Certificate of Location of Lode Mining Claim TO ALL WHOM IT MAY CONCERN: The undersigned hereby certifies (certify) that he (she, they) has (have) located the cty Sect to Lode Mining Claim in Section 10., Township 2.1., Range 2.2. in the Mining District, in 12.2. County, in the State of Nevada, on the 12.2. day of 2014, 1929. The name(s) and post office address(es) of the locator(s) is (are) (please print): _feet long and LCC _feet wide, and $\frac{732}{}$ on each side of the center of the claim. The general course of the lode deposit and premises is from ____ to the _____; The location and number of each corner of this claim is shown on the claim map that is filed herewith. On the ground, each corner of the claim is marked with its appropriate number by_ 440 1117717 (Describe method of marking, such as "scribing the wood") The description of each corner is as follows (describe the corner(s), such as "4x4 wooden Corner No. 6 is a 🏯 The monumentation and marking of the corners was completed by the . 19_2 (Must be within 20 days of posting notice of location) of this claim map have been filed with the . claim filing fee has been paid to the County Recorder. (Locator sign here) 68393 RECORDER'S STAME Note 1: Two copies of this certificate and two copies of the claim map must be filed, and the \$15 filing fee must be paid, within 90 days after the RECORDED AT THE REQUEST CO date of posting Notice of Location. Freaman Churchfield Note 2: "Every person who willfully and knowing-June 5 of OO min. part 2 P. M. in Book 70 of OFFICIAL RECOIDS, page 399 RECORDS ly makes a false material statement on the location certificate or on any map required by this chapter shall be guilty of a felony, and upon conviction thereof shall be imprisoned in the state prison for OF EUREKA COUNTY, NEVADA not less than 3 years nor more than 10 years." NRS 517.300, Subsection 2. WILL A. DOPAOLI 12. No. 68393 Fee \$ 3.00 Note 3: The claim map of this claim is filed in the Eureka County Recorder's Officers Eureka County Recorder's Office as Document No. 68396. (may be filled in by

CARLISLE FORM NO. 56 N

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