FILED FOR RECORDING AT THE REQUEST OF

Paul Brown

2009 AUG 30 AM 11 06

LINCOLH COUNTY RECORDER
FEED 1500 DEP
LESLIE BOUCHER

MAINTENANCE FEE WAINER CERTIFICATION

Form 3830-2 (February 2003)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

MAINTENANCE FEE WAIVER CERTIFICATION?

FORM APPROVED OMB NO. 1004-0114 Expires: November 30, 2003

SEE INSTRUCTIONS	ON NEXT	PAGE
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1. This small miner waiver is file 2. The undersigned and all relate	d parties owned ten or	ear beginning at noo fewer mining claim	on on September 1, ms, mill, or tunnel sites lo	and ending at no cated and maint	on on September I,, ained on Federal lands in the United
	ed the assessment wor				g this waiver and understand that by
filing this form: an atfidavit of					
 The undersigned understand the year only); a notice of intent to 					those claims in their first assessment iling of this waiver.
5. The undersigned understand th a notice of intent to hold for th					nent of the maintenance fee; and that filing of this waiver.
6. The undersigned understand a	and acknowledge that	pursuant to 43 U.S	.C. 1212 and 18 U.S.C. 1	001; the filing	or recording of a false, fictitious, or
fraudulent document with the l					The state of the s
7. The mining claims, mill or tuni	ner sites for which this	waiver from payme	ent of the maintenance fees	is requested are	
	CLAIM OR SITE	NAME		BLM RECO	DRDATION SERIAL NUMBER
			_/	Nmc	870 538
	+ 2			Nnc	870539
3. BROWN 3	3			Nma	820540
4. BROWN	** 4		<u> </u>	Nmc	872541
5. BROWN	#5			NMC.	878572
	#6			Nmc	870543
1. BROWN	サブ ー			nmc	870544
8. BROWN	#3		/ /	NMC	870545
9. BRONN	79		/ / /	MMC	870546
10. BROWN	#10		\ \	NMC	870547
The owner(s) (claimants) of the a	bove mining claims an	d sites are:	\ \		
	\ \				
	lame - Please Print)]]	(Owner's S	Signature)
PAUL S KI	ROW W	· · · · · · · · · · · · · · · · · · ·			
P.o. Box 218	(State)	(Zip Code)			
Ploche	// V	8904	3	0 5/	
		0//-	Sacre	(<u> </u>	Sarry)
_	ame - Please Print)			(Owner's 3	Signature)
Paul S.	BROWN				
(Stree	et or P.O. Box)	/			
(City)	(State)	(Zip Code)			
(Owner's Name - Please Print)			(Owner's Signature)		
					_
(Stree	t or P.O. Box)				
1Cinn	(Stata)	/7in Code			\.\ *\ *\ *\ *\ \\ \\ \\ \\ \\ \\ \\ \
(City) (Continued on next page)	(State)	(Zip Code)		100	V 999