contained
nge of address:
Current Mailing Address (please print)
P.O.Bax 343 Pockwood WA 98361
700 middle fort of onalaska WA 98570
700 middle Fork nd onalaska Wa 98570
PO Bot 343 Pachword WA 98361
124 Lentz Rd Winlock WA 98596
124 Lentz Rd Winiack WA 40046
of Sept 1st , 2025, all monuments required by law

claim to which it pertains and the name of the claim(s).

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
CJS Mine#2 3 Persons Shrseach Shice /Pan	\$ 150.00	5-10-2025
Camp Creek#1 3 Persons Shis each Slyice /Pan	# 150.00	5-17-2025
Big Daddy 4 Persons 5his each Sluice/Pan	# 2000	5-24-2025
CJS Mine #1 4 Persons 5 hrs each Sluce /Pan	# 200 co	5-31-2025
	. 0	1

3.	Name and mailing address of each person who p	performed the labor and improvements:
	Name (please print) Edward Rico (pril Rico (Rico) Christopher lavolynch: Charity aldrich	Current Mailing Address (please print) 746 Telegraph od Winlock WA 98361 746 Telegraph od Winlock WA 98361 230 middle fork od Onalaska WA 98570 700 middle fork od Onalaska WA 98570
4.	Name and mailing address of each person who he therein. Be sure to indicate if there is a change of the sure of th	Current Mailing Address (please print) PO Box 343 Pack wood WA 98361 PO Box 343 Pack wood WA 98361 Too middle fork adordsha & wa 98570 200 middle fork ad onalasha WA 98570 134 Lentz rd Winlark WA 98596
5.		, 20 25, all monuments required by law notices required by law were posted on the subject claim(s) or copies thereof were the bore or contained markings sufficient to appropriately designate the corner of the

2020 004 B

I hereby certify under penalty of perjury under the laws of the State of WASKERON that the foregoing statements are true and correct: Date: 12-9-2025 (Signature of person responsible for above statement)
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 Block

SUBSCRIBED AND SWORN TO before me, this	gth	_ day of) ccembe,	r = 1	20 25
т. (a / (•		- 4		A.

(Signature of Affiant)

Title: WULLY PUBLIC

My Commission Expires: July 9, 2028

CASEN CARTER
NOTARY PUBLIC #24025183
STATE OF WASHINGTON
COMMISSION EXPIRES
JULY 9, 2028

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.

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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.