PROOF OF ANNUAL LABOR

[Performance and Completion of Assessment Work]

and says, that_he_ (has) (have) caused work to be performed, and/or improvements completed up August 1, 1979, on or for the	STATE OF MEVADA]_m.	\
and says, that_he_ (has) (have) caused work to be performed, and/or improvements completed up August 1	COUNTY OF Lincoln	J	\
August 1 1979 on or for the Summit # 1 and Summit # 2 Index mining claim(s) situated in the Lincoln County, State of Summit # 2 County, State of Summit # 2 Mining District MeVADA Mining District Mevant Medical Summit # 2 County, State of Summit # 2 Mining District Mevant Medical M	The Undersigned,Cliffo	rd Phillips	being first duly sworn deposes
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